

**COUNTY OF MILWAUKEE**  
**Behavioral Health Division Administration**  
**Inter-Office Communication**

**DATE:** March 25, 2013

**TO:** Supervisor Peggy Romo-West, Chairwoman – Health & Human Needs Committee

**FROM:** Héctor Colón, Director, Department of Health and Human Services  
*Prepared by Paula Lucey, Administrator, Behavioral Health Division*

**SUBJECT: From the Director, Department of Health and Human Services, submitting an Informational Report on the Community Recovery Services (CRS) 1915(i) State Plan Home and Community Based Services Medicaid Benefit**

**Issue**

In July 2012, the Health and Human Needs Committee (HHN) and the Milwaukee County Board of Supervisors approved adding Milwaukee County to the state plan amendment (SPA) for the 1937 Medicaid Benchmark Plan for CRS (File Number 12-575). Since that time, the Behavioral Health Division (BHD) has been in close contact with the State regarding the progress of the SPA.

Although the SPA has still not been approved by the Centers for Medicaid and Medicare Services (CMS), Milwaukee County is approved to offer CRS under the already approved 1915(i) Medicaid benefit.

In this report, the Behavioral Health Division (BHD) provides additional information requested by the Health and Human Needs Committee on the statewide operation of CRS since its inception.

**Discussion**

Community Recovery Services (CRS) is a Medicaid psychosocial rehabilitation benefit for persons with a severe and persistent mental illness, mood disorder, or other psychotic disorder. It is a voluntary benefit meaning an individual willingly participates in CRS. The individual also must be at or below 150% of the federal poverty level (FPL) and at a specific functioning level. CRS reimburses the following three core services:

- Community Living Support Services – assists individuals in transitioning from a supervised living situation to their own home
- Supported Employment Services – assists individuals with managing symptoms and behaviors to acquire and maintain competitive employment (must use the evidence-based IPS “Individual Placement and Support” model)

- Use of Peers as Providers – utilizes recovery-based experiences of certified peer specialists to assist others to move towards recovery

CRS allows for co-participation in other psychosocial rehabilitation benefits and services such as co-participation with Community Support Program (CSP), Comprehensive Community Services (CCS), and Targeted Case Management (TCM) services. An eligible individual can also self-identify and direct his or her own participation in CRS. An example of this may be an individual that is residing in a community-based residential facility (CBRF) that is not receiving services in CSP or TCM yet but wants to participate in CRS. Psychosocial rehabilitation benefits are entitlements and are a carve-out benefit from the beneficiary's Medicaid HMO. These benefits are county administered and require a 60% federal/40% local (public funds such as state revenues or tax levy) cost sharing. Psychosocial rehabilitation benefits such as CSP, CCS, and CRS are designed to allow an individual to reach his or her maximum recovery potential within their community.

The ongoing care coordination responsibilities for CRS are as follows:

- Needs-based evaluation and re-evaluation utilizing a person-centered approach
- Face-to-face assessment of an individual's support needs and capabilities
- Development of an individualized plan of care
- Supporting the participant in the plan of care development
- Assisting participants such that they have an informed choice of providers
- Assuming primary responsibility for monitoring and acting upon incident reports
- Supporting the consumer on an ongoing basis in their plan of care

#### Statewide Implementation

Statewide, there are 16 counties and 17 service delivery areas offering CRS. As counties began to offer CRS, the first service that was made available to eligible individuals was the Community Living Support Services (CLSS) for residents of CBRFs or Adult Family Homes. This allowed counties the ability to generate some savings for the cost of residential services and therefore created the ability for the reinvestment into other CRS services. Current data (see Attachment) received from the state Division of Mental Health and Substance Abuse Services (DMHSAS) suggests that all 16 counties offer CLSS; three offer the services of a certified peer specialist; and six offer the IPS supported employment service.

