



LEA Medi-Cal Billing Option Program

September 3, 2020

Targeted Case Management (TCM) Training



Introductions

California Department of Health Care Services (DHCS)

Administers the Local Educational Agency Medi-Cal Billing Option Program (LEA Program) and School-Based Medi-Cal Administrative Activities Program (SMAA Program)

Guidehouse (formerly Navigant Consulting)

Contractor to DHCS
Provides assistance to DHCS as a subject-matter expert



Agenda

Section	Topic
1	TCM Overview
2	TCM Billing Scenarios
3	PPL Review – TCM PPL #20-033
4	Coding TCM Moments



Section 1

TCM Overview



TCM Services: Definition

Service Definition

TCM services assist eligible children and family members to access needed medical, social, educational and other services when TCM is covered by the student's IEP or IFSP

- TCM services are written into the IEP/IFSP
- When 7+ continuous service minutes are rendered, a 15-minute increment can be billed
- **Components of TCM:**
 1. Comprehensive assessment and periodic reassessment of individual needs
 2. Development (and periodic revision) of a specific care plan
 3. Referral and related activities to help the eligible student obtain needed services
 4. Monitoring and follow-up activities



Components of TCM – Part 1

1. **Comprehensive assessment and periodic reassessment of student needs to determine the need for any medical, educational, social or other services.**

These assessment activities include:



Reviewing student's records, such as cumulative files, health history and/or medical records



Interviewing the student and/or parent/guardian



Observing the student in the classroom and other appropriate settings



Writing a report to summarize assessment results and recommendations for additional LEA services



Components of TCM – Part 2

2. Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that:



Specifies the goals and actions to address the medical, social, educational and other services needed by the student



Includes meeting with the student and parent(s) or guardian(s) to establish needs



Includes activities such as ensuring the active participation of the eligible student, and working with the student (or the student's authorized health care decision maker) and others to develop those goals



Identifies a course of action to respond to the assessed needs of the eligible student



Components of TCM – Part 3

- 3. Referral and related activities (such as scheduling appointments for the student) to help the eligible student obtain needed services including:**



Activities that help link the student with medical, social, educational providers or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan



Components of TCM – Part 4

4. Monitoring and follow-up activities:



Activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible student's needs, and which may be with the student, family members, service providers or other entities or students



Include at least one annual monitoring to determine whether: (1) services are being furnished in accordance with the student's care plan, (2) services in the care plan are adequate, and (3) changes in the needs or status of the student are reflected in the care plan



Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers. Periodic reviews will be completed at least every six months.



Coordinating TCM

DHCS recommends that each Medi-Cal eligible student is assigned one case manager who has the ability to provide students with comprehensive TCM services.

However, it is recognized that some students will receive TCM services from more than one agency or provider.

To avoid duplication of services and billing, LEAs must do the following:

- ✓ **Clearly document** the LEA and TCM services rendered by each TCM agency or provider
- ✓ Where necessary, **develop written agreements to define the case management service(s)** each agency and/or provider will be responsible for rendering



Documentation

Required documentation for TCM services **must include:**

- ✓ Service Plan
- ✓ Records of TCM activities
- ✓ Records with student and/or family progress



Section 2

TCM Billing Scenarios



Background

TCM services were suspended July 1, 2015



SPA 15-021 creates a **combined cost allocation methodology** between the SMAA and LEA Programs through RMTS



With the approval of SPA 15-021, TCM reimbursement has been **reinstated and can be retroactively claimed back to July 1, 2015**

SPA 15-021 restricts TCM reimbursement to the **IEP/IFSP population**.

However, DHCS has submitted **SPA 16-001** to CMS, which will expand LEA TCM services to the entire Medi-Cal population, **effective January 1, 2016**.



