



P R O V I D E R B U L L E T I N

B T 2 0 0 2 1 4

A P R I L 1 , 2 0 0 2

To: All Providers

Subject: Targeted Case Management for Individuals with Developmental Disabilities and Related Home and Community-Based Services Waiver Changes

Overview

This bulletin is to notify providers of a new Medicaid State Plan service, Targeted Case Management (TCM) for Individuals with Developmental Disabilities. TCM was approved by the federal Centers for Medicare & Medicaid Services (CMS) in September 2001, effective July 1, 2001, to provide case management services to Medicaid-eligible individuals determined to meet the Bureau of Developmental Disabilities Services (BDDS) definition of having a developmental disability, as referenced in *Indiana Code 12-7-2-61(2)*. A level of care is not required for an individual to receive TCM. However, there are certain exclusions and limitation as described in this bulletin.

If an individual is receiving services through one of the Medicaid Home and Community-Based Services (HCBS) Waiver programs targeted for persons with a developmental disability, that individual shall receive TCM for Individuals with Developmental Disabilities. For individuals who do not receive services through a Medicaid HCBS Waiver program and who are enrolled in one of Medicaid's managed care programs, the individual may receive TCM for Individuals with Developmental Disabilities. However, the targeted case manager shall work in coordination with the managed care primary medical provider (PMP) who initiates the authorization process for all medical services for Hoosier Healthwise members in the *PrimeStep* program. Targeted case managers should coordinate medical services for members in a Hoosier Healthwise Managed Care Organization with the MCO.

In addition, effective October 1, 2001, CMS authorized the replacement of the Medicaid Intermediate Care Facility for the Mentally Retarded (ICF/MR) Home and Community Based Services Waiver with a new waiver, referred to as the Home and Community-Based Services Waiver for Persons with Developmental Disabilities (DD Waiver), to serve individuals with a developmental disability who require ICF/MR level of care. Among other changes to the DD waiver, effective October 1, 2001, case management services can no longer be provided as a waiver service, but must now be billed as a

Medicaid TCM service. Effective January 1, 2002, the Autism Waiver was also amended through CMS to remove waiver case management services which Medicaid TCM replaced. Additionally, a new waiver, Support Services Waiver, has been submitted to CMS with a requested effective date of April 1, 2002. Medicaid TCM will also provide the case management services for this new waiver program for persons with developmental disabilities.

Targeted Case Management

Case management for eligible individuals with developmental disabilities is a specialized form of case management to help eligible individuals gain access to needed vocational, habilitative, social, and other services in the least restrictive community setting that is appropriate for the individual. TCM consists of two components: *Intake Case Management* and *Ongoing Case Management*. Together, these components include responsibility for locating, managing, coordinating, and monitoring the following:

1. All proposed services
2. Needed medical, social, educational, and other publicly funded services, regardless of funding sources
3. Informal community support needed by eligible persons

Applying for Targeted Case Management Services

An individual interested in receiving TCM services should apply at the local BDDS district office or the nearest participating Area Agency on Aging (AAA).

Free Choice of Providers

TCM services for individuals with developmental disabilities will not restrict the individual's free choice of providers of other Indiana Health Coverage Programs (IHCP) services, nor will TCM be used to restrict access to other Medicaid State Plan services.

Eligible individuals of the target population may choose from any certified targeted case manager in their county of residence.

For individuals enrolled in certain Medicaid programs, there is free choice of targeted case management providers; however, the individual's choice of other providers will be affected by the individual's IHCP program enrollment. Members in the Hoosier Healthwise PrimeStep program can receive services from any IHCP provider with the appropriate prior authorization and PMP certification. Hoosier Healthwise members of an MCO may be required to obtain medical service from providers contracted with their MCO network.

Intake Targeted Case Management

The Indiana Division of Disability, Aging, and Rehabilitative Services (DDARS) BDDS district offices and participating local AAA offices will provide the intake component of TCM. Intake TCM includes processing initial referrals and applications, collection of current diagnostic collateral and assessments, determining eligibility for State-funded and DD Waiver funded services, and communication with the ongoing TCM.

Note: Only a qualified mental retardation professional with BDDS, a local AAA, or the Office of Medicaid Policy and Planning (OMPP) can determine whether an individual in the intake process is eligible for services requiring ICF/MR level of care.

Ongoing Targeted Case Management

The ongoing case management component of TCM services for individuals with developmental disabilities shall be provided by any entity that wishes to become an IHCP provider and meets State requirements (excludes BDDS). Ongoing TCM includes continuing TCM/HCBS waiver eligibility determinations, person-centered planning of strengths and needs for services, links to community services, monitoring service delivery, utilization and outcomes, coordination of crisis services, and transitioning individuals out of ICFs/MR and nursing facilities to the community.

Residents of institutions are only eligible to receive TCM in the final six months of de-institutionalization if they are being discharged to a community placement.

Note: Individuals receiving waiver case management services under another waiver may not receive TCM services.

Case Manager Certification and Medicaid Enrollment

To apply to become a provider of ongoing TCM activities, interested parties should contact:

**Indiana Family and Social Services Administration
Division of Disability, Aging, and Rehabilitative Services
Bureau of Fiscal Services
Attn: Targeted Case Management Provider Enrollment
402 West Washington Street, W-451
P.O. Box 7083, MS21
Indianapolis, IN 46207-7083
(317) 233-9675**

Note: Until DDARS has certified the TCM as meeting the State requirements, EDS cannot enroll them as an IHCP provider.

Billing Information

All TCM services are billed directly to EDS, using the procedure codes in Table 1.

Table 1 – TCM Service Procedure Codes

Service	Procedure Code	Units
Intake Targeted Case Management	Z5140	¼ hour
Ongoing Targeted Case Management	Z5141	¼ hour

The intake targeted case manager can bill for services through the time the case and all related information are given to the ongoing targeted case manager.

The ongoing targeted case manager begins billing for services the day after the case is transitioned from the intake targeted case manager. If a client requires more than the 10 hours per month of ongoing TCM in a year, the ongoing targeted case manager must submit a written request to the local BDDS office, specifying the amount of additional case management needed, and justifying why it is needed. The request can be submitted by e-mail.

Additional Information

Address questions about the information in this bulletin to the EDS Customer Assistance Unit at (317) 655-3240 in the local Indianapolis local area or 1-800-577-1278, Option 3.

CDT-3/2000 (including procedure codes, definitions (descriptions) and other data) is copyrighted by the American Dental Association.

© 1999 American Dental Association. All rights reserved.

Applicable Federal Acquisition Regulation System/Department of Defense Acquisition Regulation System (FARS/DFARS) Apply.

CPT codes, descriptions and other data only are copyright 1999 American Medical Association (or such other date of publication of CPT).

All Rights Reserved. Applicable FARS/DFARS Apply.