AGENDA

● Program Updates
  ○ Case manager delegates cannot perform case management tasks
  ○ Elimination of State Respite services
  ○ Case manager transitions and process for ACES$
  ○ Rights screen in EMWS
● No Monthly Training Session this month

TOPICS

Case manager delegates cannot perform case management tasks
Billable case management activity is any task or function defined by the Division of Healthcare Financing (Division) as an activity that only the case manager, or the designated back up case manager when appropriate, can provide to, or on behalf of, the participant or legally authorized representative. Billable activities include:
  ● Monthly case management reviews;
  ● Plan development;
  ● Plan monitoring and follow-up, including documentation review;
  ● Second-line medication monitoring;
  ● Service observation and interviews;
  ● Visits to the participant’s place of residence;
  ● Team meetings;
  ● Participant specific training;
  ● Face to face meetings with participants, legally authorized representatives, and family;
  ● Advocacy and referral;
  ● Crisis intervention and management;
  ● Coordination of natural supports;
  ● Offering and discussing choice;
  ● Completing monthly responsibilities;
  ● Division required reporting; and
  ● Quarterly meetings with back-up case manager(s).

These services cannot be performed by a case manager delegate or another employee of a case management organization. A delegate may only complete tasks such as mailing letters, answering phones, making copies, filing, and faxing. Delegates should not complete any task within a participant’s individualized plan of care (IPC).

Elimination of State Respite services
On August 26, 2020, the Wyoming Department of Health announced the budget reductions approved by the Governor’s Office in response to declining state revenues. As part of these reductions the Department of Health will eliminate all services offered through the State Respite Program. The effective date of this elimination of services will be December 1, 2020. Accordingly, services may continue to be received through November 30, 2020. Enrollment for new participants and providers ended in mid September.
The Department of Health will not pay for State Respite services that a child receives after November 30, 2020. State Respite providers must submit final billing for this service no later than December 31, 2020. Invoices submitted after this date will be denied. Case managers are strongly encouraged to notify families with whom they work that may be impacted by this decision.

**Case manager transitions and process for ACES$**

When a participant chooses a new case manager, it is the responsibility of the current case manager to notify ACES$ of the change via email. An email with the new case manager’s name and email address, and the participant’s name and date of birth must be sent in order for ACES$ to update their files and allow for accurate correspondence.

Emails should be sent to supportwy@mycil.org.

**Rights screen in the Electronic Medicaid Waiver System (EMWS)**

On September 15, 2020, the Division made revisions to the Rights screen in the Electronic Medicaid Waiver System (EMWS). These changes were made to align EMWS and the participant’s plan of care with Chapter 45, Section 4 of the Department of Health’s Medicaid Rules and the Rights Restriction Review Tool. This change allows the plan of care team and Division personnel to easily see the reasons for a rights restriction, as well as how and when a provider can implement a rights restriction.

Case managers are required to complete each of the eight boxes on the Rights screen, and include a document that authorizes someone besides the participant to restrict the right. Even if the document exists elsewhere in the IPC, it must be uploaded to the Rights screen as well. Each of the questions directly corresponds to a provision of Chapter 45, Section 4, and must be answered. Please do not submit plans with blank boxes on the Right screen.

**WRAP UP**

*Next call scheduled for November 9, 2020*