School-Based TCM Reimbursement

With the approval of SPA 15-021, the LEA Program was integrated into the RMTS process

In order to prevent duplication of reimbursement, LEAs will need to choose which school-based program to receive TCM reimbursement through:

- **Option 1:** The LEA Program as a Pool 1 Participant
- **Option 2:** The SMAA Program as a Pool 1 Participant

Note: Applicable only if the LEA participates in both the LEA Program and SMAA Program

- **Option 3:** The SMAA Program as a Pool 2 Participant



Option 1: Claiming TCM Through the LEA Program

- TCM practitioners must be in **Participant Pool 1**
- LEA must complete a **TCM Certification Form** that includes all practitioners they intend to bill TCM services for during the quarter
- Only scenario where TCM moments can be **coded to 2A**
- LEAs will **submit interim claims** for TCM services
- Pool 1 practitioner costs **will be included on the LEA Program CRCS** for the applicable quarter(s)
- Costs for practitioners identified on the TCM Certification Form **must be removed from the SMAA invoice** for the applicable quarter(s)



Option 2: Claiming TCM Through SMAA – Participant Pool 1

- Option 2 entails LEAs receiving **direct service reimbursement (except TCM)** through LEA BOP and TCM reimbursement through SMAA
- LEA **does not complete** the TCM Certification Form
- LEA **does not submit interim claims** for TCM Services
- TCM moments **not coded to 2A** (coded to 8, 10, or 12)
- Other direct service moments **could be** coded to 2A
- Pool 1 practitioner costs **will be included on the LEA Program CRCS** for the applicable quarter(s)
- Pool 1 practitioner costs can be **included on Tab 5 of the SMAA Invoice** (Payroll Data)

