



STATE OF MISSOURI  
DEPARTMENT OF MENTAL HEALTH

1706 EAST ELM STREET  
P.O. BOX 687  
JEFFERSON CITY, MISSOURI 65102  
(573) 751-4122  
(573) 751-8224 FAX  
[www.dmh.mo.gov](http://www.dmh.mo.gov)

OFFICIAL MEMORANDUM

TO: CMHC Clinical Directors and HCH Directors

FROM: Natalie Fornelli, Compliance and Systems Management Coordinator

DATE: August 26, 2013

SUBJECT: Billing Policies for Nurse Care Managers

A handwritten signature in blue ink, appearing to be "N. Fornelli".

This memo is to clarify billing limitations associated with services provided by Nurse Care Managers (NCM). In general terms, please recall that the Department of Mental Health assured the Centers for Medicaid and Medicare (CMS) that providers would not bill Medicaid for services provided by staff already paid through the per member, per month payment (PMPM), including services in the community psychiatric rehabilitation (CPR) option or any other Medicaid programs.

This limitation includes the following examples:

- When a full-time NCM is delivering an educational service in the PSR program, regardless of whether they are the sole presenter or a co-presenter, the provider may not bill that PSR service because that would partially reimburse the provider for the NCM's cost, which has already been paid for by Medicaid in the HCH PMPM.
- Providers are encouraged to utilize NCMs to help develop educational groups to teach persons how to manage their chronic illnesses and encourage healthy lifestyles. These groups could be offered as a stand-alone intervention delivered by the NCM, or groups could be delivered as a CPR PSR service. When such group services are delivered in the context of the CPR PSR program, the **only** time the agency would be able to bill the time as a CPR PSR service is if *a staff person other than the HCH NCM is the sole presenter/facilitator of the group intervention*. If the NCM is the presenter/facilitator, this may not be billed under CPR/PSR.

When a NCM is not considered “full time,” the following guidance was offered in the memo entitled, “Documentation of HCH Services and Functions” (February 2, 2012):

- As a general reminder, providers may not bill DMH or MO HealthNet (Medicaid) for individualized client services provided by HCH staff (HCH Director, Nurse Care Managers, and Primary Care Physician Consultants). The cost of those staff are covered in the Healthcare Home PMPM (per member per month) payments.
- Please note that some HCH staff work part-time as a member of the HCH team, and when those persons are not working as part of the HCH team, the provider may bill DMH or MO HealthNet (Medicaid) as appropriate for individualized services they provide.

Moving forward, **providers must designate a NCM as full-time or part time within the HCH.** Full-time NCMs (regardless of their exact caseload size and how far that is under 250) cannot bill for any services. Part-time NCMs who provide non-HCH services must have these non-HCH duties specifically documented in their job description and their time logged accordingly on the team log in the HCH Monthly Implementation Report.

Thank you for your attention to this memorandum. Any questions related to these policy directives should be submitted to [Natalie.Fornelli@dmh.mo.gov](mailto:Natalie.Fornelli@dmh.mo.gov).

ec: Nora Bock, Director of Community Treatment  
Laurie Epple, Director of Administration  
Tara Crawford, Healthcare Home Director Liaison  
Susan Blume, Manager of Service Implementation and Evaluation  
Connie Cahalan, Children’s Director  
Regional Executive Officers  
Chiefs of Adult Community Operations  
Chiefs of Children’s Community Operations