

# Case Management Services

<b>Paperwork completion for coordination of care</b>	
Writing a letter on the consumer's behalf vs. simply mailing a letter	Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Mailing an invitation to the consumer vs. simply mailing an event calendar	This service appears to be an administrative function. Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Mailing appointment reminders	This service appears to be an administrative function. Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Preparing documentation for the consumer at the consumer's request	This service appears to be an administrative function. Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Completing an application for the consumer	Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Reviewing/updating consumer charts with the consumer not present	Core Billing Limitations A provider can only bill for his/her time spent in providing the actual service. For all services, the provider may not bill any time associated with note taking and/or medical record upkeep as this time has been included in the rate.
Sending faxes on consumer's behalf	Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Faxing referrals to providers	This service appears to be an administrative function. Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
E-mailing communication to providers or other members of the clinical team regarding the consumer	Case management Billing Limitations:  Written electronic communication (e-mail) and leaving voice messages are allowable as case management functions. These functions are not to become the predominant means of providing case management services and require specific documentation as specified below.  Written electronic communication (e-mail) must be about a specific individual and is allowable as case management, as long as documentation (a paper copy of the e-mail) exists in the case record.
Reading e-mails received from consumers or clinical team members regarding the consumer	Case management may not be billed for simply reading e-mails. The following applies when providing case management services via e-mail communication:

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	<p>Case management Billing Limitations</p> <p>Written electronic communication (e-mail) and leaving voice messages are allowable as case management functions. These functions are not to become the predominant means of providing case management services and require specific documentation as specified below.</p> <p>Written electronic communication (e-mail) must be about a specific individual and is allowable as case management, as long as documentation (a paper copy of the e-mail) exists in the case record.</p>
E-mailing consumer directly	<p>Case management Billing Limitations</p> <p>Written electronic communication (e-mail) and leaving voice messages are allowable as case management functions. These functions are not to become the predominant means of providing case management services and require specific documentation as specified below.</p> <p>Written electronic communication (e-mail) must be about a specific individual and is allowable as case management, as long as documentation (a paper copy of the e-mail) exists in the case record.</p>
Telephone calls with family members, probation officers, etc. regarding consumer	<p>Case Management Billing Limitations</p> <p>Written electronic communication (e-mail) and leaving voice messages are allowable as case management functions. These functions are not to become the predominant means of providing case management services and require specific documentation as specified below.</p> <p>When voice messages are used, the case manager must have sufficient documentation justifying a case management service was actually provided. Leaving a name and number asking for a return call is not sufficient to bill case management.</p> <p>When leaving voice messages, a signed document in the client chart granting permission to leave specific information would be required.</p>
Leaving a voicemail message for consumer	<p>Case Management Billing Limitations</p> <p>Written electronic communication (e-mail) and leaving voice messages are allowable as case management functions. These functions are not to become the predominant means of providing case management services and require specific documentation as specified below.</p> <p>When voice messages are used, the case manager must</p>

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	<p>have sufficient documentation justifying a case management service was actually provided. Leaving a name and number asking for a return call is not sufficient to bill case management.</p> <p>When leaving voice messages, a signed document in the client chart granting permission to leave specific information would be required.</p>
Arranging transportation for a consumer	Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
<b>Transportation/Driving</b>	
Picking up a food box for a consumer	Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Picking up a food box for a consumer and bringing it back to the provider's office and delivering to the consumer at a later time	Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?
Picking up medication/groceries for the consumer	<p>Case Management Billing Limitations</p> <p>The provider should bill all time he/she spent in direct or indirect contact with the person, family and/or other parties involved in implementing the treatment/service plan. Indirect contact includes telephone calls, <i>picking up and delivering medications</i>, and/or collateral contact with the person, family and/or other involved parties.</p> <p>Picking up groceries for the consumer:</p> <p>Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?</p>
Service delivered while driving a consumer to an appointment (i.e. provide substance abuse engagement services)	<p>Case management Billing Limitations</p> <p>The provider may not bill case management for any time associated with a therapeutic interaction nor simultaneously with any other services.</p>
Time spent flying with consumer to a treatment program in another state	These services are reimbursed By Report (BR). Please see the Covered Services Guide and the B2 matrix
Time spent conducting outreach without successfully finding the consumer	<p>Core Billing Limitations</p> <p>The provider may only bill the time spent in face-to-face direct contact; however, when providing assessment, case management services, the provider may also bill indirect contact. Indirect contact includes phone calls, leaving voice messages and sending e-mails (with limitations), picking up and delivering medications, and/or collateral contact with the enrolled person, family and/or other involved parties.</p> <p>Core Provider Travel Billing Limitations</p>