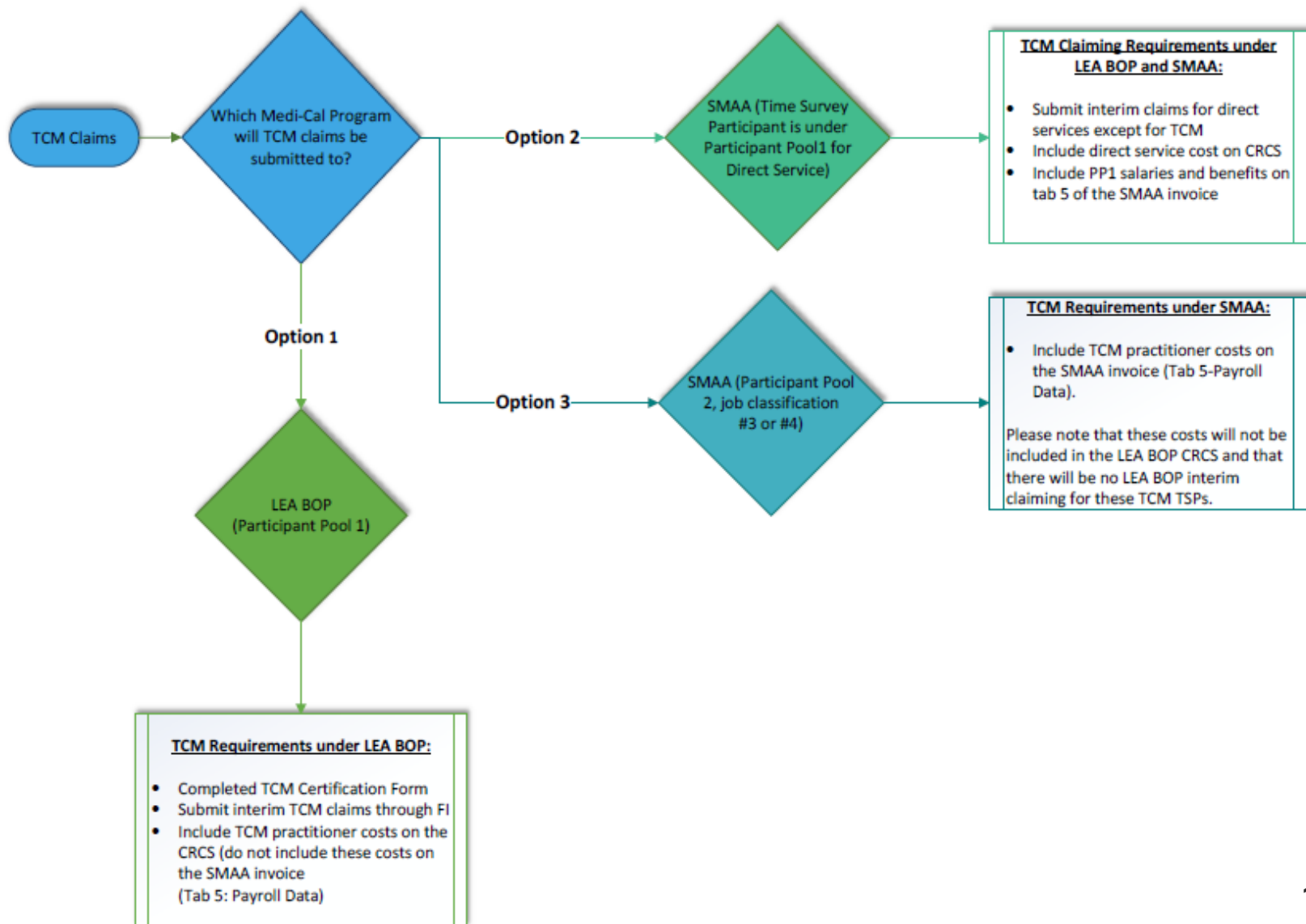


Option 3: Claiming TCM Through SMAA – Participant Pool 2

- **LEA does not complete** the TCM Certification Form
- TCM moments **not coded to 2A** (coded to 8, 10, or 12)
- **No LEA Program interim claiming**
- **No Pool 2 costs on the LEA Program CRCS**
- Pool 2 costs are **included on Tab 5 of the SMAA Invoice** (Payroll Data)



School-Based TCM Flow Chart





Section 3

PPL Review –

TCM PPL #20-033



TCM PPL #20-033

- On August 25th, DHCS sent an e-blast to all stakeholders that included **PPL #20-033** (“Notification of Reinstatement of Targeted Case Management Claiming for the LEA BOP”)
- E-blast included the **TCM Certification Form**
- The following slides will review **information from each section of the PPL:**
 1. Overview of New TCM Rate Methodology
 2. New TCM Qualified Rendering Practitioners
 3. Retroactive Claiming for TCM Services
 4. LEA BOP TCM Certification
 5. LEA BOP TCM Providers



1. New TCM Rate Methodology





Overview of New Rate Methodology

- SPA 15-021 approved a new rate methodology for TCM Services
- The old methodology was based on submission of an TCM Labor Survey, which resulted in high/medium/low rate structure
- SPA 15-021 creates **one rate** for TCM services, based on 15-minutes of the nurse hourly cost
- For FY 20-21, the TCM maximum allowable rate is **\$21.50 per 15-minute increment**



TCM Services: Billing

Billing of Service

- TCM services are billed in 15-minute increments
- All LEAs paid the same rate (*no high, medium, low rates*)
- Limited to **32 units** per student per day



Service	Proc Code	IDEA Modifier	Practitioner	Practitioner Modifier
Targeted Case Mgmt. Services	T1017	TL (IFSP) or TM (IEP)	<ul style="list-style-type: none"> • <i>Associate MFTs *</i> • <i>Reg. Associate Clinical SWs *</i> • Nurses • LVNs • Licensed Clinical SWs, Credentialed School SWs • Licensed Psychologists, Licensed Educational Psychologists, Credentialed School Psychologists • Program Specialists • Licensed MFTs, Credentialed School Counselors 	<ul style="list-style-type: none"> • <i>HL *</i> • <i>HM *</i> • TD • TE • AJ • AH • HO • <i>No modifier</i>

