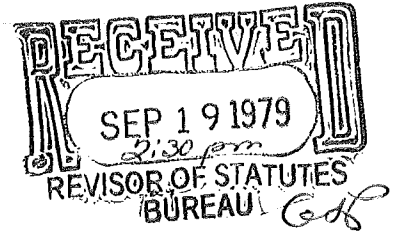


HSS-1

C E R T I F I C A T E



STATE OF WISCONSIN)
)SS
DEPT. OF HEALTH & SOCIAL SERVICES)

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Donald E. Percy, Secretary of the Department of Health and Social Services and custodian of the official records of said department do hereby certify that the annexed rules relating to the Uniform Fee System were duly approved and adopted by this department on September 19, 1979.

I further certify that said copy has been compared by me with the original on file in this department and that the same is a true copy thereof, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the department at the State Office Building, 1 W. Wilson St., in the City of Madison, this 19th day of September, A.D. 1979.

SEAL:

Donald E. Percy, Secretary
Department of Health & Social Services

ORDER OF THE
DEPARTMENT OF HEALTH AND SOCIAL SERVICES
AMENDING RULES

AMENDMENTS TO HSS 1.01-1.06 of the WISCONSIN ADMINISTRATIVE CODE Relating to the Uniform Fee System.

The amendments to HSS 1.01-1.06 are directed toward the following purposes:

1. Implementation of Confidentiality requirements of the Mental Health Act relating to billing and collections.
2. Simplification and clarification of language.
3. Adopting policy materials from A.O. 1.42 into rules-- thus eliminating A.O. 1.42 as a document binding upon agencies outside the department.
4. Policy changes to grant greater flexibility to agencies affected by the rules.
5. A policy change to increase the parental billing limit for outpatient psychotherapy services purchased or provided by a 51.42/437 board.

Pursuant to authority vested in the Department of Health and Social Services by section 227.014(2), Wis. Stats., and section 46.03(18), the Department of Health and Social Services hereby amends rules interpreting section(s) 46.03(18), 46.10, and 51.30(4)(b)2, Wis. Stats., as follows:

HEALTH AND SOCIAL SERVICES

HSS 1 UNIFORM FEE SYSTEM

- 1.01 Purpose, definitions, exempted services
- 1.02 Liability for paying fees
- 1.03 Billing rates and ability to pay
- 1.04 Fee establishment, calculation, and approval
- 1.05 Billing and collection responsibility and practice
- 1.06 Record-keeping, reports, confidentiality requirements, and disclosure authority

Note: Chapter HSS 1 as it existed on August 31, 1978 was replaced and a new Chapter HSS 1 was created effective September, 1978 and amended effective January 1, 1980.

Section HSS 1.01 Title and HSS 1.01 (1) of the Wisconsin Administrative Code are amended as follows:

HSS 1.01 INTRODUCTION PURPOSE, DEFINITIONS, EXEMPTED SERVICES. (1) STATEMENT OF INTENT. These rules, implementing ss. 46.03 (18), and 46.10, and 51.30 (4) (b) 2, Stats., standardize on a statewide basis the determination of liability and ability to pay, and otherwise regulate billing and collection activities for care and services provided or purchased by the department, a county department of public welfare ~~or~~ social services, or a board created under s. 51.42, 51.437, or 46.23, Stats. -

Note: Boards operated under the provisions of s. 46.033, Stats., or boards designated under s. 55.02, Stats., are included as well since authority is derived from the agencies specified above.

(2) DEFINITIONS. (a) "Administratively unfeasible" means that the total payments realized would approximate or be less than the cost of collections for a specified type of service.

(b) "Department" means the state department of health and social services.

(c) "Division" means one of the major subunits of the department.

~~(k)~~ (1) "Secretary" means the secretary of the department of health and social services.

~~(l)~~ (m) "Student" means an individual who is attending a school, college, university, or a course of vocational or technical training.

