ITEM 14

Community Services Department

600 W. 4th St. Davenport, Iowa 52801



(563) 326-8723 Fax (563 326-8730

May 16, 2011

TO: Dee F. Bruemmer

FROM: Lori A. Elam

RE: Case Management Contract with the Iowa Department of Human Services

Enclosed is the proposed contract for Medicaid Targeted Case Management services to persons with mental retardation and other developmental disabilities with the Iowa Department of Human Services. According to Iowa Code Chapter 225C, each county is required to provide targeted case management services to persons with mental retardation, developmental disabilities and chronic mental illness. Scott County has chosen to subcontract with DHS to provide the case management services.

The contract covers a two-year period, FY2012 and FY2013 (July 1, 2011 - June 30, 2013). This is consistent with the contract which we have with the Vera French Community Mental Health Center for other case management services.

We are projecting that 433 consumers with mental retardation or other developmental disabilities will be served in FY11, 449 in FY12, and 462 in FY13. These increases are due to children entering the adult system world and opening ID Waiver slots that were on the waiting list. The county is responsible for the non-federal share cost of this service. DHS transitioned to 15 minute unit billing instead of monthly billing during FY11due to changes in Federal rules for case management. In FY11, the county portion is \$35.00 per consumer per unit. The change in billing style has not resulted in additional expenditures for the county. DHS also reviews applications from consumers currently not enrolled in Medicaid. They assist the consumers and families in completing the needed applications and related forms.

As was the case with the previous contract, this contract is again proposed for a two-year period. There are no substantive changes in the contract language. Since we have received excellent services and would project no need to change providers, this two-year period is recommended for consideration. I will be available at the Committee of the Whole meeting to provide additional information if needed.

THE COUNTY AUDITOR'S SIGNATURE CERTIFIES THAT THIS RESOLUTION HAS BEEN FORMALLY APPROVED BY THE BOARD OF SUPERVISORS ON ______.

DATE

SCOTT COUNTY AUDITOR

RESOLUTION

SCOTT COUNTY BOARD OF SUPERVISORS

MAY 26, 2011

APPROVAL OF THE CONTRACT FOR MEDICAID CASE MANAGEMENT SERVICES WITH THE IOWA DEPARTMENT OF HUMAN SERVICES AND SCOTT COUNTY

BE IT RESOLVED by the Scott County Board of Supervisors as follows:

- Section 1. That the contract for Medicaid Case Management Services between Scott County and the Iowa Department of Human Services providing for case management services for Medicaid and other eligible persons with mental retardation and developmental disabilities for the period July 1, 2011 through June 30, 2013, is approved.
- Section 2. The Chairman is hereby authorized to sign said agreement.
- Section 3. This resolution shall take effect July 1, 2011.

CONTRACT FOR TARGETED CASE MANAGEMENT SERVICES BETWEEN SCOTT COUNTY AND THE IOWA DEPARTMENT OF HUMAN SERVICES

This contract for the provision of targeted case management services is entered into this 1st day of July, 2011, between Scott County, referred to as "County" and the Targeted Case Management Unit, of the Iowa Department of Human Services, referred to as "TCM Unit".

WHEREAS:

Iowa Code Chapter 225C requires each county of the State of Iowa to provide targeted case management services to persons with mental retardation, developmental disabilities, and chronic mental illness.

441 Iowa Administrative Code Section 24.41 defines a targeted case management provider to mean the Iowa Department of Human Services, a county or a consortium of counties.

The County has available the funding necessary to achieve the goals determined by the County for targeted case management services.

ARTICLE I: SERVICES TO BE PROVIDED

Services t	o Persons Who Are Medicaid Eligible (Check One):		
	The County has determined that the Department of Human Services will be the enrolled provider.		
	The County has been certified by the Division of Mental Health and Disability Services of the Department of Human Services as a provider of targeted case management services and has enrolled with Iowa Medicaid Enterprise to provide targeted case management services and has determined that the TCM Unit should be a sub-contracting service agency to provide services to persons in the designated categories (check one):		
	 ☐ Persons with chronic mental illness ☐ Persons with mental retardation ☐ Persons with developmental disabilities 		
Services to	o Persons Who Are NOT Medicaid Eligible (Check One):		
	The County does NOT authorize the TCM Unit to provide targeted case management services to persons who are not Medicaid eligible.		
	The County authorizes the TCM Unit to accept applications from persons who are not Medicaid eligible and agrees to pay 100% of the costs of targeted case		

management services for persons each month. The TCM Unit will apply eligibility criteria developed by the County.