**Purple text denotes changes to billing under SPA 15-021.*



2. New TCM Qualified Rendering Practitioners





TCM Services: Allowable Practitioners

TCM Practitioners under SPA 15-021

- Registered credentialed school nurses
- Licensed registered nurses
- Certified public health nurses
- Certified nurse practitioners
- Licensed vocational nurses (LVNs)
- Licensed clinical social workers (SWs)
- Credentialed school social workers
- Licensed psychologists
- Licensed educational psychologists
- Credentialed school psychologists
- Licensed marriage and family therapists (MFTs)
- Credentialed school counselors
- Program specialists
- Associate MFTs
- Reg. Associate Clinical SWs

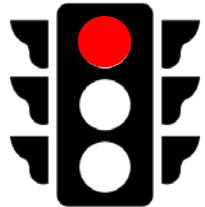
Additional TCM Practitioners under SPA 16-001

- Licensed Occupational Therapists
- Licensed Physical Therapists
- Credentialed Speech-Language Pathologists (SLPs)
- Licensed SLPs



TCM Services: SPA 16-001 Practitioners

LEAs should not bill for the additional TCM practitioners until SPA 16-001 is approved by CMS



- DHCS will notify all stakeholders via e-blast when SPA 16-001 is approved
- Once approved, SPA 16-001 will be effective retroactive to January 1, 2016
- LEAs will be able to retroactively bill for the new TCM practitioners



TCM Practitioners: Supervision

Practitioners	Supervision
<ul style="list-style-type: none">• Registered credentialed school nurses• Licensed registered nurses• Certified public health nurses• Certified nurse practitioners• Licensed vocational nurses (LVNs)• Licensed clinical social workers• Credentialed school social workers• Licensed psychologists• Licensed educational psychologists• Credentialed school psychologists• Licensed marriage and family therapists (MFTs)• Credentialed school counselors• Program specialists	<p><i>No supervision required</i></p>



TCM Practitioners: Supervision (Cont'd)

Practitioners (Cont'd)	Supervision (Cont'd)
<ul style="list-style-type: none">• <i>Associate MFT *</i>• <i>Registered Associate Clinical Social Worker *</i>	Licensed MFT, Licensed Clinical SW, Licensed Professional Clinical Counselor, Licensed Psychologist, or a Licensed Physician

** Purple text denotes new TCM qualified rendering practitioners under SPA 15-021.*



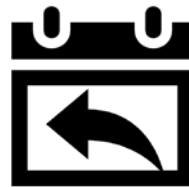
TCM Practitioners: Case Manager Qualifications

Case managers employed by the case management agency (the LEA) must meet at least one of the requirements for education and/or experience:

- **A Registered Nurse (RN) or a Public Health Nurse** that meets the educational and clinical experience requirements as defined by the California Board of Registered Nursing
- An individual with at least a **Bachelor's degree** from an accredited college or university, who has completed an **agency-approved case management training course**
- An individual with at least an **Associate of Arts degree** from an accredited college, who has completed an **agency-approved case management training course and has two years of experience performing case management duties** in the health or human services field
- An individual who has completed an **agency-approved case management training course and has four years of experience performing case management duties** in a health or human services field



3. Retroactive Claiming for TCM





TCM Claiming Timeline

Retroactive Claiming for TCM Services *(optional for all LEAs)*

- For LEAs that choose to retroactively claim for TCM, **DHCS will provide a retroactive claiming window** in which LEAs can submit claims back to July 1, 2015
- **IBM is working on updates** to prepare the claims processing system to accept claims with new CPT codes/modifiers
- Current estimate for retroactive claiming window to begin is **Early 2021**
- All interim reimbursement received during retroactive claiming will **impact the respective fiscal year's CRCS**
- LEAs that choose **not** to retroactively claim for services may **begin moving forward with final cost settlement** (but must await publication of the RMTS percentage before finalizing the CRCS)



Retroactive Claiming for TCM

Retroactive claiming will be limited to:

1. TCM services rendered between **7/1/15 and 6/30/20**
2. TCM services included in the **student's IEP or IFSP**
3. TCM services provided by one of the **15 qualified practitioners**
4. TCM services that were **supervised**, when required
5. TCM services that have been properly **documented**

! The LEA must agree to **reconcile all TCM services billed on the revised CRCS** for the SFY in which the LEA received interim reimbursement, including collecting cost information for TCM practitioners.

