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DMS Numbered Memo 2020-01

DCTS Action Memo 2020-10

Replaces DLTC Joint Numbered Memo 2014-01

Replaces DMHSAS Joint Numbered Memo 2014-03

To: County Department of Health and Human Services Directors
County Department of Social Services Directors
County Department of Community Programs Directors
Long-Term Support Supervisors and Leads

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Coordination of Services for Children who are Dually Eligible for the Comprehensive Community Services and the Children's Long-Term Support Waiver Programs

Document summary

This memo was jointly developed by the Division of Medicaid Services (DMS) and the Division of Care and Treatment Services (DCTS).

The intent of this memo is to repeal and replace DLTC Joint Numbered Memo 2014-01 and DMHSAS Joint Numbered Memo 2014-03, titled "Funding and Service Coordination for Children who are Dually Eligible for the Comprehensive Community Services Program and the Children's Long-Term Support Waivers." That memo described funding and service coordination for children and youth dually eligible or dually enrolled in the Comprehensive Community Services (CCS) and the Children's Long-Term Support (CLTS) Waiver programs.

This document provides clarification to county agencies regarding: children and youth dually eligible or dually enrolled in CCS and CLTS; assessment and service planning; and billing for ongoing service coordination. The guidance applies only to counties which are CCS certified and thus able to offer services through the CCS program.

Background

This memo will address children and youth dually eligible or dually enrolled in the following two programs:

Comprehensive Community Services (CCS) program

The Comprehensive Community Services (CCS) program is a Medicaid State Plan benefit for people

with mental health and/or substance use disorders that provides a [flexible array](#) of individualized, community-based, psychosocial rehabilitation services authorized by a mental health professional.

Children's Long-Term Support (CLTS) Waiver Program

The Children's Long-Term Support (CLTS) Waiver Program is a Home and Community-Based Service (HCBS) Waiver that provides Medicaid-funded supports and services to children and youth with significant disabilities in the community. The CLTS Waiver Program offers a broad range of [supports and services](#) to meet the needs and goals of participating children or youth and their families.

Determining eligibility for the CCS and CLTS waiver programs

A child or youth may be eligible and enrolled in only CCS, only CLTS, or jointly enrolled in both CCS and the CLTS Waiver programs.

- To be eligible for CLTS waiver services, a child or youth must be eligible for Wisconsin Medicaid, live in an eligible setting, and meet an institutional level of care need as determined by a functional screen.
- To be eligible for CCS, a youth must meet functional eligibility and have mental health and/or substance use needs greater than outpatient but less than an intensive community support program.

No single diagnosis makes a child or youth eligible or ineligible for CCS.

Functional eligibility for the CCS and CLTS Waiver programs is determined by the Children's Long-Term Support Functional Screen (CLTS FS), a web-based eligibility application. Only professionals who have passed the [online course](#) to become a state-certified screener are permitted to complete the CLTS FS. Screeners are responsible for completing the CLTS FS across all developmental domains, as the CLTS FS automatically determines eligibility for both programs.

Update or recertification

Functional eligibility must be evaluated annually by the CLTS FS for each child or youth enrolled in the CCS program or CLTS Waiver Program. If a child or youth currently enrolled in only CCS or CLTS is identified as eligible for the other program and has unmet needs that are allowable under the subsequent program, a referral should be made. If a comprehensive screen has been completed for a child or youth within the past twelve months, it is considered valid. Thus, it is not necessary for the subsequent program to re-screen.

If a child or youth dually enrolled in CCS and CLTS is found Not Functionally Eligible (NFE) for either program on an annual screen, the county is instructed to immediately inform the other program's lead. In accordance with [DMS Numbered Memo 2017-05](#), the county must not dis-enroll a child from CLTS without consultation and approval by the Wisconsin Department of Health Services (DHS).

If a screener for the CLTS Waiver Program conducts a screen that finds a child or youth NFE for another program in which they are enrolled, the county waiver agency (CWA) is instructed to immediately inform the other program's lead.

Assessment and service planning

Medicaid participants are entitled to receive sufficient information in order to make an informed choice about any and all services. Thus, counties are required to inform parents and legal guardian(s) of any and all programs for which their child or youth is found eligible.

Families have the right to request an assessment for any program for which their child or youth is found functionally eligible. Either program may complete an assessment and enroll an eligible child at any time, before or after, a child is assessed for the other program.

The assessment provides the foundation for developing a child-and family-centered service plan. The child or youth and their family members are critical partners in identifying the child's or youth's capacities, strengths, needs, desired outcomes and goals, and the supports and services that will best meet their needs.

A single assessment and/or service plan may be completed by a cross-trained service coordinator if requirements for both programs are fulfilled.

When there are two separate service coordinators for the CLTS Waiver Program and the CCS program, each respective program completes an assessment utilizing their subject matter expertise and consults with the other program in order to develop either a joint or two separate service plans to meet the programmatic requirements.

It is expected that the programs collaborate to ensure comprehensive and consistent service planning for the child and family.

Enrollment and service coordination

The enrollment effective date (i.e., start date) for either program is the earliest date when all enrollment requirements have been met for that program. It is prohibited to restrict access to one program due to delays created by waiting lists or pending eligibility/enrollment decisions for the other program. As program enrollment is voluntary, participation in CCS is not required to access CLTS services. Upon CLTS enrollment, all CLTS allowable services are available regardless of enrollment into a subsequent program.

