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CERTIFICATE

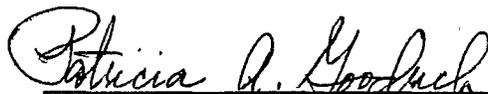
STATE OF WISCONSIN )  
 ) SS  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES)

I, Patricia A. Goodrich, Secretary of the Department of Health and Social Services and custodian of the official records of the Department, do hereby certify that the annexed rules relating to coverage of community support program services for chronically mentally ill persons under the Medical Assistance program were duly approved and adopted by this Department on August 20, 1990.

I further certify that this copy has been compared by me with the original on file in the Department and that this copy is a true copy of the original, and of the whole of the 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 Street, in the city of Madison, this 20th day of August, 1990.

SEAL:



Patricia A. Goodrich, Secretary  
Department of Health and Social Services

ORDER OF THE  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
REPEALING, RENUMBERING, AMENDING AND CREATING RULES

To repeal HSS 106.04(2)(b) to (e) and 107.02(4)(c); to renumber HSS 106.04(2)(f); to amend HSS 104.01(12)(a)1k, 106.04(2)(a), 106.075(2)(intro) and 107.02(4)(a); and to create HSS 101.03(27m), 104.01(12)(a)1L to q, 105.255, 107.13(2)(c)5, (3)(c)2, (4)(c)4 and (6) relating to community support program services for chronically mentally ill persons under the Medical Assistance (MA) Program.

Analysis Prepared by the Department of Health and Social Services

Section 49.46(2)(b)6L, Stats, as created by 1989 Wisconsin Act 31, directs the Department to pay allowable charges to certified Medical Assistance (MA) providers who provide services in a community setting for categorically needy, chronically mentally ill recipients living at home. The MA program has for a long time paid for psychotherapy and some other traditional restorative services as separate and distinct services provided at medical sites such as clinics and outpatient facilities. Under these rules, psychotherapy and psychosocial rehabilitative services will be provided by certified county Community Support Programs (CSPs) to MA-eligible persons to ameliorate the symptoms of chronic mental illness and increase the likelihood that they will be able to function in the community. Through participation by recipients in a CSP, the incidence and duration of institutional treatment that would otherwise result from mental illness can be reduced.

Emergency rules have been in effect since January 1, 1990. They were amended on January 17, 1990.

The Department's authority to repeal, renumber, amend, and create these rules is found in s. 49.50(10), Stats. The rules interpret s. 49.46(2)(b)6L, Stats., as created by 1989 Wisconsin Act 31.

SECTION 1. HSS 101.03(27m) is created to read:

HSS 101.03(27m) "Community support program" or "CSP" means a community-based coordinated care and treatment program operated by a provider certified under s. HSS 105.255 to provide mental health and psychosocial rehabilitative services, including case management services, to MA-eligible, chronically mentally ill recipients residing in the community.

SECTION 2. HSS 104.01(12)(a)1 k is amended to read:

HSS 104.01(12)(a)1 k. Occupational, physical or speech therapy services received over exceeding 30 hours or \$1,500 for any one therapy, whichever comes occurs first, during one calendar year;

SECTION 3. HSS 104.01(12)(a)1 L to q are created to read:

HSS 104.01(12)(a)1 L. Case management services provided under s. HSS 107.32;

m. Personal care services provided under s. HSS 107.112;

n. Hospice care services;

o. Alcohol and other drug abuse (AODA) day treatment services;

p. Respiratory care for ventilator-assisted recipients provided under s. HSS 107.113; and

q. Community support program (CSP) services provided under s. HSS 107.13(6).

SECTION 4. HSS 105.255 is created to read:

HSS 105.255 CERTIFICATION OF COMMUNITY SUPPORT PROGRAMS.

(1) GENERAL REQUIREMENTS. For MA certification, a community support program (CSP) service provider shall meet the requirements under ss. HSS 63.06 to 63.17 and this section. The department may waive a requirement in ss. HSS 63.06 to 63.17 under the conditions specified in s. HSS 63.05 if requested by a provider. Certified providers under this section may provide services directly or may contract with other qualified providers to provide all or some of the services described in s. HSS 107.13(6).