! The LEA may only claim historical TCM services for practitioners that were **not included in Pool 2 on prior SMAA invoices**



How to Ensure No Historical Double Billing for TCM

Before the LEA Program joined RMTS on 7/1/20, there was **no combined cost allocation methodology** for the two school-based programs

➤ CMS identified this as an area that could result in double-billing of services

- **LEAs must ensure that SMAA was not charged** for the TCM staff that will be billed under the LEA Program prior to LEA BOP joining the RMTS
 - LEAs **cannot** claim for historical TCM services for any practitioner who was previously included in Participant Pool 2 (for each respective RMTS quarter)
 - LEAs may **only submit LEA BOP claims for practitioners that were not included in Pool 2**



4. LEA BOP TCM Certification





TSPs Billing TCM Services

Time Survey Participant (TSP) List

- In order to bill TCM under the LEA BOP, all TCM practitioners **must be on the Pool 1 TSP List**
- TSPs who certify as a TCM Pool 1 practitioner **will not be eligible** for SMAA reimbursement
- **Reminder**: Pool 1 practitioners should be **routinely providing direct medical services** to students
 - ❖ Primary job function is to render medical services
 - ❖ Does not include teachers as eligible direct service practitioners



TCM Certification Process

TCM Certification Form

- **Moment responses for case management activities look identical** to coders for SMAA vs. LEA BOP
 - Coders can't always tell if case management was related to SMAA or LEA BOP
- The **TCM Certification Form** will be used to assign moments to one of the two school-based programs
- The TCM Certification Form timeline will **run parallel to the development of quarterly TSP lists**



TCM Certification Process: Requirements and Logistics

Requirements and Logistics

- LEAs must **notify LECs/LGAs** which practitioners have been listed on the TCM Certification Form so these practitioners can be identified in the RMTS software platform
- The TCM Certification Form **does not need to be submitted to DHCS**; forms are retained by the LEA for audit purposes
- If an LEA receives TCM reimbursement and does not maintain the TCM Certification Form, reimbursement will be disallowed during an audit
- LEAs must make **quarterly updates** to the TCM Certification Form, as necessary



TCM Certification Form Page 1

**Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)
Targeted Case Management (TCM) Certification Statement**
State Fiscal Year: _____ Quarter: _____

LEA Identification: Identify the primary LEA employee to be contacted concerning questions about information submitted in the TCM Certification Statement.	
LEA Provider Name:	
LEA Contact Name/Title:	
Address:	
City/State/Zip Code:	
Phone/Email:	
National Provider Identifier/Provider Number/CDS Code:	
Provider Number/CDS Code:	

- TCM services are defined in the [LEA BOP Manual](#).
- To bill TCM services under the LEA BOP the LEA must:
 - a. Meet all billing requirements in the LEA Billing Option Program Provider Manual.
 - b. Review TCM training materials provided by the Department of Health Care Services (DHCS).
 - c. For Random Moment Time Survey (RMTS) Quarter 2: Identify all qualified practitioners for whom the LEA will submit TCM direct service reimbursement claims. This list of qualified practitioners will be submitted with the Quarter 2 Time Survey Participant List, due in September.
 - d. For RMTS Quarters 3 and 4: Review the prior quarter's TCM Certification Statement, and update the Certification, as necessary. Updates include removing practitioners not claiming direct service reimbursement for TCM in the upcoming quarter and adding newly identified TCM practitioners. If the participating LEA did not submit a Quarter 2 TCM Certification Statement, the LEA must then submit a TCM Certification Statement prior to the quarter it intends to bill for TCM services.