Section HSS 1.01 (3) of the Wis. Adm. Code is amended to read:

(3) WHERE RULES APPLY. These rules apply to all client-specific care and services purchased or provided by the department, county departments of ~~public welfare or~~ social services, and boards created under s. 51.42, 51.437, or 46.23, Stats., except as provided in section HSS 1.01 (4) of these rules.

(4) EXCEPTIONS. The following services are not subject to direct billing to responsible parties under these rules:

(a) Federal exemptions: any service for which the imposition of a charge is prohibited by federal law, regulation, or valid federal grant requirement, including educational services to handicapped pre-school age children with exceptional education needs under Title I of P.L. 89-313.

Section HSS 1.01 (4) (b) of the Wis. Adm. Code is amended as follows:

(b) Statutory or judicial exemptions: services exempted in ss. 46.03 (18) (a) and 46.10 (2m), Stats., services for handicapped children with exceptional education needs which local school districts must ensure be available under ss. 115.83 and 115.85, Stats., and any other care or service for which the imposition of a charge is prohibited by state law, ~~or court order,~~

(c) Exemptions established by the department, pursuant to s. 46.03 (18) (a), Stats:

1. Services offered and defined under the State Plan for Title XX of the Social Security Act which are specifically exempted from fee charging in the Plan.

2. Probation and parole services, court ordered supervision and other supervision services.

Note: In situations where this provision conflicts with the Title XX Plan and Regulations, the latter take precedence.

3. Purchases of education services by the divisions of corrections and vocational rehabilitation.

4. Sheltered employment, work activity, and adult non-medical day services programs for the handicapped.

5. Non-medical initial diagnosis and evaluation services.

6. Family planning services.

7. Advocacy.

4. Agencies providing services under contract with a county agency shall submit the supporting materials to the appropriate purchasing agency. If the county agency concurs with the request for exemption, the request and any additional supporting information and rationale shall be forwarded by the county agency to the Secretary, Department of Health and Social Services - Subject: Uniform Fee Exemption.

5. Fee exemption, when approved, relates to all clients receiving the specified service from the service provider. The Secretary may expand the fee exemption to include like services from all similar providers of service. Fee exemptions shall be communicated by letter to the appropriate county agency(ies).

HSS 1.01 (5) of the Wis. Adm. Code is amended to read:

(5) CROSS REFERENCE TO OTHER RULES. Rules governing entry fees for services provided under s. 46.25, Stats., shall be promulgated under (PW) of the Wis. Adm. Code pertaining to the bureau of child support.

Section HSS 1.02 Title and subsection (1) of the Wis. Adm. Code are amended as follows:

HSS 1.02 LIABILITY FOR PAYING FEES. (1) RESPONSIBLE PARTIES. Whenever a client receives a service which is subject to these rules, ~~the persons identified in ss. 46.03 (18) (b) and 46.10 (2), Stats.,~~ the client, the spouse of a married client, and the parents of a minor client shall be responsible for paying for the service in the manner set forth in these rules. These persons shall hereinafter be referred to as "responsible parties." Their legal obligation for the service received shall hereinafter be referred to as "liability."

(2) EXTENT OF LIABILITY. Liability for a service shall equal the fee, as determined pursuant to these rules, times the number of units of service provided, except as follows:

(a) For parties and services specified in s. 46.10 (14), Stats., liability of responsible parties listed therein and of insurance firms shall be as specified therein.

Section HSS 1.02 (2) (b) of the Wis. Adm. Code is amended to read:

(b) Notwithstanding paragraph (a), when inpatient care for minors at facilities listed in s. 46.10 (14), Stats., exceeds one year, the liability of ~~responsible parties with limited liability under s. 46.10 (14), Stats.,~~ parents shall be the lower of the rate established in s. 46.10 (14), Stats., or their ~~maximum~~ monthly payment rate as calculated under section HSS 1.03 ~~(9)~~ (12) or (13) and adjusted as appropriate under section HSS 1.03 ~~(10)~~ (14).

s. 46.115, Stats. Patients or residents placed on authorized leave or furlough and sent to a general hospital overnight or longer at their own expense shall not be charged for institution care while so hospitalized.