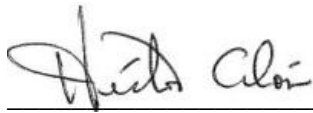
Since CRS's inception, 267 individuals have been served statewide with 210 current participants. All counties that administer entitlement programs worry about the increase of clients requesting entitlement services. As CRS has been operational statewide for over two years, there are no participating counties that have reported an expanded Medicaid population due to their implementation of CRS or an influx of clients. In addition, clients moving into CRS counties from neighboring counties that do not offer CRS have not been the operational reality.

Additional information specifically focused on the financial components of CRS and BHD's programmatic preparation for CRS will be presented at the May 2013 HHN Committee meeting for further action if warranted.

**Recommendation**

This is an informational report. No action is necessary.

Respectfully Submitted,

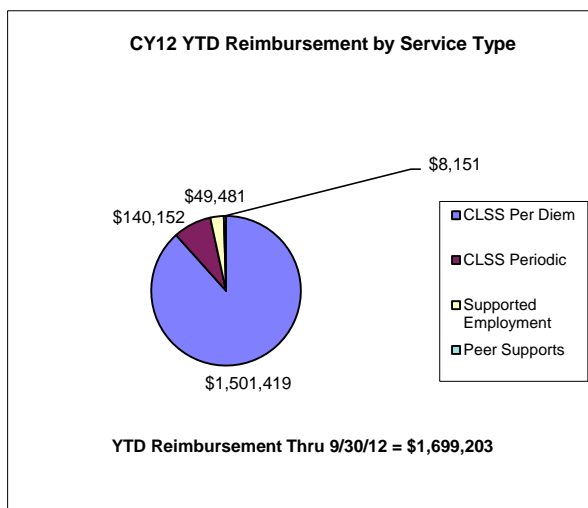
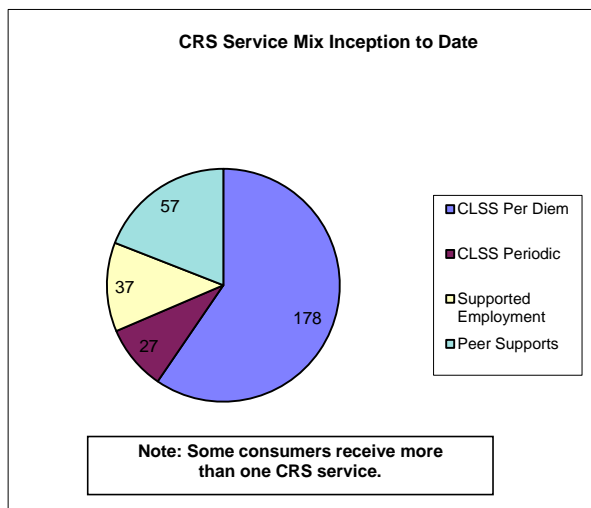
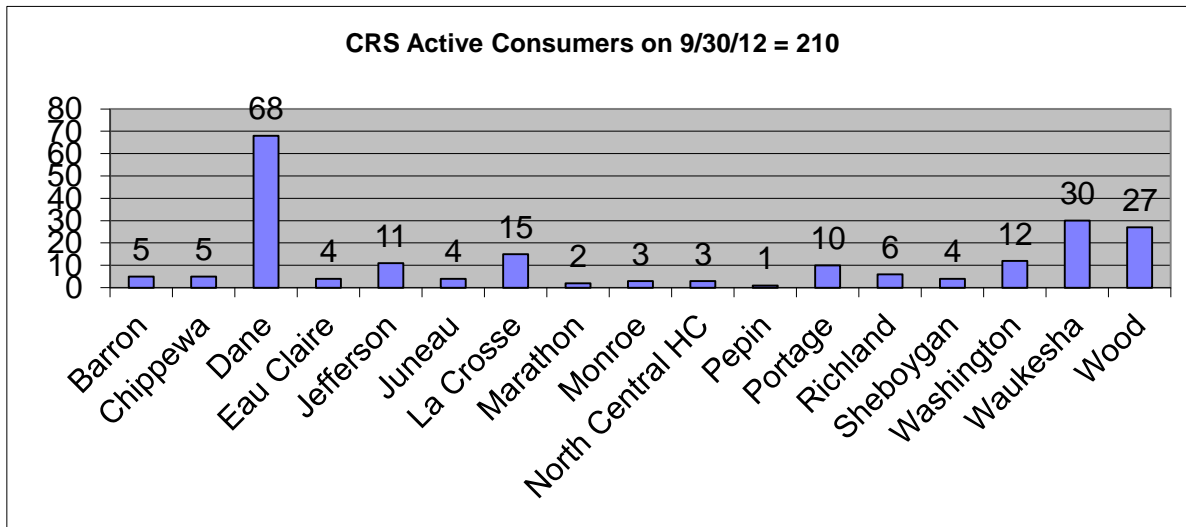
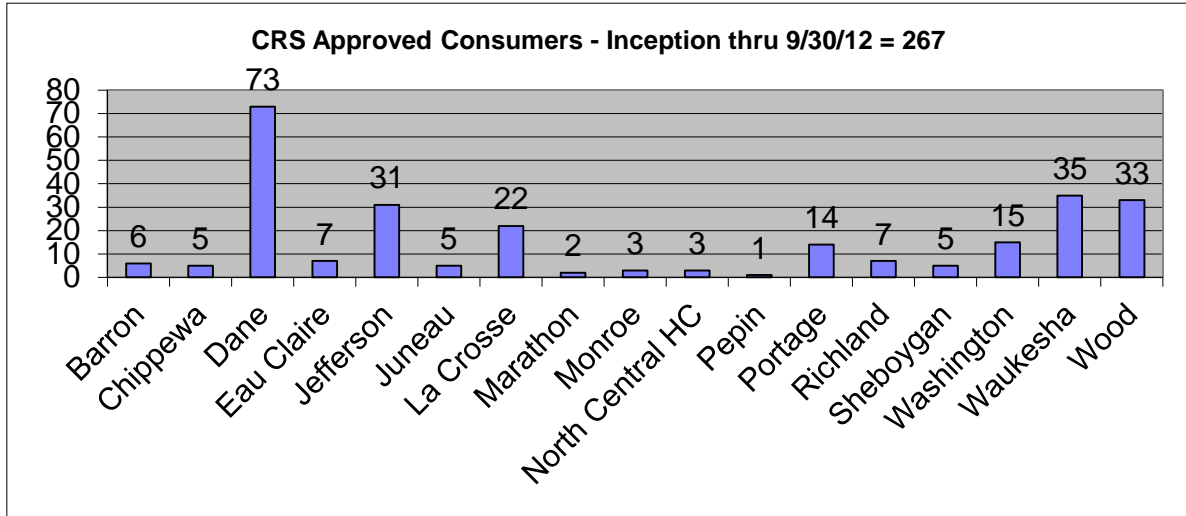