TCM Certification: I, the undersigned, state the following: As a public administrator, a public officer or other public individual duly authorized by the LEA as having the authority to sign on behalf of the LEA, am authorized or designated to make this certification on behalf of the Public Entity for _____ (LEA Name), and declare that the information included on this TCM Certification Statement is true and correct.

Name	
Title	
Signature/Date	



TCM Certification Form Page 2

Enter the names of all qualified TCM practitioners for which the LEA will submit claims for TCM direct service reimbursement in the table below. Add rows and additional pages if needed		
TCM Qualified Practitioners	Practitioner Names	Practitioner Names
Nursing Practitioners:		
Registered Credentialed School Nurse		
Certified Public Health Nurse		
Licensed RN		
Certified Nurse Practitioner		
Licensed Vocational Nurse		
Social Workers/Counselors:		
Licensed Clinical Social Worker		
Credentialed School Social Worker		
Reg. Associate Clinical Social Workers		
Licensed Marriage and Family Therapist		
Credentialed School Counselor		
Associate Marriage and Family Therapists		
Psychologists:		
Licensed Psychologist		
Licensed Educational Psychologist		
Credentialed School Psychologist		
Program Specialists		



5. LEA BOP TCM Providers





Identifying TCM Providers

- **Effective SFY 2020-21**, LEA BOP TCM providers must be identified through the TCM Certification Form
- As of July 1, 2020, LEAs shall **only bill for LEA BOP TCM services provided by TSPs on the TCM Certification Form** (for each respective RMTS quarter)
- Pool 1 TSPs must **meet the provider credential and license requirements** necessary to provide and bill for direct medical services in LEA BOP