The County has established a process to review applications from non-Medicaid eligible persons who apply for targeted case management services, and is responsible for 100% of the costs of approved services, including targeted case management services.

Others Services to Be Provided:

- 1. The TCM Unit shall maintain a list of persons referred for targeted case management services. The number of persons on the referral list shall be provided to the County upon request.
- 2. The TCM Unit shall verify the Medicaid eligibility of all persons who apply for services.
- 3. The TCM Unit shall provide targeted case management services to those persons included in the County CPC's plan. The County, as provided by law, assumes no responsibility for targeted case management service costs of the chronically mentally ill consumers covered by the Iowa Plan provider.
- 4. The TCM Unit will notify the County of all proposed amendments to 441 lowa Administrative Code Chapter 24 and will consider the recommendations of the County with respect to those proposed amendments.

ARTICLE II: COST OF TARGETED CASE MANAGEMENT SERVICES

- 1. The TCM Unit will set a projected unit rate for targeted case management services. The County will be billed on a monthly basis for the non-federal share of the cost of targeted case management services provided to adults under the medical assistance program for persons with mental retardation, a developmental disability, or chronic mental illness. At the end of each fiscal year, the County's final cost will be determined on a retrospective settlement of actual allowable costs in accordance with the requirements of Office of Management and Budget Circular A-87.
- 2. The County will be notified of any disallowance.
- 3. The Department is responsible for disallowed costs, and the County shall receive a credit for its share of any overpayment due to disallowed costs, unless the disallowance is attributable to a specific request by the County for a particular service.

ARTICLE III: DURATION

This contract is effective July 1, 2011 through June 30, 2013, inclusive.

ARTICLE IV: TERMINATION

- 1. This contract can be terminated by either party upon ninety (90) days written notice as set for in Iowa Code Section 225C.20.
- 2. The County shall be responsible for ensuring that a new service provider is in place prior to the expiration of the ninety (90) day notice period. The County shall be responsible for payment of the unit rate for services provided by the TCM Unit prior to transfer to the new provider. Upon notice of termination of this contract, the TCM Unit will notify the current consumers that the County has terminated their contract with DHS-TCM and notify the consumer of their right to choose service providers.

ARTICLE V: MONITORING AND EVALUATION

- 1. The TCM Unit shall provide to the County on a monthly basis, and in a format approved by the County, fiscal, utilization, and eligibility information, as requested by the County.
- 2. All information regarding persons receiving targeted case management services is considered confidential and will be used and disseminated only in compliance with state and federal law.

ARTICLE VI: BILLING

The County has selected the TCM Unit as its targeted case manager, and the TCM Unit shall bill the State Medicaid Fiscal Agent, the Iowa Managed Care Plan, or the County for the costs of providing Medicaid targeted case management services, in accordance with 441 Iowa Administrative Code Chapter 80.		
The County is an enrolled targeted case management provider with a subcontract with the TCM Unit and will process claims:		
	The TCM Unit will submit all claims to the State Medicaid Fiscal Agent, or the Iowa Managed Care Provider, under the provider number assigned to the TCM Unit. The TCM Unit will forward all claims to the County, and the County shall be responsible for submitting claims under the provider numbers assigned to the County. The County shall pay the total amount billed by the TCM Unit within two (2) weeks of billing.	

ARTICLE VI: ADMINISTRATION

The County and the TCM Unit will comply with all applicable state and federal laws, rules, regulations and court orders.

There are no third party beneficiaries to this contract.

This contract may not be assigned, transferred or conveyed in whole or in part without the prior written consent of the other party.

This contract may be amended only upon written agreement of both parties.

IN WITNESS WHEREOF, and in consideration of the mutual covenants set forth, the parties execute this contract through their duly authorized agents.

Chair, Scott County Board of Supervisors
(date)
Director or Authorized Designee
Iowa Department of Human Services
(date)
Administrator
Division of MHDS
Iowa Department of Human Services
(date)