(5) REPORTING EXCEPTION FOR SOCIAL SERVICES. For fee-chargeable services of the type that have no potential for third-party payment recovery, a simplified reporting system may be established to eliminate the reporting of units of service to the facility's or agency's billing unit for clients and other responsible parties who show a documented zero ability to pay according to HSS 1.03. However, agency records shall contain information specified in HSS 1.06.

(6) LESSER SPECIAL RATES. These procedures govern the computation of a "lesser special rate" for residential facilities subject to s. 46.10 (14), Stats., where "no liability may accrue for the difference between the lesser special rate and \$4 per day."

(a) Inpatient Facilities. While HSS 1.02 (2) (b) requires the application of a lesser special rate when care exceeds one year, it is also permissible to apply a lesser special rate during the first year of such care when it is virtually certain that care will exceed one year and not to do so would work a documentable hardship on the family. The earlier application of the lesser special rate shall be determined by the payment approval authority.

(b) Residential Non-medical Facilities. Where the family's monthly payment rate determined according to HSS 1.03 is less than \$122, a lesser special rate shall be applied at the outset of services in lieu of the parental payment limit of \$4.00 per day. Agencies may set lesser special rates in one of the following ways:

1. A monthly rate shall be the lesser of \$122 or the family's monthly payment rate as determined according to HSS 1.03; however, the application of a monthly rate must not result in a parental payment of more than \$4.00 per day of care for any month.

2. A daily rate may be used by charging a family the lesser of \$4.00 per day or an amount consisting of their monthly payment rate multiplied by 12 with that product divided by 365.

(7) PARENTAL LIABILITY FOR NON-RESIDENTIAL SERVICES. (a) Parents are liable for the full cost of non-residential services; however, under certain conditions, HSS 1.03 (18) (a) limits parental billings for outpatient psychotherapy purchased or provided by county agencies to \$120 per month. Billings for other non-residential services are limited to \$4.00 per day. Claims for third parties are filed at the full cost of service. (See paragraph (b) on how health insurance recovery affects the billing amount to parents.) In billing parents, if the total charges in a calendar month exceed the monthly payment rate as calculated in HSS 1.03, the charges to the parents for that month shall be reduced to the monthly payment rate.

HSS 1.03 (2) of the Wis. Adm. Code is amended as follows:

(2) CLIENTS RESIDING IN FULL-CARE FACILITIES (MEDICAL AND OR NON-MEDICAL) WITH UNEARNED INCOME. A client receiving room and board with care or services full-care-service and who is the beneficiary of monthly payments intended to meet maintenance needs and/or accrues unearned income (including but not limited to interest from assets such as savings and investments), shall be expected to pay the lesser of the monthly liability for that care or the total amount of unearned income that month less an amount sufficient to satisfy the client's unmet personal needs and any court-ordered payments or support of legal dependents. The monthly amount of interest income is determined by dividing the current annual interest income by 12. If payments of unearned income are made to a representative payee or guardian, that person shall be expected to pay from the resources of the client as specified by the client but subject to further possible reductions according to other prerequisite uses of the benefit payments a payee may be required or permitted to make as established by the payer. For clients in full-care non-medical facilities receiving SSI benefits, no attempt shall be made to collect from any responsible party any remaining liability for those months that SSI payments are applied to the cost if such collections would reduce the SSI payment.

HSS 1.03 (3) of the Wis. Adm. Code is amended as follows:

(3) CLIENTS RESIDING IN FULL-CARE FACILITIES (MEDICAL AND OR NON-MEDICAL) WITH EARNED INCOME. Except for clients who are full time students or part-time students who are not full time employes, clients residing-in-full-care facilities receiving room and board with care or services who have earned income shall be expected to pay any remaining liability for that care each month from earnings as follows: After subtraction of the first \$65 of net earnings (after taxes) and any unmet court-ordered obligations or support of legal dependents, up to one-half the remaining amount of earnings.