(2) MENTAL HEALTH TECHNICIAN. (a) In this subsection, "mental health technician" means a paraprofessional employe of the CSP who is limited to performing the services set out in s. HSS 63.11(3)(c) and (4).

(b) Except as provided in par. (c), a mental health technician shall have at least 1,000 hours of supervised work experience with long-term mentally ill persons and meet at least one of the following conditions:

1. Has satisfactorily completed the educational curriculum developed by the department;

2. Is certified by the American occupational therapy association as an occupational therapy assistant;

3. Is a practical nurse (LPN) licensed under s. 441.10, Stats.;

4. Has satisfied the training requirements under s. HSS 133.17(4) for a home health aide;

5. Is included in the registry of persons under ch. HSS 129 who have completed a nurse's assistant training and testing program or only a testing program; or

6. Has satisfied the requirements under s. HSS 105.17(3)(a)1 to provide personal care services and has completed an additional 1000 hours of supervised work experience with long-term mentally ill persons.

(c) A mental health technician providing CSP services who does not meet the requirements of par. (b) shall meet the requirements of s. HSS 63.06(4)(a)9 and shall in addition meet the requirements of par. (b) within one year following the effective date of the provider's MA certification or the technician's date of employment by the CSP, whichever is later.

(3) DOCUMENTATION OF EMPLOYE QUALIFICATIONS. Providers shall maintain current written documentation of employe qualifications required under s. HSS 63.06(4) and this section.

SECTION 5. HSS 106.04(2)(a) is amended to read:

HSS 106.04(2) COST SHARING. (a) General policy. Pursuant to s. 49.45 (18), Stats., the department shall establish copayment rates and deductible amounts for medical services covered under MA. Recipients shall provide the copayment amount or coinsurance to the provider or pay for medical services up to the deductible amount, as appropriate, except that the services and recipients listed in s. HSS 104.01(12)(a) are exempt from cost-sharing requirements. Providers are not entitled to reimbursement from MA for the copayment, coinsurance or deductible amounts for which a recipient is liable.

SECTION 6. HSS 106.04(2)(b) to (e) are repealed.

SECTION 7. HSS 106.04(2)(f) is renumbered HSS 106.04(2)(b).

SECTION 8. HSS 106.075(2)(intro.) is amended to read:

HSS 106.075(2)(intro.) The department may pursue monetary recovery from a provider of case management services or community support program services when an audit adjustment or disallowance has been attributed to the provider by the federal health care financing administration or the department. The provider shall be liable for the entire amount. However, no fiscal sanction under this subsection shall be taken against a provider unless it is based on a specific policy which was:

SECTION 9. HSS 107.02(4)(a) is amended to read:

HSS 107.02(4) COST-SHARING. (a) General policy. The department shall establish cost-sharing provisions for MA recipients, pursuant to s. 49.45(18),

Stats. Cost-sharing requirements for providers are described under s. HSS 106.04(2), and services and recipients exempted from cost-sharing requirements are listed under s. HSS 104.01(12)(a).

SECTION 10. HSS 107.02(4)(c) is repealed.

SECTION 11. HSS 107.13(2)(c)5 is created to read:

HSS 107.13(2)(c)5 Services under this subsection are not reimbursable if the recipient is receiving community support program services under sub. (6).

SECTION 12. HSS 107.13(3)(c)2, (4)(c)4 and (6) are created to read:

HSS 107.13(3)(c)2 Services under this subsection are not reimbursable if the recipient is receiving community support program services under sub. (6).

(4)(c)4 Services under this subsection are not reimbursable if the recipient is receiving community support program services under sub. (6).

(6) COMMUNITY SUPPORT PROGRAM (CSP) SERVICES. (a) Covered services.