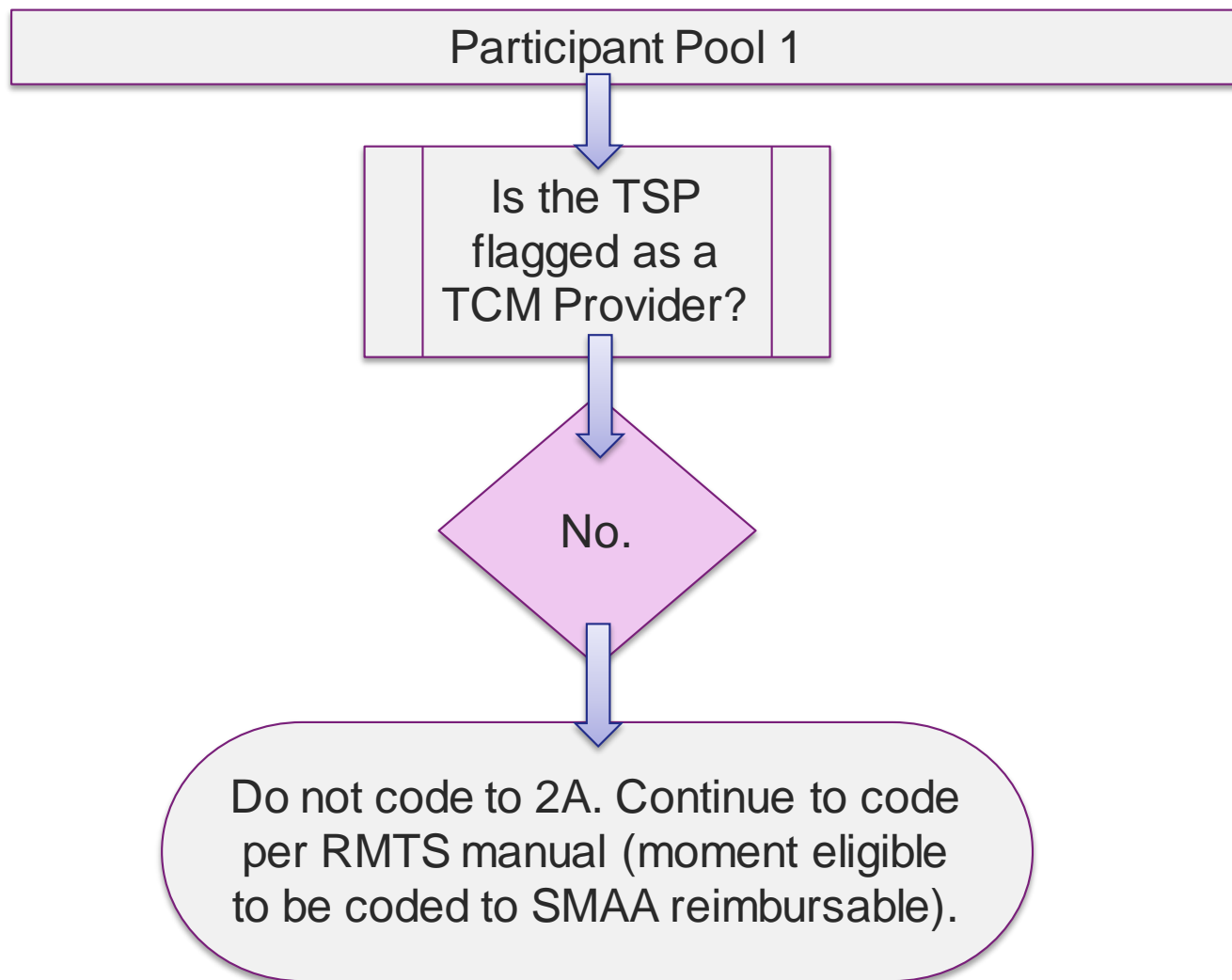


Section 4

Coding TCM Moments

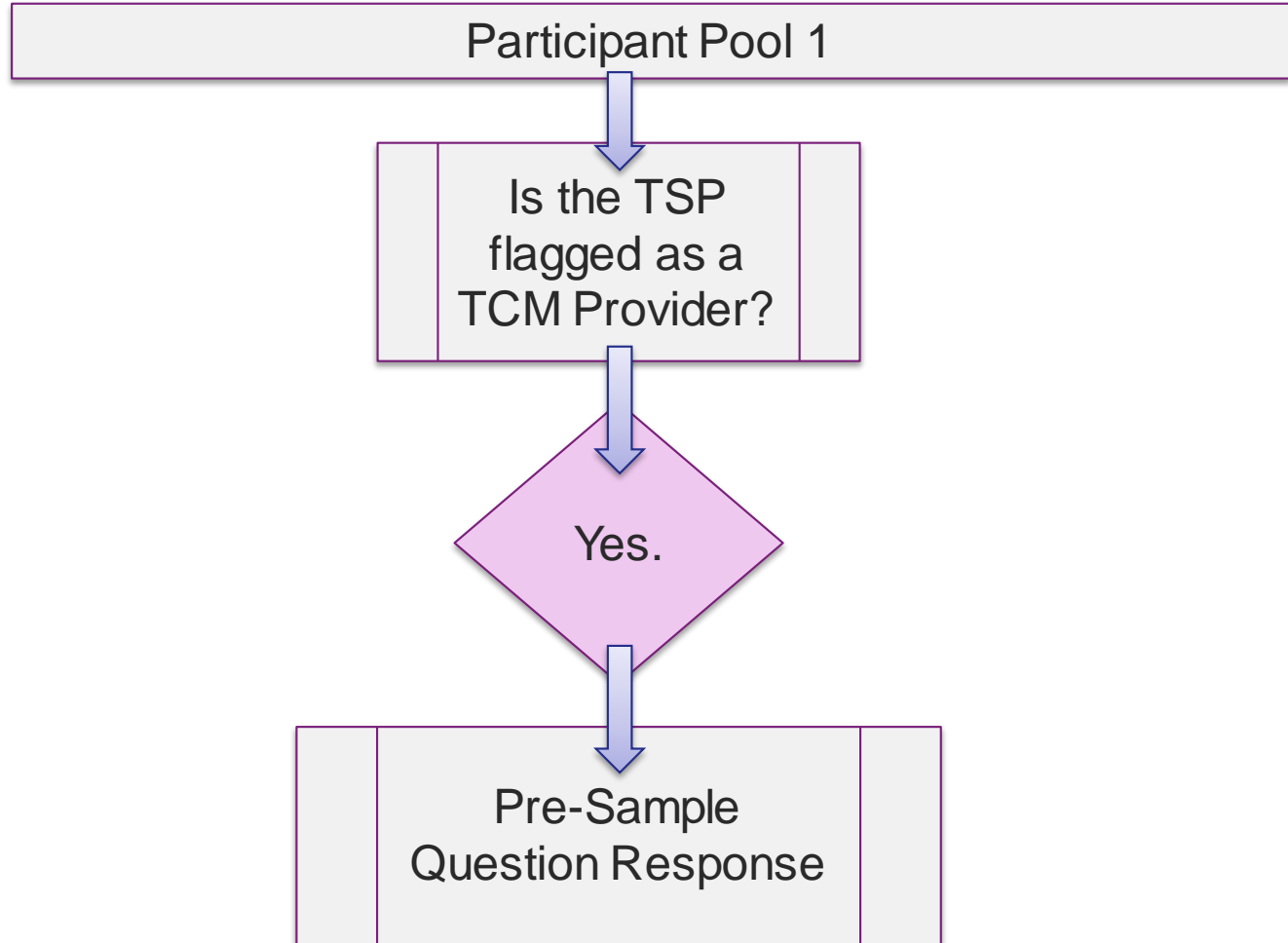


Coding TCM-Related Moments- Participant Pool 1 TSPs – Part 1





Coding TCM-Related Moments- Participant Pool 1 TSPs – Part 2





Pre-Sample Question

Asked to TSPs in Participant Pool 1:

Was this activity being performed related to a student assessment, as defined in the LEA Provider Manual, or pursuant to a service listed on a student's IEP, IFSP or 'Care Plan'?

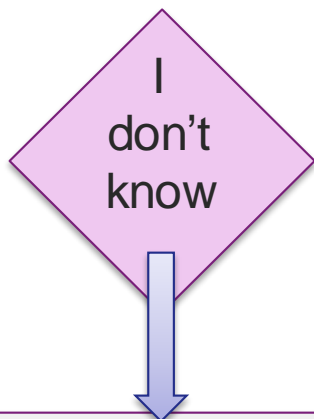
A "Care Plan" is a medical management tool for providing medically necessary healthcare services to a student in a school setting.