HSS 1.03 (4) of the Wis. Adm. Code is amended as follows:

(4) PAYMENT ADJUSTMENT FROM CLIENT'S EARNED INCOME. The appropriate payment approval authority may authorize the following modification to subsection (3) of this section for clients whose care-treatment plans provide for economic independence within less than one year: Subtract up to \$240 of net earnings after taxes and proceed under the provisions of subsection (3) of this section provided that any amounts subtracted beyond \$65 per month under this subsection are used for the following purposes:

(a) Savings to furnish and initiate an independent living arrangement for the client upon release from the ~~full-care~~ facility. Under this provision, earnings shall not be conserved beyond the point that the client would no longer meet the asset eligibility limits for SSI or Medicaid.

(b) Purchase of clothing and other reasonable personal expenses the client will need to enter an independent living arrangement.

(c) Repayment of previously incurred debts.

Section HSS 1.03 (5) of the Wis. Adm. Code is amended as follows:

(5) PAYMENT ADJUSTMENT FROM CLIENT'S UNEARNED AND EARNED INCOME. When a client resides in a ~~full-care~~ facility less than 15 days in any calendar month, payments expected under subsections (2) and (3) of this section may be prorated between the days the client spends in and out of the facility.

(10) FINANCIAL INFORMATION FORM (APPLICATION FOR ABILITY TO PAY PROVISIONS).

(a) Except as otherwise provided in these rules, the Financial Information Form (DHSS 130) is mandatory when a responsible party chooses to be considered for ability to pay provisions.

Note: Form DHSS 130 may be ordered from:

Department of Health & Social Services
Forms Center - Room B354
1 West Wilson Street
Madison, Wisconsin 53702.

(b) County agencies may use their own forms in place of DHSS 130 subject to the prior approval of the department. Any substitute form(s) must be capable of fulfilling the same provisions as the current DHSS 130.

Section HSS 1.03 (11) of the Wis. Adm. Code is amended to read:

HSS 1.03 ~~(8)~~ (11) BILLING ON THE BASIS OF ABILITY TO PAY. (a) A responsible party who provides full financial information and authorizations for billing all applicable insurance shall be billed on the basis of the family's ability to pay.

(b) For each family, ability to pay shall be determined in the following manner:

Section HSS 1.03 (11) (b) 1. of the Wis. Adm. Code is amended to read:

1. The annual gross income of family members shall be determined and totaled except that the earned income of any child who is a full time student or a part-time student but not a full time employe shall be excluded. Income from self-employment or rent shall be the total net income after expenses. The income of any family member in a full-care residential setting is treated separately under this rule.

2. The monthly average income shall be computed by dividing the annual gross income by 12.

3. Monthly payments from court ordered obligations shall be subtracted from monthly average income.

4. From the remaining amount there shall be subtracted:

a. An amount determined by the department based on the bureau of labor statistics' most recent annual lower-level-budget monthly figure adjusted for a family of like size, and

b. The estimated amount of income taxes and social security or federal retirement obligations above the level determined in subparagraph a. for a family of like income and size.

5. The resulting amount equals the family's "monthly available income". A positive amount signifies ability to pay.

3. Responsible parties shall be informed in writing of approval or denial with approval taking the form of a written agreement.

4. Hardship adjustments shall be reviewed annually and, if necessary, renegotiated.

Section HSS 1.03 (15) of the Wis. Adm. Code is adopted to read:

(15) EXTENDED PAYMENT PLANS. Agencies must have the capability to work out an extended payment plan with any responsible party who indicates that payment at their monthly payment rate would place a burden on their family. Such payment plans have the effect of the responsible party paying a lesser monthly amount over a longer period of time but with the total expected amount to equal the full application of the monthly payment rate under HSS 1.02 (8). Authority to approve extended payment plans may be placed at whatever staff level the payment approval authority determines is appropriate.