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	<p>If a behavioral health professional, behavioral health technician or behavioral health paraprofessional travels to provide case management services or provider type 85, 86, 87 or A4 travels to provide services to a client and the client misses the appointment, the intended service may not be billed. Additionally, providers may not bill for travel for missed appointments.</p>
<p>Time spent driving to do a home visit when the consumer is not home</p>	<p>Core billing Limitations</p> <p>The provider may only bill the time spent in face-to-face direct contact; however, when providing assessment, case management services, the provider may also bill indirect contact. Indirect contact includes phone calls, leaving voice messages and sending e-mails (with limitations), picking up and delivering medications, and/or collateral contact with the enrolled person, family and/or other involved parties.</p> <p>Core Provider Travel Billing Limitations</p> <p>If a behavioral health professional, behavioral health technician or behavioral health paraprofessional travels to provide case management services or provider type 85, 86, 87 or A4 travels to provide services to a client and the client misses the appointment, the intended service may not be billed. Additionally, providers may not bill for travel for missed appointments.</p>
<p>Time spent researching for various cell phone deals and service plans or similar services at the consumer's request</p>	<p>Does the service fit the definition* of case management services? Is the service included or part of the behavioral health recipient's treatment plan and thoroughly documented in the progress notes?</p>
<p><b>Accompanying to, and participating in appointments with the person</b></p>	
<p>Time spent waiting with a consumer for an appointment vs. the time spent waiting for the consumer while the consumer is receiving treatment (i.e., provider, PCP, etc.)</p>	<p>Waiting for a person while he/she receives services does not appear to be a case management service. The following applies when transporting a person to an appointment:</p> <p>Case Management Billing Limitations</p> <p>Transportation provided to an ADHS/DBHS enrolled member is not included in the rate and should be billed separately using the appropriate transportation procedure codes.</p>
<p>Sitting in an appointment with a doctor or provider with the consumer to assist the consumer in advocating for their needs or to assist in coordination of care</p>	<p>Case Management Billing Limitations</p> <p>The provider should bill all time he/she spent in direct or indirect contact with the person, family and/or other parties involved in implementing the treatment/service plan.</p>

\*Description of Behavioral Health Case Management Services:

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## **AHCCCS Behavioral Health Services Guide:**

Behavioral health case management services are supportive services provided to enhance treatment compliance and effectiveness. Case management activities include assistance in accessing, maintaining, monitoring and modifying covered services; assistance in finding resources, communication and coordination of care, outreach and follow-up of crisis contacts or missed appointments.

## **ADHS/DBHS Covered Behavioral Health Services Guide:**

Case management is a supportive service provided to enhance treatment goals and effectiveness. Activities may include:

- Assistance in maintaining, monitoring and modifying covered services;
- Brief telephone or face-to-face interactions with a person, family or other involved party for the purpose of maintaining or enhancing a person's functioning;
- Assistance in finding necessary resources other than covered services to meet basic needs;
- Communication and coordination of care with the person's family, behavioral and general medical and dental health care providers, community resources, and other involved supports including educational, social, judicial, community and other state agencies;
- Coordination of care activities related to continuity of care between levels of care (e.g., inpatient to outpatient care) and across multiple services (e.g., personal assistant, nursing services and family counseling);
- Outreach and follow-up of crisis contracts and missed appointments;
- Participation in staffings, case conferences or other meetings with or without the person or his/her family participating; and
- Other activities as needed.

Case Management **does not** include:

- Administrative functions such as authorization of services and utilization review;
- Other covered services listed in the *ADHS/DBHS Covered Services Guide*