If a child or youth is currently enrolled in either CCS or CLTS and then enrolls in the other program at a later date, the subsequent program should coordinate with the original program to ensure no duplication of services occurs.

Single cross-trained service coordinator

When a cross-trained service coordinator model is used, the same person acts as both the CLTS Waiver Program support and service coordinator and the CCS service facilitator.

A single cross-trained service coordinator provides a more integrated and cost-effective service model. Benefits include a more streamlined process for families, consistent and holistic service planning and coordination, and decreased administrative costs.

In order to be cross-trained, both CLTS support and service coordinator and CCS service facilitator requirements must be completed. The cross-trained service coordinator bills through CCS.

Two separate service coordinators

While it is important to streamline processes for families when possible, the Centers for Medicare & Medicaid Services (CMS) recognizes the advantages of a team approach to case management services when the complexity of the child's condition demands the expertise of more than one program.

When there is a separate CLTS support and service coordinator and CCS service facilitator providing case management activities for a dually enrolled child or youth, the CCS service facilitator is the primary service coordinator, billing case management tasks to the CCS program. The CCS service facilitator and CLTS support and service coordinator should each have a distinct role and responsibility and are required to work cooperatively to ensure there is no duplication of activities.

Billing considerations

Medicaid does not allow reimbursement to more than one federally-funded program for the costs associated with ongoing case management, unless a cost allocation plan is approved by CMS. As such, at this time it is not permissible to bill additional tasks related to CLTS service coordination to the CLTS Waiver Program. DHS is aware of the need for both programs to provide uniquely different case management. New guidance will be issued if this status changes.

For a child or youth dually enrolled, CCS funding should be considered first. The CLTS Waiver Program is the payer of last resort and is not a source of funding for any service that would otherwise be the responsibility of another public or private entity.

When a dually enrolled child or youth has a need for services not covered by CCS, the CLTS Waiver Program can be considered to fund those services. It may be helpful to review the outcome being sought and the expertise of the provider necessary to reach the outcome when determining which program will provide the funding for a service or support.

CLTS Waiver and CCS programs provide a different set of services and supports to achieve uniquely different goals and outcomes for the same child or youth. The CCS program uses a community-based wraparound model that is recovery oriented with the goal of restoring the best possible level of functioning. CLTS is intended to fund long-term community supports related to a child or youth's disability and supporting the child or youth's ability to remain in their community and to achieve an inclusive, independent, and self-empowered life.

Assistance

If you have questions or are seeking additional information regarding dual enrollment in CCS and CLTS Waiver programs, please contact a [Comprehensive Community Services Coordinator](#) or your [CLTS TA Lead](#).

Addendum Materials:

| Eligibility Requirements | |
|---|--|
| CLTS Waiver Program | CCS Program |
| <p>Children’s Long-Term Support Functional Screen (CLTS FS) determines functional eligibility</p> <ul style="list-style-type: none"> • Institutional level of care <p>Financial eligibility</p> <p>Parental payment limit determined</p> | <p>Children’s Long-Term Support Functional Screen (CLTS FS) determines functional eligibility</p> <ul style="list-style-type: none"> • Diagnosis of a mental disorder or a substance use disorder • Greater than outpatient <p>Mental health professional determines appropriateness</p> |
| Assessment and Service Planning Requirements | |
| CLTS Waiver Program | CCS Program |
| <p>CLTS support and service coordinator (SSC) completes a comprehensive assessment based on open dialogue and the Deciding Together Guide.</p> <p>Service planning must include the Individual Service Plan (ISP) and signature page and the Outcomes document and must occur within 60 calendar days.</p> <p>An ISP is completed when the SSC and family agree with the plan; signatures are obtained from essential providers, parents, and youth if age 14 or older; and authorized supports and services are listed; See DMS Numbered Memo 2018-05.</p> | <p>CCS service facilitator completes a comprehensive assessment as described in Wis. Admin. Code § DHS 36.10(2)(e)4.</p> <p>Service planning must include all aspects and documentation described in Wis. Admin. Code § DHS 36.17 and must occur within 30 days of application.</p> <p>The Service Plan is based on the assessment; includes psychosocial rehabilitation and treatment services; service provider facilitation activities; signatures from the service facilitator, mental health professional, and consumer; and measureable goals.</p> |
| Service Coordinator/ Service Facilitator Requirements | |
| CLTS Waiver Program | CCS Program |
| <p>The CLTS Waiver SSC qualifications and responsibilities are described in Chapter 4 of the Medicaid HCBW Manual.</p> <p>Complete the approved CLTS Waiver Basics Training course.</p> <p>Complete the Mandated Reporter Online Training created by the Wisconsin Child Welfare Professional Development System and follow the procedures for mandated reporting of abuse and neglect (Wis. Stat. § 48.981(3)).</p> | <p>The CCS service facilitator must meet qualifications found in Wis. Admin. Code § DHS 36.10(2)(e)4 and carry out all responsibilities described.</p> <p>Orientation and training requirements are described in Wis. Admin. Code § DHS 36.12.</p> |