- Other common names for a "Care Plan" are a nursing plan, Individualized Health and Support Plan (IHSP), Plan of Care, Individualized School Healthcare Plan, 504 Plan.*

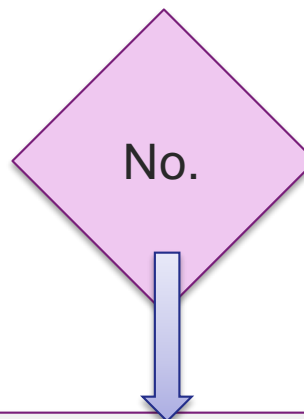


Coding TCM-Related Moments- Participant Pool 1 TSPs – Part 3

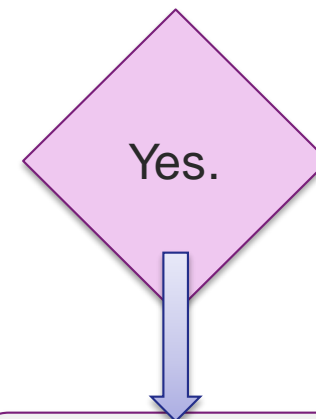
Pre-Sample
Question Response



Ask a Clarifying Question to get more information if necessary. If not, continue coding to RMTS Manual.



Do not code to 2A. Continue coding to RMTS Manual.



Code to 2A or 2Z.



Please Submit Additional Questions to the LEA Program Inbox

LEA@DHCS.CA.gov