Section HSS 1.03 (16) of the Wis. Adm. Code is adopted to read:

(16) SHORTCUTS TO DOCUMENT NO ABILITY TO PAY FOR SERVICES NOT COVERED BY THIRD-PARTY PAYORS.

a. Family income information in form DHSS 130 is not required where no family member receives earned income and the family is supported in full or in part by income maintenance benefits.

b. The financial information form (DHSS 130) is not required for fee-chargeable services when zero ability to pay can be documented. The following families making application for services are automatically considered to have no ability to pay when the following financial information is documented on other forms required by the department.

(1) Recipients of SSI.

(2) When the family has no earned income and are recipients of AFDC, Medical Assistance, Food Stamps or General Relief.

(3) Group-eligibles under the State Title XX Plan who request services.

(4) Families whose income is lower than the point at which payment begins according to the maximum monthly payment rate schedule for families of similar size.

Section HSS 1.03 (17) of the Wis. Adm. Code as renumbered herein is amended to read:

~~(11)~~ (17) RELATIONSHIP TO EXTENT OF SERVICES. When full financial information is provided, the maximum monthly payment rate established according to par. (12) or (13) and adjusted according to par. (14) (a) is the total ceiling amount that the family may be billed a month regardless of the number of family members receiving services, the number of agencies providing services, or the magnitude

of ~~public welfare or~~ social services, or a board established under s. 51.42, 51.437, or 46.23, Stats., or an agency providing services pursuant to a contract in excess of \$10,000 per year with the department, a county department of public welfare or social services, or a board established under s. 51.42, 51.437, or 46.23, Stats., shall establish a fee or set of fees as follows:

Section HSS 1.04 (1) (a) of the Wis. Adm. Code is amended to read:

(a) Facility fee or service fee. The division, county department of ~~public welfare or~~ social services, board established under s. 51.42, 51.437, or 46.23, Stats., or private firm in charge of the facility shall establish a uniform facility fee, except that if the facility provides 2 or more services of a disparate nature with associated wide differences in per-service cost, separate per-service fees shall be established.

(b) Fee calculation. Fees shall be determined in advance for each calendar year, except that divisions may determine fees in advance for each fiscal year. For purchased services, the contract rate and billable units to the purchaser should be identical to the fee and billable units to the responsible party(s), wherever possible. Fees shall be determined by dividing either the number of patient days projected by the year in question, or, if the facility or service provides less than 24 hour care, the number of hours of billable client service projected for the year in question, into allowable anticipated facility or service-related expenditures for the year in question. For purchased services not easily converted to time units and where the contract or agreement specifies purchase units other than time, fees shall be set using the contract unit.

(c) Expenditures. Expenditures mean ordinary and necessary budgeted non-capital expenses and depreciation on capital equipment. Cost standards that govern purchase of care and services under s. 46.036, Stats., shall apply to expenditures for calculating the fee. Outlays associated with non-client-specific community service and with client services exempted under section HSS 1.01 (4) plus a pro-rata share of depreciation and associated administration or indirect costs are excluded. Where the facility establishes separate per-service fees, expenditures mean ordinary and necessary per-service expenses plus a pro-rata share of depreciation and indirect or administration costs.

Sections HSS 1.04 (1) (d - e) of the Wis. Adm. Code are renumbered HSS 1.04 (1) (g - h) respectively.

Sections HSS 1.04 (1) (d - f) of the Wis. Adm. Code are adopted to read:

(d) Calculating fee(s). A division, county department of social services, board established under s. 51.42, 51.437, or 46.23, or private firm (under contract to one of the above) responsible for the calculation of the facility or service fees shall complete form CD-142 for the calculation of such unit rates. Budgeted costs shall be segregated among cost-centers based on groupings of programs which have significantly different costs. Since a single fee is acceptable for a facility, a single direct treatment cost-center may be used if the facility does not provide services of a disparate nature with associated wide discrepancies in cost.

