



## **Division Guideline #24**

**Date:**                    **Created July 26, 2012**  
                                 **Reviewed August 27, 2013**  
                                 **Reviewed 8-27-14**

**Title:**                    **TCM-Transfer of Case Responsibility**

**Application:**        **DD TCM Providers**

For an individual served through Division of DD transferring from one Division of DD TCM entity to another, there are instances where two support coordinators representing a County Board, other not-for-profit provider, or Regional Office will perform TCM activities in order to achieve a smooth, successful case transfer. That is, there are legitimate billable TCM activities associated with case transfer for both agencies involved. For example, transfers of files may be necessary or making contact with providers to acquaint them with the change.

The TCM Technical Assistance Manual located on the DD internet site under “Information for Support Coordinators” provides further explanation regarding case transfer for Division of DD TCM. For TCM activities involving support coordinators from the sending and receiving entities, the following conditions shall apply to billable services:

- During the period of case transfer, there may be billable activities from each TCM entity that are viewed as independent, and both entities may log TCM for the time completing these activities. In these instances, close communication between these support coordinators is essential to ensure TCM activities that will be billed by both entities are independent and not duplicative in any way. This distinction must be documented in each logging case note. For example, the sending TCM support coordinator may engage in activities specific to transferring the case to the receiving TCM entity (closing the case). The receiving TCM support coordinator may be completing activities to become more familiar with the individual and the services the person receives (opening the case). Under these circumstances, both TCM providers would need to log using different billable TCM codes.
- When TCM activities of the support coordinator from one agency cannot be distinct or independent from that of the support coordinator from the other agency, only one support coordinator may log billable TCM for the activities. This requires close communication between the two support coordinators as to who will log billable TCM and the other non-billable. For example, if both

Division of DD support coordinators from the sending and receiving TCM entities attend the same planning meeting and serve the same function in support of the individual, only one support coordinator can log billable TCM and the other would log using a non-billable TCM code.

- It is expected that the transfer of case responsibility should be completed within approximately 30 days.
- Documentation: Enter a case note. Each case note entry must describe/justify the need for the dual support coordinator responsibility. Further, as applicable for both support coordinators submitting billable logging, explain the difference in TCM service provided and that it is not a duplication of service.

#### Logging and Service Claims

There are two HCPCS codes in the Medicaid Information System (EMMIS) applicable to Division of DD TCM claims:

- G9012HI (Other Specified Case Management-5 minute unit)
- G9012TSHI (Other Specified Case Management-Case Transfer Follow up Services-5 minute unit)

#### Transfers When One TCM Entity Uses CIMOR for Logging and the Other Does Not

Regional Offices, some County Boards, and other Not-for-Profit TCM agencies use CIMOR for logging. For TCM entities that utilize the CIMOR system for case management logging, the support coordinator should use logging code 000040 when completing applicable billable TCM activities associated with transferring an individual's case to a TCM entity that does not utilize CIMOR for logging. This applies no matter which way the transfer goes; until the transfer is complete. Logging the 000040 code in CIMOR (which maps to G9012TSHI for claims to MO HealthNet) will generate a bill which will keep the other TCM entity's billing from failing as a duplicate service.

#### Transfers When Both TCM Entities Use CIMOR for Logging

If both sending and receiving TCM agencies use CIMOR for logging applicable billable TCM associated with transfer of case responsibility, the support coordinators from both agencies will need to communicate to determine who will log billable case management using the 000040 code in CIMOR, while the other support coordinator would use another billable TCM code in CIMOR, to prevent TCM claims failing as a duplicate service.

#### Transfers When Neither TCM Entity Uses CIMOR for Logging

For case transfer among County Board TCM entities that use a different system other than CIMOR for TCM logging and submitting TCM billing claims to MO HealthNet, the support coordinators from both agencies will need to communicate to determine who will log billable case management using the G9012TSHI code, while the other support coordinator would use another billable TCM code, to prevent claims failing as a duplicate service.

For more information on TCM Transfer of Case Responsibility please refer to the Missouri Division of Developmental Disabilities Targeted Case Management for Individuals with Developmental Disabilities Technical Assistance Manual for Regional Offices, County Senate Bill 40 Boards, and Other Not-for-Profit Agencies. This manual can be accessed on the DMH Division of DD Internet website, under Information for Support Coordinators.

<http://dmh.mo.gov/docs/dd/TCMTAManual.pdf>

*This guideline will be reviewed and updated annually, if needed.*