



Children's Long-Term Support Waivers

June Teleconference

Thursday, June 20th, 2013
10:00 am

Call-in number: 877-402-9753

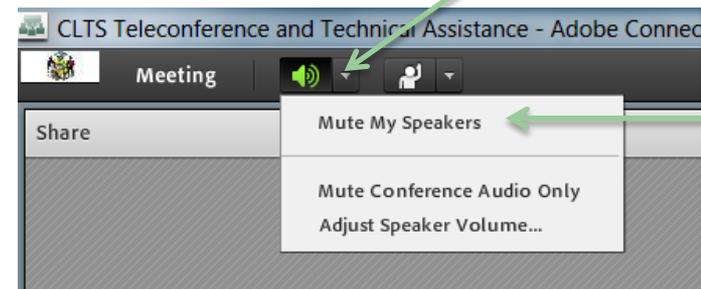
Access Code: 5604282 #

Adobe meeting room link: <https://connect.wisconsin.gov/dltc-cltsteleconference/>



Today's Teleconference- Audio

- Please use the AT&T call-in number for audio:
 - Call-in number: 877-402-9753
 - Access Code: 5604282 #
- Turn off your computer audio :
 - Look for the speaker icon at the top of your Adobe meeting room
 - Click the down arrow next to the icon
 - Click “mute my speakers”





Hold Music (Muzak)

- Occasionally hold muzak plays during the teleconference
 - This happens when a county staff places the teleconference line on hold to answer another call
 - When on hold the entire state hears the muzak playing and cannot hear our prompts to take us off hold

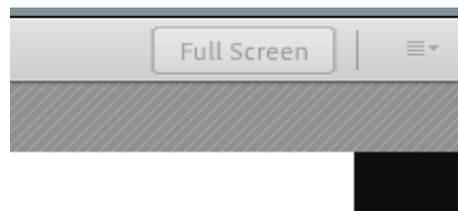


Adobe Connect Functions

- Question and answer pod
 - Allows for private questions to state staff running the meeting room.
 - State staff can respond privately to you or publically to everyone in the meeting room.
- File Share pod – handouts in condensed zip file
 - Click once on the name of the zip file
 - Click “save to my computer”
 - Click “click to download”
 - Select “open with_____”
 - Save each file in your personal file

Viewing Materials

- Share pod – PowerPoint and PDFs
 - The share pod will display any presentation materials
 - Click “full screen” to enlarge the picture
 - Click on “full screen” a second time to minimize the picture



Control of Documents

- Some documents you will have control of to scroll through or zoom in and out
 - To do so use the scroll bar on the right side of the room and use the + and – signs on the bottom of the screen





New DHS Policy on Pull-On Quantity Limits

- On August 1, 2013 the Department of Health Services Division of Health Care Access and Accountability will be changing the maximum quantity on pull-ons/pull-ups from 300 per month to 150 per month
- This policy change was put in place per our joint contract with the State of Michigan as a cost savings measure to the program and taxpayers of Wisconsin
 - <https://www.forwardhealth.wi.gov/kw/pdf/2013-29.pdf>



New DHS Policy on Pull-On Quantity Limits

- New members requesting pull-ons will be required to have an evaluation to see if they qualify for pull-ons
 - To qualify, members must have the cognitive ability to independently care for their toileting needs or be actively participating and demonstrating definite progress in a bowel or bladder program
- To avoid access issues members will be able to receive up to 150 diapers as substitution to make up the difference
- If a member wants over 300 total products, prior authorizations will need to be submitted
 - This is not a change to prior policy



Medicaid Transportation

- New non-emergency Medical Transportation Manager (NEMT) for Wisconsin Medicaid and Badger Care Plus Members
 - Questions or Concerns: Call MTM Inc's "We Care" number (866) 436-0457
 - <http://www.dhs.wisconsin.gov/publications/p0/p00439.pdf>
- Medical Transportation Management Inc. (MTM)
 - Effective 8/1/2013



Medicaid Transportaion

- Members Required to Ride a Bus (when able)- *NEW*
- Individuals Who May Ride with a Member to an Appointment- *UPDATE*
- Transportation for Members to a Veterans Medical Facility (parent benefit)- *NEW*
- Transportation for Minors Traveling Alone to Their Appointments- *UPDATE*



CLTS Updates

- Annual CMS 372 report progress
- Provider audits
- CLTS contact reminders
- Survey of county systems
- Employment update- Meghan Mitchell
- CLTS waiver/Medicaid prior authorization issues
- High-cost requests vs COP high-cost requests (Alice Thorson)