Note: An example of services with costs of a disparate nature would be services provided by disciplines such as psychiatrists versus social workers.

Note: Forms CD-142 may be ordered from:

Department of Health & Social Services
Forms Center - Room B354
1 West Wilson Street
Madison, Wisconsin 53702.

(e) Multiple therapist fees. Where fees are computed according to professional disciplines (i.e. psychiatrist, psychologist, social worker, nurse, etc.), a fee for an hour of service provided by two or more professionals would be the sum of the hourly rates for each professional.

Note: Example: The fee for an hour of service provided by a psychologist and social worker would be the sum of the hourly rate computed for each discipline.

(f) Group therapy fees. Group therapy fees shall be computed by dividing the fee calculated according to (d) or (e) by the projected number of non-family-related clients per group.

Note: Examples:

For group sessions conducted by one therapist with an average size of 7.

$$\text{Group fee} = \text{Therapist fee} \div 7$$

For group sessions conducted by more than one therapist with an average group size of 10.

$$\text{Group fee} = (\text{Therapist 1} + \text{Therapist 2 etc.}) \div 10$$

Section HSS 1.04 (1) (g) of the Wis. Adm. Code as renumbered herein is repealed and re-adopted to read:

(d) (g) Fee approval.

1. Provided services. County departments of social services and boards established under section 51.42, 51.437, or 46.23, Stats., shall submit fees for provided services for review and approval in compliance with procedures established by the department's division of community services. The division of community services shall inform agencies submitting fees of their acceptance or rejection except where another form of approval is set by law. Divisions shall approve rates for facilities they operate except where another form of approval is set by law.

2. Contracted services. The administrative unit authorized to enter into contracts or agreements for purchased services shall approve the fee(s) for such services before execution of the contract or agreement and the approved fee(s) shall be part of the contract.

Sections HSS 1.05 (1) (b - e) of the Wis. Adm. Code is adopted to read:

(b) Formal delegation approval is required for care received in county hospitals under s. 51.09, Stats., on and/or after January 1, 1975. Until such time as collections are delegated for these services, the department's bureau of collections will continue to manage these accounts. Delegation of collections for county hospitals will be granted to the program director of the appropriate 51.42 board upon submission of required form CD-143 to the Secretary of the Department - Attention: Bureau of Collections. Where the board of trustees of the hospital is not the 51.42 board, application for delegated collection authority shall specify the role in the collection function and how any disposition of monies collected by the facility will be handled. When application is received, a representative of the bureau of collections will visit the facility in question to determine the adequacy of their capability to operate in accord with laws and rules relative to the collections function.

Note: Form CD-143 may be obtained from:

Department of Health & Social Services
Bureau of Collections
1 West Wilson Street
Madison, Wisconsin 53702.

(c) For services provided in Milwaukee County-operated facilities, the provisions of s. 46.10 (12), Stats., take precedence over s. 46.10 (16), Stats. Therefore, Milwaukee County may continue to collect for these services without additional delegation authority. However, if Milwaukee County chooses not to operate under s. 46.10 (12), Stats., the provisions of s. 46.10 (16), Stats., will apply according to (d) of this section.

(d) Collections for all other services purchased or provided by boards not mentioned in (1) or (2) above are delegated to the program director of the board.

(e) Accounts collected by the department's bureau of collections for boards established under ss. 51.42, 51.437, or 46.23, Stats., shall be distributed according to s. 46.10 (8m), Stats. Note. Chapter 29, Laws of 1977, revises s. 46.10 (8m), Stats.

