STATE OF WISCONSIN
Department of Health Services
Division of Long Term Care

DLTC Memo Series 2012-03
Date: October 8, 2012
Index Title: RATE INFORMATION FOR BILLING FOR SERVICES PROVIDED BY THE CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES

To: Listserv

For: County Departments of Community Programs Directors
County Departments of Developmental Disabilities Services Directors
County Departments of Human Services Directors
County Departments of Social Services Directors

From: Priscilla Boroniec
Division of Long Term Care Administrator

Subject: RATE INFORMATION FOR BILLING FOR SERVICES PROVIDED BY THE CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES

Document Summary

Each year, the Wisconsin Department of Health Services reviews and revises the rates charged for services at the centers for persons with developmental disabilities.

RATE SCHEDULE
CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES
July 1, 2012 – June 30, 2013

The Wisconsin Department of Health Services develops and approves the rates for the centers for persons with developmental disabilities. Rates are based on the actual cost of providing these services. The department has established rates for long term care services and for intensive treatment services. The rate increase indicated below reflects increases in labor costs as well as increases in fuel and utilities costs.

At the centers for persons with developmental disabilities, county agencies are billed for long-term care services only for individuals ineligible for Medicaid, designated as inappropriately placed, and/or admitted for intensive treatment program services described below. Per s. 51.437(4rm)(c)1, the county has 60 days to pay the bill. If payment is not received within 60 days, the amount will automatically be deducted from the next DHS payment to the county through the CARS system.

INTENSIVE TREATMENT PROGRAM (ITP) SERVICES: ITP services are provided to individuals with developmental disabilities who require active treatment and who are also diagnosed as having a mental illness or who exhibit extremely aggressive and challenging behaviors.

Under s. 51.437(4rm)(c)2m, the county agency is billed the non-federal share for services provided to individuals under s. 51.06(1m)(d) who are eligible for Medicaid. The ITP rates were calculated to create a uniform statewide rate for intensive treatment program services provided at all three centers. A uniform statewide ITP rate will enable counties to access the closest facility or select the facility that best suits the person's needs without regard to rate differences.

The Billing and Collections Unit of the Bureau of Fiscal Services will bill the counties for the non-federal share of the Medicaid ITP rates for the care of the persons receiving ITP services. The amount charged to the counties will be lower if some portion of the care is covered by non-Medicaid dollars. The amount charged to the counties changes as the Medicaid rate per day and/or the non-federal share changes. On October 1, 2012 the non-federal share of Medicaid will increase from 39.47 percent to **40.26 percent**.

The county will not be billed for the non-federal share of the Medicaid payments for clients admitted for ITP services whose cost of care is covered by a Family Care CMO (Care Management Organization).

EXTENDED INTENSIVE TREATMENT SURCHARGE: Per s. 51.06(5), the department is authorized to assess a surcharge equal to 10% of the total cost of care provided to individuals in the ITP's based on their length of stay. The surcharge is imposed for each six-month period in which a resident remains at a center beyond his or her discharge date, which is set by the center and the individual's county of residence. The surcharge amount will increase by 10% of the total cost of care provided during each six-month period thereafter. The Department of Health Services notified the counties regarding the implementation of this surcharge on October 12, 2006 in the DDES Information Memo 2006-18.

TRANSITIONING PERSONS TO COMMUNITY CARE: The county will be billed $48.00 per day if an independent professional review established under 42 USC 1396a(a)(31) determines the person served is appropriate for community care, and there is adequate state and federal funding to provide these community services (Per s. 51.437(4rm)(c)2.b.). Further information on this process can be found in DLTC Information Memo Series 2008-4.

RATES AT CENTERS	**CENTRAL**	**NORTHERN**	**SOUTHERN**
Private Pay Rate Per Day	$875.00	$1,673.00	$958.00
Intensive Treatment Services - **Per Day**	$1,260.00	$1,260.00	$1,260.00
Non Federal Share (7/1/12 – 9/30/12)			
a. Up to agreed upon discharge date	$497.32	$497.32	$497.32
b. After agreed upon discharge date	$547.05	$547.05	$547.05
*The 10% surcharge increases during each six-month period after the agreed upon discharge date.			
Non Federal Share (10/1/12 – 6/30/13)			
a. Up to agreed upon discharge date	$507.28	$507.28	$507.28
b. After agreed upon discharge date	$558.01	$558.01	$558.01
*The 10% surcharge increases during each six-month period after the agreed upon discharge date.			

REGIONAL OFFICE CONTACT: N/A

CENTRAL OFFICE CONTACT:

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MEMO WEB SITE: http://www.dhs.wisconsin.gov/dsl_info/

cc Area Administrators/Human Service Area Coordinators
Area Agencies on Aging Directors
Bureau/Office Directors
County 51 Boards Program Directors/Fiscal staff
County IM Managers/Supervisors/Lead Workers
County/Tribal Aging Directors

DLTC Facility Central Office Staff
DLTC Center Directors
DD Service Coordinators
Program Bureau Directors/Section Chiefs
Tribal Chairpersons/Human Services Facilitators
Tribal IM Directors