Incident Reporting

- CLTS incident reporting reminders:
 - School setting
 - Hospital setting
 - Police intervention
 - Behavioral concern
- CLTS incident reporting form:
 - <http://www.dhs.wisconsin.gov/forms1/f2/f22541i.pdf>



Shift Staff Treatment Foster Home

- All Shift Staff Treatment Foster Home (SPC 203) placements and respite (SPC 103) services a joint DCF and CLTS *prior* approval is required
- Paperwork is required:
 - Submitted to DCF from the Licensing Agent
 - Submitted to CLTS from CWA

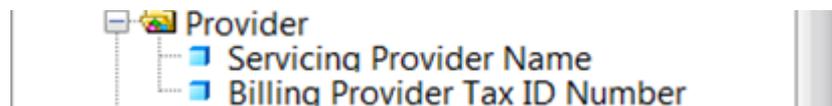


TPA Reminders- Coding Updates

- T1005 (without U8 modifier)
 - Authorizations created before 10/31/12 with end-dates after 06/30/13 should be termed
 - New authorizations should be created starting 07/01/13
- 99600
 - A SPC mapping issue occurred and has been manually fixed in WPS's system
 - Some claims for 99600 (no modifier) may map to 104.10 prior to 06/30/13
 - After 07/01/2013, all 99600 without a UD modifier will map to 104.10

TPA Reminders

- Foster care provider data
 - Information share in February
 - Update provider Excel file with “servicing provider” information
 - Update claims with “servicing provider” information
 - The name on the claim should match the name on the provider file
- Data warehouse element update:
 - “Billing provider” object changed to “provider”
 - “Billing provider name” object changed to “servicing provider name”
 - Data pulled for this object did not change
 - All existing reports updated automatically



- Crosswalk
 - Most recent CLTS crosswalk is 10/16/2013



Step Two and Autism Services

- When submitting a Step Two application, pay attention to:
 - Item 5a: Be sure to check appropriate level of service:
 - (CBI) Consultative Behavioral Intervention - SPC 512.10
 - (EIBI) Early Intensive Behavioral Intervention - SPC 512
 - Item 5b: The first date the autism treatment provider bills for treatment (insurance OR waiver funded) on or after the waiver start date.

5. (Autism Treatment only) Please answer questions a through d below, and then **SKIP Line 6** and go to Line 7.
- a.) Which level of treatment has the family chosen? CBI EIBI
- b.) First date of Autism Treatment Services while enrolled on CLTS Waiver:
- c.) Has this child received autism treatment (10 hours per week or more) prior to waiver enrollment? YES NO
If you answered YES to question c, how many weeks of treatment did the child receive prior to enrolling?
- d.) Does this child currently have private health insurance coverage for autism treatment services? YES NO



Step Two and Autism Services

- When submitting a Step Two application, pay attention to:
 - Item 5c: If yes, document number of weeks of treatment received prior to the waiver-funded treatment start date, at 10 or more hours per week, funded by any source
 - Item 5d: Ensure you verify with the family the status of their insurance coverage.

5. (Autism Treatment only) Please answer questions a through d below, and then **SKIP Line 6** and go to Line 7.
- a.) Which level of treatment has the family chosen? CBI EIBI
- b.) First date of Autism Treatment Services while enrolled on CLTS Waiver:
- c.) Has this child received autism treatment (10 hours per week or more) prior to waiver enrollment? YES NO
If you answered YES to question c, how many weeks of treatment did the child receive prior to enrolling?
- d.) Does this child currently have private health insurance coverage for autism treatment services? YES NO



Step Two and Autism Services

- On the ISP:
 - Ensure you use the correct SPC Code for autism treatment services
 - SPC 512.10 - CBI, 10-20 hours per week
 - SPC 512 - EIBI, 30-40 hours per week
 - List weekly treatment hours on the ISP and calculate the daily rate based on maximum hours.
 - Document insurance coverage on ISP; include details of treatment funded prior to the waiver start date.

Questions:





County Reminders

- Send the CLTS Inbox (DHSCLTS@wisconsin.gov) any concerns you have with prior authorizations being denied
- End-date any outdated claims with inaccurate SPC mapping
- Foster Care provider information:
 - Update the Excel provider file with “servicing provider” foster care information
 - Update the claims with “servicing provider” foster care information