Section HSS 1.05 (2) of Wis. Adm. Code is renumbered HSS 1.05 (2) (a) and amended to read:

(2) COUNTY DEPARTMENTS OF ~~PUBLIC WELFARE OR SOCIAL SERVICES~~. (a) Where services covered by these rules are delivered through a county department of public welfare or social services, the county department of ~~public welfare or social services~~ shall have billing and collection responsibility for those services unless it delegates such responsibility to ~~another~~ a provider agency or agencies by written agreement specifying the conditions of such delegation.

Section HSS 1.05 (2) (b) of the Wis. Adm. Code is adopted to read:

(b) Accounts collected by the department's bureau of collections for county departments of social services shall be distributed according to s. 46.03 (18) (g), Stats.

Section HSS 1.05 (7) of the Wis. Adm. Code is adopted to read:

(7) FIRST BILLINGS TO RESPONSIBLE PARTIES WHO HAVE AN ABILITY TO PAY OR WHO HAVE NOT PROVIDED FULL FINANCIAL INFORMATION. Where it is anticipated third-parties will pay less than the full liability, the first billing to responsible parties shall be sent during the calendar month following the month services were provided, except where an agreement to delay billing exists. A cover letter explaining the liability and arrangements for making payment shall accompany the first billing statement to the responsible person(s) billed.

Section HSS 1.05 (8) of the Wis. Adm. Code is adopted to read:

(8) CONTENT OF BILLING STATEMENTS TO RESPONSIBLE PARTIES. The billing statement shall be designed to meet all the requirements of the uniform fee system in the laws, rules and this order and must allow for the following entries:

(a) Any balance brought forward from the last statement.

(b) Any payments received during the billing period.

(c) Any services provided during the billing period with charges showing liability and adjustments for parental maximums (except billings to clients for full care) and adjustments for maximum monthly payment rate (except for inpatient accounts).

(d) Total outstanding charges to date ((a) minus (b), plus (c)).

Section HSS 1.05 (9) of the Wis. Adm. Code is adopted to read:

(9) MAILING BILLING STATEMENTS. When a statement or other correspondence is mailed to a responsible party, there shall be no information on the mailed item to indicate that the item is necessarily related to care or treatment for mental illness, developmental disability, alcoholism, drug abuse or any other condition treatable under the provisions of Chapters 48, 51, 55, or 970, Stats.

Section HSS 1.05 (10) of the Wis. Adm. Code is adopted to read:

(10) ADDRESSING BILLING STATEMENTS. Statements shall only be addressed to the following persons:

(a) the client

(b) the client's spouse if the client is personally unable to pay the entire liability

(c) the parents or guardian of a minor client

(d) the guardian of the estate of a person adjudged incompetent under Chapter 880, Stats.

(e) a person appointed representative payee of social security or SSI benefits of a client or responsible party

~~(7)~~ (13) DELINQUENT ACCOUNT PROCEDURES. (a) An account is considered delinquent when a determination has been made that ability to pay currently exists, that no payment has been made over a period of 90 days, and that 3 or more contacts have been made to secure a payment.

Section HSS 1.05 (13) (b) of the Wis. Adm. Code as herein renumbered is further renumbered HSS 1.05 (13) (d).

Sections HSS 1.05 (13) (b & c) of the Wis. Adm. Code are adopted to read:

(b) Follow-up of accounts. Each billing/collection unit shall have a procedure to review accounts periodically for follow-up. When no payment is made on the initial billing, a second billing showing accumulated monthly charges shall be sent during the next calendar month. A note shall be enclosed explaining the bill and the amount now due. No response after 30 days following the second billing suggests checking with the service staff to see if there are any known reasons why collection efforts should not be pursued. Options are to:

1. Continue the standard billing-follow-up approach.
2. Modify the approach by writing individualized letters or making telephone or other contacts.
3. Defer billing and follow-up for a period.
4. Recommend referral of the account for collection.

The Payment Approval Authority shall determine the course of action for unclear cases. Actions taken shall be documented in the client's collection file.

