

HUMAN SERVICES DEPARTMENT[441]

Amended Notice of Intended Action

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services proposes to amend Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” and Chapter 90, “Targeted Case Management,” Iowa Administrative Code.

Proposed amendments to update coverage and payment provisions for Medicaid case management services were published in the Iowa Administrative Bulletin on February 9, 2011, as **ARC 9367B**. This Notice amends that filing by adding new Item 4 and revising renumbered Item 7 to rescind and reserve subrule 90.8(2). The effect of these changes is to:

- Remove the requirement for making emergency access to the case manager available 24 hours per day, and
- Add requirements that the member’s crisis plan shall contain after-hours contact information for all persons or resources identified for the member and an alternate contact to be used in the event that an individual provider who is not employed by an agency does not show up to provide services as scheduled.

The requirement to maintain 24-hour access has been a continuing issue for case management agencies due to the expense of the system and the limited number of case managers to cover the hours.

The remaining amendments:

- Clarify when contacts made by E-mail are an allowable case management activity.
- Clarify that targeted case management is not reimbursable when case management activities are provided through an assertive community treatment (ACT) program.
- Correct outdated terminology, remove outdated effective dates and remove language on child welfare decategorization counties that is no longer applicable.

These amendments do not provide for waivers in specified situations. Requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

Any interested person may make written comments on the proposed amendments on or before April 26, 2011. Comments should be directed to Mary Ellen Imlau, Bureau of Policy Coordination, Department of Human Services, Hoover State Office Building, 1305 East Walnut Street, Des Moines, Iowa 50319-0114. Comments may be sent by fax to (515)281-4980 or by E-mail to policyanalysis@dhs.state.ia.us.

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 249A.4.

The following amendments are proposed.

ITEM 1. Rescind rule 441—78.33(249A) and adopt the following **new** rule in lieu thereof:

441—78.33(249A) Case management services. Payment will be approved for targeted case management services that are provided pursuant to 441—Chapter 90 to:

1. Members who are 18 years of age or over and have a primary diagnosis of mental retardation, developmental disabilities, or chronic mental illness as defined in rule 441—90.1(249A).
2. Members who are under 18 years of age and are receiving services under the HCBS intellectual disability waiver or children’s mental health waiver.

This rule is intended to implement Iowa Code section 249A.4.

ITEM 2. Amend paragraph **79.1(1)“d”** as follows:

d. Fee for service with cost settlement. ~~Effective July 1, 2009, providers~~ Providers of case management services shall be reimbursed on the basis of a payment rate for a 15-minute unit of service based on reasonable and proper costs for service provision. The fee will be determined by the department with advice and consultation from the appropriate professional group and will reflect the amount of resources involved in service provision.

(1) to (3) No change.

ITEM 3. Amend subparagraph **79.1(24)“a”(1)** as follows:

(1) ~~Effective July 1, 2009, a~~ A unit of case management is 15 minutes.

ITEM 4. Amend subparagraph **90.5(1)“b”(5)** as follows:

(5) Include an individualized crisis intervention plan that identifies the supports available to the member in an emergency. A crisis intervention plan shall identify:

1. Any health and safety issues applicable to the individual member based on the risk factors identified in the member’s comprehensive assessment.

2. An emergency backup support and crisis response system, including emergency backup staff designated by providers, to address problems or issues arising when support services are interrupted or delayed or the member’s needs change. The crisis plan must include after-hours contact information for all persons or resources identified for the member.

3. An alternate contact to be used in the event that an individual provider not employed by an agency does not show up to provide services as scheduled.

ITEM 5. Amend subparagraph **90.5(1)“e”(2)** as follows:

(2) The case manager shall have at least one contact per month with the member, the member’s legally authorized representative, the member’s family, service providers, or other entities or individuals. This contact may be face-to-face or by telephone. The contact may also be by written communication, including letters, E-mail, and fax, when the written communication directly pertains to the needs of the member. E-mail contacts are allowed only when other means of communication are not feasible for the member, representative or family and the necessity for E-mail communication is documented in the member’s comprehensive service plan. A copy of any written communication must be maintained in the case file. When E-mail communication is used, there must be clear two-way communication in the member’s record showing an exchange of information as well as follow-up activity related to the information.

ITEM 6. Amend subrule 90.5(2) as follows:

90.5(2) Exclusions. Payment shall not be made for activities otherwise within the definition of case management when any of the following conditions exist:

a. The activities are an integral component of another covered Medicaid service, including but not limited to assertive community treatment (ACT).

b. to e. No change.

ITEM 7. Rescind and reserve subrule **90.8(2)**.