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Héctor Colón, Director  
Department of Health and Human Services

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County Self-Identified
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<u>Original CRS Counties</u>	<b>Projected Consumers in County</b>	<b>Approved Consumers to Date</b>	<b>DMHSAS Certified</b>	<b>Submitting Service Plans</b>
1 Adams	15			
2 Barron	30	6	√	X
3 Buffalo	20		√	
4 Chippewa	10	5	√	X
5 Clark	4			
6 Dane	125	73	√	X
7 Dodge	5		√	
8 Dunn	10			
9 Eau Claire	275	7	√	X
10 Forest/Oneida/Vilas	30			
11 Green	3			
12 Green Lake	5		√	
13 Iron	10			
14 Jackson	5			
15 Jefferson	60	31	√	X
16 Juneau	6	5	√	X
17 Kenosha	25			
18 LaCrosse	50	22	√	X
19 Langlade/Lincoln/Marathon	100	5	√	X
20 Milwaukee	914		√	
21 Monroe	8	3	√	X
22 Ozaukee	8		√	
23 Pepin	5	1	√	X
24 Pierce	20			
25 Portage	18	14	√	X
26 Richland	4	7	√	X
27 Rock	25			
28 Sheboygan	35	5	√	X
29 St. Croix	30			
30 Trempealeau	12			
31 Vernon	4			
32 Washington	15	15	√	X
33 Waukesha	45	35	√	X
34 Wood	<u>30</u>	<u>33</u>	<u>√</u>	<u>X</u>
<b>Total</b>	<b>1961</b>	<b>267</b>	<b>23</b>	<b>18</b>