(c) Referral of accounts for collection. Agencies shall refer accounts for collection when they are considered delinquent as defined in subsection HSS 1.05 (7), when the agency's own collection unit has completed required follow-up procedures.

1. The following channels shall be utilized, depending on their availability and potential for timely handling of the account:

- District Attorney or Corporation Counsel handling legal matters for the county department of social services, or 51.42, 51.437, or 46.23 board involved.
- Office of Administrative Rules and Hearings (Collection and Deportation Counsel), Wisconsin Department of Health and Social Services through referral to the Bureau of Collections, and

2. No referral may be made to a private collection agency or private law office without the written permission of the bureau of collections.

3. The following information shall be sent to the collection unit when referring an account for collection:

Statement of charges.

(d) Billings sent to the following persons shall not constitute unlawful re-disclosure of financial or service information when such information is obtained by the agency in accordance with s. 51.30 (4) (b) 2., Stats.:

The client

The spouse of the client

The parent, guardian or person acting in loco parentis for a minor client

The representative payee for benefits owing to the client from social security or SSI

The guardian of the estate of a person adjudged incompetent under ch. 880 Stats.

(e) Except where prohibited by federal regulations relating to alcohol and drug treatment records, the persons named in s. 51.30 (5) (a) may consent in place of the client for the release of medical information in order to obtain insurance benefits owing to the client, the client's spouse or the parents of a client.

Section HSS 1.06 (3) (a) of the Wis. Adm. Code is repealed and readopted to read:

~~(3) CLIENT RECORDS. (a) Contents:--With respect to each client served by a facility or agency subject to these rules, a client file or files shall be maintained as prescribed by the department and shall include complete, clear, and exact records relating to the services received by the client and the financial situation of the family involved.~~

(a) RECORDS. Clear, exact and auditable records shall be established and maintained for each client regardless of the client's financial status or services involved. Note: [This does not mean that all of these records must be reported to the agency's billing unit; but, if necessary, the provider's records should include or allow for each client, the potential for reporting to the billing unit enough information to prepare a billing statement that establishes liability for and by each calendar month during which services are provided.] Such information shall include:

1. Dates of service contacts.

2. Times and duration of such contacts.

3. The nature of the contact (professional service or paraprofessional service).

4. In the case of residential services, the actual days of care must be documentable.

Sections HSS 1.06 (3) (b & c) of the Wis. Adm. Code are renumbered (d & e) respectively.

Sections HSS 1.06 (3) (b & c) of the Wis. Adm. Code are adopted to read:

The amendments contained in this order shall take effect on
January 1, 1980 pursuant to authority granted by section 227.026(1)(b),
Wis. Stats.

Dated this 19th day of September, 1979.

WISCONSIN DEPARTMENT OF HEALTH
AND SOCIAL SERVICES



A handwritten signature in black ink, appearing to read 'D.E.P.', is written over a horizontal line.

DONALD E. PERCY, SECRETARY

SEAL:



State of Wisconsin \ DEPARTMENT OF HEALTH & SOCIAL SERVICES

OFFICE OF THE SECRETARY
1 WEST WILSON STREET
MADISON, WISCONSIN 53702

September 19, 1979

Mr. Orlan Prestegard
Revisor of Statutes
411 West, State Capitol
Madison, Wisconsin 53702

Dear Mr. Prestegard:

As provided in section 227.023, Wis. Stats., there is hereby submitted a certified copy of HSS 1 of the WISCONSIN ADMINISTRATIVE CODE pertaining to the Uniform Fee System, as adopted by this department on September 19, 1979. In accordance with section 227.018(2), Wis. Stats., the 30-day review by the appropriate legislative committee members expired with no objections being raised.

The rule is being submitted to the Governor as required by section 14.06, Wis. Stats., and to the Secretary of State as required by section 227.023, Wis. Stats.

Sincerely,

A handwritten signature in black ink, appearing to read "D.E. Percy".

DONALD E. PERCY
SECRETARY

Enclosure