

FREQUENTLY ASKED QUESTIONS

Core Practice Model Guide and Medi-Cal Manual for Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS) & Therapeutic Foster Care (TFC) Services

Last Updated: February 26, 2015
Original Publication: August 14, 2014

1. Question: Who can claim for a Child and Family Team (CFT) meeting when multiple providers are participating?

Answer: As specified in the Medi-Cal Manual pages 11-12, and in accordance with, Title 9, California Code of Regulations (CCR), Chapter 11, Section 840.314(c), multiple providers* may claim for their time and participation at the CFT meeting. Participation at the CFT meeting should be claimed as ICC since this is the service that is being provided. Each provider may claim for the time he or she contributed to the meeting, up to the length of the meeting, plus documentation and travel time in accordance with Title 9, CCR, Chapter 11, Section 1840.316(b)(3). Any time claimed, which may include active listening time, must be supported by documentation showing what information was shared and how it can/will be used in providing, planning or coordinating services to the client (i.e. how the information discussed will impact the client plan).

CLARIFICATION: Each participating provider in a CFT meeting may bill for the total number of minutes during which a client (or clients) with whom that provider has a client/provider relationship is discussed. Such a provider may claim for minutes during which one of his/her clients is being discussed up to the length of the meeting, but may NOT claim for minutes during which clients are being discussed with whom he/she has no provider/client relationship. Where multiple providers are participating in a CFT meeting, and each provider's participation is appropriately documented for the amount of time claimed, the total number of all of the providers' minutes may exceed the total length of the meeting.

2. Question: Can ICC and IHBS be provided at the same time by different providers?

Answer: Yes, ICC and IHBS may be claimed for at the same time when provided by different individual qualified providers* to or on behalf of the same client. The following is an example of appropriate claiming during these instances. Example: During a CFT meeting Johnny becomes upset, Johnny and his IHBS provider leave the room and the IHBS provider applies an intervention to calm Johnny. Meanwhile the CFT meeting continues. In this example, the IHBS provider may claim for IHBS services provided to Johnny while, for example, the care coordinator may also

claim to ICC for time at the CFT meeting (which is occurring to discuss/plan the care of Johnny). In this instance, IHBS and ICC would be claimed for at the same time by different qualified individual providers* for the services provided to or on behalf of the same client (Johnny).

Services to or on behalf of the client provided at the same time must be appropriately documented. Documentation must clearly support the service to be claimed. In the above example, the IHBS individual provider must clearly document the time claimed as ICC (while at the CFT meeting, see the response to question 1 for more information) and the time claimed as IHBS (when applying the intervention). In addition, as required by Title 9, California Code of Regulations (CCR), Section 1840.314(c), when services are being provided to or on behalf of a client by two or more individual providers* at one point in time, each provider's involvement shall be documented in the context of the mental health needs of the client.

3. Question: Can you claim for ICC and TBS at the same time?

Answer: Yes, ICC and TBS may be claimed for at the same time when provided by different individual qualified providers* to or on behalf of the same client. The following is an example of appropriate claiming during these instances. Example: During a CFT meeting Johnny becomes upset, Johnny and his TBS provider leave the room and the TBS provider applies an intervention to calm Johnny. Meanwhile the CFT meeting continues. In this example, the TBS provider may claim for TBS services provided to Johnny while, for example, the care coordinator may also claim to ICC for time at the CFT meeting (which is occurring to discuss/plan the care of Johnny). In this instance, TBS and ICC would be claimed for at the same time by different qualified individual providers* for the services provided to or on behalf of the same client (Johnny).

Services to or on behalf of the client provided at the same time must be appropriately documented. Documentation must support the service to be claimed. In the above example, the TBS individual provider must document the time claimed as ICC (while at the CFT meeting, see the response to question 1 for more information) and the time claimed as TBS (when applying the intervention). In addition, as required by Title 9, California Code of Regulations (CCR), Section 1840.314(c), when services are being provided to or on behalf of a client by two or more individual providers* at one point in time, each provider's involvement shall be documented in the context of the mental health needs of the client.

4. Question: Can you claim for services (i.e. ICC and IHBS) provided at the same time by the same provider to or on behalf of the same client?

Answer: No, services (i.e. ICC and IHBS) provided at the same time by the same individual qualified provider* to or on behalf of the same client are not reimbursable as a single provider* cannot be performing more than one distinct service at the same time. Please see the responses to Questions 2 and 3 for

examples of services that may be claimed at the same time when provided by different individual qualified providers* to or on behalf of the same client.

5. Question: For a Katie A. subclass member that is already receiving Specialty Mental Health Services, is the existing client plan grandfathered in, or do you need to develop a new client plan?

Answer: As with any other Specialty Mental Health Service, a client plan is required. An existing client plan may be updated to include the need for ICC and/or IHBS consistent with the requirements as specified in the State Plan and in the contract between the Mental Health Plan and the Department of Health Care Services including but not limited to documentation of the beneficiary's or legal guardian's participation in, and agreement with, the updated client plan. In these instances a new client plan would not be required. The ICC coordinator is responsible for working within the CFT to ensure that plans from any of the system partners (child welfare, education, juvenile probation, etc.) are coordinated to comprehensively address the identified goals and objectives and that the activities of all parties involved with services to the child/youth and/or family to support and ensure successful and enduring change.

* Please note that the term "provider(s)" in the context of these response refers to the individuals that are providing the services and not to the agency/organization that employs individual providers.