Community support program (CSP) services shall be covered services when prescribed by a physician and provided by a provider certified under s. HSS 105.255 for recipients who can benefit from the services. These non-institutional services make medical treatment and related care and rehabilitative services available to enable a recipient to better manage the symptoms of his or her illness, to increase the likelihood of the recipient's independent, effective functioning in the community and to reduce the incidence and duration of institutional treatment otherwise brought about by mental illness. Services covered are as follows:

1. Initial assessment. At the time of admission, the recipient, upon a psychiatrist's order, shall receive an initial assessment conducted by a psychiatrist and appropriate professional personnel to determine the need for CSP care;

2. In-depth assessment. Within one month following the recipient's admission to a CSP, a psychiatrist and a treatment team shall perform an in-depth assessment to include all of the following areas:

- a. Evaluation of psychiatric symptomatology and mental status;
- b. Use of drugs and alcohol;
- c. Evaluation of vocational, educational and social functioning;
- d. Ability to live independently;
- e. Evaluation of physical health, including dental health;
- f. Assessment of family relationships; and
- g. Identification of other specific problems or needs;

3. Treatment plan. A comprehensive written treatment plan shall be developed for each recipient and approved by a psychiatrist. The plan shall be developed by the treatment team with the participation of the recipient or recipient's guardian and, as appropriate, the recipient's family. Based on the initial and in-depth assessments, the treatment plan shall specify short-term and long-term treatment and restorative goals, the services required to meet these goals and the CSP staff or other agencies providing treatment and psychosocial rehabilitation services. The treatment plan shall be reviewed by the psychiatrist and the treatment team at least every 30 days to monitor the recipient's progress and status;

4. Treatment services, as follows:

- a. Family, individual and group psychotherapy;
- b. Symptom management or supportive psychotherapy;

c. Medication prescription, administration and monitoring;

d. Crisis intervention on a 24-hour basis, including short-term emergency care at home or elsewhere in the community; and

e. Psychiatric and psychological evaluations;

5. Psychosocial rehabilitation services as follows:

a. Employment-related services. These services consist of counseling the recipient to identify behaviors which interfere with seeking and maintaining employment; development of interventions to alleviate problem behaviors; and supportive services to assist the recipient with grooming, personal hygiene, acquiring appropriate work clothing, daily preparation for work, on-the-job support and crisis assistance;

b. Social and recreational skill training. This training consists of group or individual counseling and other activities to facilitate appropriate behaviors, and assistance given the recipient to modify behaviors which interfere with family relationships and making friends;

c. Assistance with and supervision of activities of daily living. These services consist of aiding the recipient in solving everyday problems; assisting the recipient in performing household tasks such as cleaning, cooking, grocery shopping and laundry; assisting the recipient to develop and improve money management skills; and assisting the recipient in using available transportation;

d. Other support services. These services consist of helping the recipient obtain necessary medical, dental, legal and financial services and living accommodations; providing direct assistance to ensure that the recipient obtains necessary government entitlements and services, and counseling the recipient in the use of these services; and counseling the recipient in appropriately relating to neighbors, landlords, medical personnel and other personal contacts; and

6. Case management in the form of ongoing monitoring and service coordination activities described in s. HSS 107.32(1)(d).

(b) Other limitations. 1. Mental health services under s. HSS 107.13(2) and (4) are not reimbursable for recipients receiving CSP services.

2. An initial assessment shall be reimbursed only when the recipient is first admitted to the CSP and following discharge from a hospital after a short-term stay.

3. Group therapy is limited to no more than 10 persons in a group. No more than 2 professionals shall be reimbursed for a single session of group therapy. Mental health technicians shall not be reimbursed for group therapy.

(c) Non-covered services. The following CSP services are not covered services:

1. Case management services provided under s. HSS 107.32 by a provider not certified under s. HSS 105.255 to provide CSP services;

2. Services provided to a resident of an intermediate care facility, skilled nursing facility or an institution for mental diseases, or to a hospital patient unless the services are performed to prepare the recipient for discharge from the facility to reside in the community;

3. Services related to specific job-seeking, job placement and work activities;

4. Services performed by volunteers;

5. Services which are primarily recreation-oriented; and

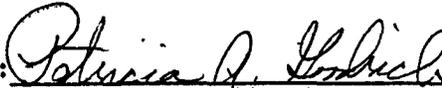
6. Legal advocacy performed by an attorney or paralegal.

The rules contained in this order shall take effect on the first day of the month following their publication in the Wisconsin Administrative Register, as provided by s. 227.22(2), Stats.

Wisconsin Department of Health and  
Social Services

Dated: August 20, 1990

By:



Patricia A. Goodrich  
Secretary

SEAL: