



## Frequently Asked Questions (FAQ)

### CCW Fee Schedule

#### [Draft Fee Schedule](#)

- 1. Q: Please provide guidance on when and how the Case Management T1016 (15-minute) code should be utilized.**

**A:** The intent of the 15-minute Case Management Unit (T1016) is to allow some flexibility and support both to program participants and to case managers. The appropriate uses of T1016 may include:

- The participant wishes to change case managers mid-month: T1016 allows for a participant to leave the outgoing case manager mid-month, and receive services from the incoming case manager, without either case manager sacrificing payment for their work. Both case managers can bill for the time during the transition month.
- The case management agency has unanticipated staff changes: Occasionally case management agencies have unanticipated staff changes that may require the transfer of the case. Again, T1016 allows for each appropriate case manager to bill for services rendered.

Please note that this 15-minute unit usage is aimed at supporting clients during transitional periods. A monthly visit must still be performed. Please contact the Division for further guidance in these situations on who has or will perform the home visit to support the client's well-being during this transition.

### CCW Service Index

#### [Draft Service Index](#)

- 2. Q: Will a separate training session be scheduled to address updates to the service index?**

**A:** Yes. The Division is excited about the new and revised offerings within the Service Index and plans to provide a number of trainings, including training on new services such as Assistive Technology and Companion Services. In the meantime, the Division encourages case managers and providers to thoroughly review the Service Index regarding these changes.

### Monthly Case Management Service

- 3. Q: Regarding the one-hour minimum service requirement, must the "one hour of direct contact" be 60 minutes of face-to-face contact? Specifically, would a 30-minute face-to-face visit supplemented by 30 minutes of contact via phone, text, or email with the participant fulfill this requirement?**

**A:** The one hour requirement includes face-to-face interactions as well as other direct contact. We expect the case manager to maintain regular contact and can be done by home visit, which is now required monthly, phone calls or other means of direct contact with the participant. The Case Manager Monthly Review (CMMR) will need to reflect this contact time with a separate entry for each



interaction that captures the time spent and a detailed description of what occurred.

4. **Q: If a one (1) hour in-home visit is required, what if we don't have enough time to complete the requirement for a participant? Will we still get paid the full monthly case management fee?**

**A:** As noted above, the one (1) hour of person to person contact does not have to be completed in its entirety during the monthly home visit. It can be split between the visit and phone calls, for example. In order to bill for a monthly unit of case management you will need to fulfill the requirements. Other waivers already utilize this standard, and case managers have generally found it manageable to complete the required hour of person-to-person contact.

5. **Q: If the participant does not want us in their home for that length of time, do we have to make up that time for a total of an hour?**

**A:** No, as noted above the entire hour of person to person contact does not need to be at the participant's home. Some can be accomplished through phone calls or other times in which you make direct contact with the participant. It is important to remind participants who agree to services on this waiver that this is a waiver of choice. Part of their agreement to participate in this waiver is to allow for regular, ongoing contact with their case manager. Making up time does not focus on the overall expectations of case management, instead the focus should be on meaningful interactions and support for the participant to assist them in achieving their goals and maintaining as independent life as possible.

6. **Q: What if the client ends up in the hospital and then goes into a SNF for rehab a couple weeks before we see them in their home?**

**A:** If a participant is in a hospital or other institutional setting throughout the month, they are not able to receive waiver services and you should not bill for case management services.

If you are concerned about the ability to manage your schedule throughout the month and plan for unforeseen events, we suggest planning home visits during a week at the beginning of the month. If the visit is completed within the first weeks, the monthly requirement is fulfilled. If a participant is unable to meet during the first week of the month, then case managers can schedule a time for later in the month when the participant's conflict has ended.

7. **Will case managers have to start the EVV process for the case management visits in their home?**

**A:** Case Management is not currently an EVV-required service in Wyoming. The Division continues to evaluate the benefits and drawbacks of implementing EVV for additional services.

8. **What changes are being made to the Case Manager Monthly Review (CMMR), and when will the monthly visit verification form be available in the document library?**

**A:** A change being made to the CMMR is to eliminate the free-text notes field from the bottom of the page. The intent of this change is to support case managers in filling in relevant information in the appropriate fields. The Monthly



Home Visit Verification form effective July 1st has been posted to the [HCBS Document Library](#) under the current Quarterly Visit Verification form.

- 9. Q: During a survey that was completed with random Waiver participants, the Division reported that some participants didn't know who their case managers were or that they stated that they hadn't even seen them or talked to them for several months. Was the monthly home visit requirement a result to ensure that they get their time with their case managers? Case managers and/or agencies of these participants should be audited and dealt with rather than enforcing such extreme requirements on us each month for each client.**

**A:** Thank you for this feedback. While the Division addresses individual performance issues as they arise, we hold all case managers to high standards due to the critical nature of the services they provide to CCW participants. These standards require thorough documentation of time spent with clients and confirmation of monthly contact. The current Medicaid reimbursement rate is based on an assumed four hours of work per client each month. As with all Medicaid transactions, providers must maintain sufficient documentation to support their claims. To ensure the responsible management of taxpayer funds, the Division must apply this standard to CCW case managers uniformly. Because the lack of required documentation is a widespread issue rather than an isolated one, enforcing this baseline expectation is necessary to ensure all case managers can verify the work they are being paid to perform.

- 10. Q: The service index mentions that socialization is not covered, but if case managers are in fact expected to complete a one-hour visit with the participant in their home, most likely, a lot of that time will be a social call in order to make up that hour.**

**A:** As noted previously, the entire hour of person-to-person contact for the month does not need to be completed during the home visit. The Division feels confident that the skilled case managers working with CCW clients will be able to be deliberate and reflective in their conversations, diligent with follow up, and use a variety of interview techniques. Current practices may need to be altered to ensure that conversations are person-centered, go beyond the surface, and discuss client needs. Motivational interviewing or other techniques should be explored to be able to have more structured and meaningful conversations regarding a participant's needs. If you need additional training and support regarding how to conduct interviews and why certain topic areas are included on the Case Manager Monthly Review, please feel free to contact your assigned [Benefits and Eligibility Specialist](#).