

19. Case Management Services

Rate(s):

For the Mentally Ill, Developmentally Disabled, and Children up to age 21 participants, one reimbursement rate will be paid for care plan development and case management services. The statewide reimbursement rate for a service coordinator and a paraprofessional was derived by using surveyed direct care staff data adjusted for employment related expenditures; non-productive time including vacation, sick time, and holiday; and an indirect general and administrative cost based on surveyed data.

The following CPT codes represent the case management service codes paid at the same rate:

Code	Description	Population
G9007	Plan Development	Developmentally Disabled
G9012	Plan Development	Children up to age 21
H0031	Plan Development	Mental Health
G9002	Targeted Service Coordination	Developmentally Disabled
G9002	Targeted Service Coordination	Children up to age 21
T1017	Targeted Service Coordination	Mentally Ill
H2011	Community Crisis Support	Developmentally Disabled
H2011	Community Crisis Support	Children up to age 21
H2011	Community Crisis Support	Mentally Ill

The fee schedule for the above listed codes and any annual/periodic adjustments to the fee schedule for the above listed codes are published at the following web site:

<http://www.healthandwelfare.idaho.gov>

The fee schedule was last updated on 07/01/11 to be effective for services on or after 04/01/11.

Except as otherwise noted in the plan, State-developed fee schedules are the same for governmental and private providers of plan development, targeted service coordination, and community crisis support.

Unit Definition:

A unit of service is equivalent to fifteen (15) minutes. Minutes of service provided to a specific individual can be accrued over one calendar day. The number of units that may be billed during a day is equivalent to the total number of minutes of TCM provided during the day for a specific individual divided by fifteen plus one additional unit if the remaining number of minutes is eight (8) or greater minutes.

Claims Payment Process:

The MMIS will assure that each participant does not get billed for more than twenty four (24) 15-minute units a year for plan development services for developmentally disabled. Twenty-four (24), 15-minute units a year for plan development services for mentally ill and for children up to age 21 participants. The MMIS will assure that each participant does not get billed for service coordination services for more than eighteen (18) 15-minute units a month for developmentally disabled, twenty (20) 15-minute units a month for mentally ill, and eighteen (18) 15-minute units a month for children up to age 21 participants.

Unit Billing Limitations:

Case management services unit billing is limited to the amount of time a case manager works in a day and cannot include time that is non-billable as established in Idaho Administrative Code Rule.

Post Review:

Idaho Medicaid will prior authorize units that exceed the established limit in cases where individuals receiving services meet medical necessity criteria established in Idaho Administrative Code Rule. If any such claim does not meet the criteria for medical necessity, Idaho Medicaid will recoup overpayments. The recoupment of payments will be processed as an adjustment to future or current period payment.

20. Special Services Related to Pregnancy – Payment for Risk Reduction Follow-up, Individual and Family Social Services, Nutrition Services, Nursing Services, Maternity Nursing Visits and Qualified Provider Risk Assessment and Plan of Care will be reimbursed at the lowest of:

- A. The provider's actual charge for the service; or
- B. The provider's median charge for a given service; or
- C. The maximum allowable charge for the service as established by the Department's Medical Assistance Unit on its pricing file.

The fee schedule and any annual/periodic adjustments to the fee schedule for special services related to pregnancy are published at the following web site:

<http://www.healthandwelfare.idaho.gov>

The fee schedule was last updated on 07/01/2011 to be effective on or after that date.