



AGENDA

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- **Training: Eligibility Process** - *Destiny Rhoden, Benefits and Eligibility Specialist, Home and Community Based Services*

TOPICS

Targeted Case Management and Case Management Transitions

In accordance with Wyoming's agreement with the Centers for Medicare & Medicaid Services (CMS), Targeted Case Management (TCM) is a required service for all individuals awaiting a funding opportunity. A TCM line should be initiated in EMWS by the case manager and the TCM Plan of Care uploaded. Due to the amount of time an applicant may wait for a funding opportunity, a targeted case manager change may need to occur. In the event of a case management transition, the outgoing case manager is responsible for ending their TCM line in EMWS. The new case manager must then initiate their own TCM line upon being assigned to the case. Chapter 2 of the IPC Guide details the process and requirements for all TCM lines. The IPC Guide can be found in the [HCBS Document Library](#) under the *DD tab*. For further guidance, please contact the County assigned Benefits and Eligibility Specialist (BES).

ICAPs for Extraordinary Care Committee Cases

When an ICAP is authorized due to an Extraordinary Care Committee (ECC) request, do not click on the 'Express' button. Clicking the 'Express' button will result in the cancellation of the ICAP and delay the ECC request from moving forward. Case managers must add the respondents and their contact information into EMWS, and upload the signed ICAP Authorization form. Once those steps are complete, use the dropdown box to submit the ICAP request.

Extraordinary Care Committee Case Submission Timeline

Please remember that in order for the Division to move an Extraordinary Care Committee (ECC) request forward, it must have all required components as per the ECC checklist. Working with the assigned BES to ensure that all required documentation is present prior to submission will help prevent it from being rolled back for additional information. If a complete request has not been submitted within 90 days of the initiation date, the assigned BES will ask that you cancel the request. The ECC Checklist can be found in the [HCBS Document Library](#) under the *DD tab*.

Video Cameras in Common Areas

If providers are using video surveillance cameras in common areas of a residential home, a restriction of the right to privacy must be added to each participant's Individualized Plan of Care (IPC). In these cases, a letter from a doctor authorizing the restriction is not necessary; however, a letter from the provider is required to be uploaded (within the restriction) explaining the use of the monitors, their monitoring policy, and who has access to the video footage. The use of the monitors should also be documented throughout the plan as applicable. Please remember that video surveillance monitors in participant bedrooms or bathrooms are **NEVER** allowed.

Aging Up Tasks

When a participant will be aging up onto the Supports or Comprehensive Adult Waiver, it is important that the case manager makes the aging up tasks a priority. EMWS is not set up to accommodate participants being on the Supports Child (SC) or Comprehensive Child (CC) Waiver beyond the end of the month in which a person turns 21. Case managers need to ensure they are acknowledging the aging up closure tasks and working with the assigned BES to complete the eligibility tasks for the adult waiver so that the adult plan of care is completed and approved timely.

Personal Care Monitoring

The Division would like to remind case managers that the definition for personal care is very specific and one of the parameters for personal care providers includes the use of Electronic Visit Verification (EVV). Please note, as stated in the [DD Waiver Service Index](#), "The participant must be physically present during this service. Personal Care Services (PCS) must be provided in the participant's home or on their property. Personal care services must be essential to the health and welfare of the participant rather than that participant's family." Case managers must ensure that if this service is intended to be provided by a relative provider that all required components, as outlined in the service definition, are in place *prior* to this service beginning for the participant. Case managers are expected to monitor this service to ensure it is delivered as outlined in the Service Index through regular review of documentation, quarterly service observations, and immediately addressing any identified service delivery issues.

Case Manager Contact Information

The HCBS Section would like to remind case managers to make sure their contact information is up to date in the Wyoming Health Provider (WHP) Portal. This includes ensuring the organization's contact person, their phone number, and email address are up to date. We will begin inviting case managers and providers to WYSERVES training sessions. We will use the contact information in the WHP Portal to send invitations to register for WYSERVES training. Case managers are strongly encouraged to participate in the upcoming WYSERVES training opportunities. Guidance on how to update contact information is located in the [Provider Change Guidance Manual](#) which is found in the [HCBS Document Library](#) on the Web Portal Guides tab.

Medications

It has been identified that the Medication section in multiple plans of care are incomplete and require immediate updates to maintain compliance with DD Waiver standards. Case managers should review plans of care to verify the Medication section includes an exhaustive list of all current medications, including dosages and frequencies, and revise the list as needed. Additionally, please ensure that all Medication Consent forms are up to date and accurately reflect the providers assisting with medication.

Electronic Visit Verification Compliance Reminder

The HCBS Section is reminding case managers of the upcoming enforcement efforts related to EVV compliance requirements. Starting July 1, 2026 all providers required to use EVV must meet a minimum EVV compliance rate of 70% per month or be subject to enforcement action. Throughout the second half of 2026, this minimum compliance rate will gradually increase to 85%. An EVV Compliance Forum is scheduled for March 24th at 1:00 PM to provide a detailed overview of upcoming EVV compliance standards, including timelines for implementation, minimum compliance thresholds, and how compliance is calculated. HCBS staff will review common causes of noncompliance, demonstrate how to access and interpret EVV compliance reports in CareBridge, and outline available technical assistance and support resources. The forum will also include a question-and-answer session, allowing providers to seek clarification.

EVV Compliance Standards Forum

[Join Zoom Meeting](#)

Meeting ID: 951 7671 5337

Subscribe to the HCBS Email List

To receive regular updates and the latest information from the Home and Community Based Section (HCBS), case managers are reminded to subscribe to the HCBS email list. The subscription link is available on the [Contact Staff, Subscribe or Suggest](#) page. If you haven't received communications recently, please check your spam folder.

WRAP UP

The next DD Case Manager Support Call is scheduled for:

May 11, 2026

[**Link to Recorded Presentation**](#)

QUESTIONS AND ANSWERS

Is it possible to enable medication updates in EMWS without requiring a full plan modification?

Response:

As we are currently sunsetting EMWS, we're unable to implement this update at this time. However, we can certainly revisit this once the WYSERVES system is rolled out.

What is the EVV requirement? Can I please get more information on this?

Response:

Please plan to attend the Provider Forum on Tuesday, March 24, from 1-2pm. The Provider Support Unit will be presenting information on the EVV Minimum Compliance Standard as well as answering questions. If you are unable to attend live, the recording and a FAQ document will be made available after the live event.

I'm having issues initiating the TCM in EMWS. Who can I reach out to for help?

Response:

Please reach out to the BES for the specific participant to allow them to troubleshoot and assist you with this.

Are there any plans to incorporate a provider recruitment program into the current Waiver framework?

Response:

At this time, there are no active plans to incorporate a provider recruitment program into the current Waiver framework.