



FORWARDHEALTH

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COMMUNITY RECOVERY SERVICES, 1915(i) HOME AND COMMUNITY-BASED SERVICES TERMS OF REIMBURSEMENT

Community Recovery Services (CRS) 1915(i) Home and Community-Based Services (HCBS) provided by certified Wisconsin counties are reimbursed at 100 percent of allowable costs. The Wisconsin Department of Health Services (DHS) pays certified providers a percentage of the federal Medicaid share (federal financial participation [FFP]) of allowable costs of CRS 1915(i) HCBS. The applicable percentages are expressly stated under s. 49.45(30g)(b), Wis. Stats.

The DHS pays interim fee-for-service reimbursement of FFP for all covered CRS 1915(i) HCBS provided by certified providers to Wisconsin Medicaid members eligible on the date of service. The DHS only reimburses CRS 1915(i) HCBS provided on and after the effective date of the approval of the provider agency's 1915(i) application by DHS, and on and after DHS' approval of each Medicaid-eligible consumer's plan of care.

The amount of the interim FFP reimbursement is based upon an analysis of prevailing rates for like services in Wisconsin and other states with similar programs. Future interim rate-setting shall be performed using Wisconsin-specific data once such data are readily available. Interim FFP payments are made through the Medicaid claims process on a fee-for-service basis.

Each certified provider is required to document the total allowable costs it has incurred for CRS 1915(i) HCBS using a cost report developed by DHS. As required by the federal Centers for Medicare and Medicaid Services (CMS), CRS 1915(i) HCBS providers must certify these documented CRS 1915(i) HCBS costs by annually submitting this cost report. Cost reporting is necessary for the CRS 1915(i) HCBS provider to qualify for FFP provided by DHS. To be eligible for FFP, the non-federal share of the total allowable cost must be funded by public expenditures by the county primarily consisting of state aid and local taxes. Federal funds may not be used as the non-federal share of the total allowable cost unless the type of federal funds used is expressly authorized by federal law to be used to match other federal funds. The agency will be responsible for maintaining an audit trail to substantiate their contribution of this non-federal share.

After the CRS 1915(i) HCBS provider submits the cost report form, DHS reconciles interim FFP payment to total allowable cost by recovering overpayments or making additional payments, adjusting the interim FFP payment to the statutory percentage of FFP for total allowable cost. Some CRS 1915(i) HCBS providers may receive an increase in reconciliation funding and others may see a decrease. Total reimbursement cannot exceed the statutory percentage of FFP for total allowable costs for an individual CRS 1915(i) HCBS provider.

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