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MEMORANDUM

DATE: November 2, 2005

TO: Family Care CMOs

FROM: Monica Deignan, Managed Care Section Chief
Bureau of Long-Term Support

SUBJECT: New Medicaid Mental Health Comprehensive Community Services Benefit

As you may be aware, Medicaid is offering counties and tribes the opportunity to provide a new mental health benefit called Comprehensive Community Services (CCS). A distinct package of services can be proposed by any county or tribe for Medicaid approval that defines the CCS benefit that specific county or tribe is certified to deliver. The county or tribe will be required to provide the local match funds needed to capture Medicaid federal financial participation for CCS. (You can find more information about CCS at http://dhfs.wisconsin.gov/mh_bcmh/CCS/CCSIndex.htm.)

The purpose of this memo is to acknowledge development of this new benefit and to ensure that its implementation in Family Care counties is coordinated with the delivery of services to Family Care members and does not adversely affect care management organizations.

CCS is intended to provide community-based psychosocial rehabilitation services to achieve outcomes, reduce symptoms or restore functioning for persons with mental illness. The Family Care benefit also includes community-based mental health services for individuals enrolled in a CMO.

The potential availability of a new CCS benefit in counties where the Family Care benefit is available raises many questions. Some questions and our initial responses are listed below.

- Q** Will CCS services and supports be included in the Family Care benefit?
- A** Not at the present time. Until there is sufficient experience to quantify what constitutes the CCS benefit in a county, and the costs related to that benefit, if a Family Care county is certified to provide CCS services, those services will be carved out of the Family Care benefit.
- Q** Will CCS lead to the development of new mental health services and supports available in the county that could benefit a person enrolled in Family Care?
- A** It seems likely that if a county chooses to seek certification as a CCS provider the package of services it defines will include community-based mental health services not currently available.

Q If so, will those services and supports be available to enrollees?

A A county that is certified to provide CCS services may provide those services to residents who are enrolled in Family Care.

Q Who is responsible for paying for community-based mental health services newly developed under CCS for Family Care enrollees?

A At the present time, the county is responsible for providing CCS services to Family Care enrollees. In the future, after there is sufficient experience to quantify the CCS benefit, the Department intends to incorporate those services in the Family Care benefit and include the cost of those services in the development of Family Care rates. Until that time, a CMO may choose to use Family Care funds to pay for community-based mental health services newly developed under CCS for its enrollees.

Q Can Family Care funds be used to pay for community-based mental health services newly developed under CCS?

A No, at this time CCS services will be billed to Medicaid fee for service. **Family Care capitation payments already include federal financial participation and may not be used as the local match to capture additional FFP through CCS.**

Q Since CCS services are being newly developed, is their full cost known?

A It is likely that some of the newly-developed community-based mental health services available through CCS will be of a similar type – e.g., counseling, therapy, care management – as services provided in Family Care. However, the services may be provided in a different way or in a different amount. This difference in intensity and scope of services may not be immediately understood.

As always, the Department intends to provide a capitation payment that reflects the expected cost for a CMO to provide the Family Care benefit to its members (i.e., through a risk-based managed care model). Since the full extent of the impact of any increased intensity or scope of community-based mental health services as a result of CCS is not yet known, the Department will carve these services out of the Family Care benefit and will collect data from each CCS county on the actual costs of the services in its CCS package. In the future, after sufficient data about CCS services is available, the Department intends to include these services in the Family Care benefit.

The Department intends to monitor implementation of CCS to ensure that Family Care and CCS services are coordinated for Family Care members. We also want to ensure that CMOs understand their responsibilities in relation to CCS and are fairly reimbursed for any new CCS services that might be added to the Family Care benefit in the future.