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**2012 YTD Medicaid Payments to Counties**

County	Gross Billing	Net Payments	Est. State Skim
Barron	\$ 235,744	\$ 82,236	\$ 4,111.80
Chippewa	\$ 107,318	\$ 32,143	\$ 1,607.15
Dane	\$ 686,903	\$ 187,941	\$ 9,397.05
Eau Claire	\$ 154,599	\$ 74,246	\$ 3,712.30
Jefferson	\$ 88,205	\$ 29,487	\$ 1,474.35
Juneau	\$ 42,255	\$ 24,830	\$ 1,241.50
La Crosse	\$ 374,476	\$ 168,925	\$ 8,446.25
Monroe	\$ 53,797	\$ 19,552	\$ 977.60
North Central HC (Marathon)	\$ 109,130	\$ 49,880	\$ 2,494.00
Pepin	\$ 65,502	\$ 21,923	\$ 1,096.15
Portage	\$ 212,551	\$ 102,161	\$ 5,108.05
Richland	\$ 143,756	\$ 68,132	\$ 3,406.60
Sheboygan	\$ 41,090	\$ 13,154	\$ 657.70
Washington	\$ 339,978	\$ 178,103	\$ 8,905.15
Waukesha	\$ 1,539,377	\$ 486,644	\$ 24,332.20
Wood	\$ 284,731	\$ 159,846	\$ 7,992.30
<b>Totals</b>	<b>\$ 4,479,412</b>	<b>\$ 1,699,203</b>	<b>\$ 84,960.15</b>

**2012 YTD Medicaid Payments to Counties by Service Type**

County	CLSS Per Diem	CLSS Hourly	Peer Supports	Supported Employment	Totals
Barron	\$ 82,236	\$ -	\$ -	\$ -	\$ 82,236
Chippewa	\$ 26,427	\$ -	\$ 950	\$ 4,766	\$ 32,143
Dane	\$ 145,628	\$ -	\$ 6,802	\$ 35,511	\$ 187,941
Eau Claire	\$ 74,246	\$ -	\$ -	\$ -	\$ 74,246
Jefferson	\$ 18,008	\$ 8,783	\$ 399	\$ 2,297	\$ 29,487
Juneau	\$ 24,298	\$ 532	\$ -	\$ -	\$ 24,830
La Crosse	\$ 167,627	\$ 1,298	\$ -	\$ -	\$ 168,925
Monroe	\$ 19,552	\$ -	\$ -	\$ -	\$ 19,552
North Central HC (Marathon)	\$ 49,880	\$ -	\$ -	\$ -	\$ 49,880
Pepin	\$ 21,923	\$ -	\$ -	\$ -	\$ 21,923
Portage	\$ 98,504	\$ 3,657	\$ -	\$ -	\$ 102,161
Richland	\$ 65,938	\$ 2,194	\$ -	\$ -	\$ 68,132
Sheboygan	\$ 13,154	\$ -	\$ -	\$ -	\$ 13,154
Washington	\$ 95,672	\$ 82,431	\$ -	\$ -	\$ 178,103
Waukesha	\$ 456,866	\$ 27,336	\$ -	\$ 2,442	\$ 486,644
Wood	\$ 141,460	\$ 13,921	\$ -	\$ 4,465	\$ 159,846
<b>Totals</b>	<b>\$ 1,501,419</b>	<b>\$ 140,152</b>	<b>\$ 8,151</b>	<b>\$ 49,481</b>	<b>\$ 1,699,203</b>

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**Average Cost for Services by County**

County	CLSS Per Diem	CLSS Hourly	Peer Supports	Supported Employment
Barron	\$ 180.78	\$ -	\$ -	\$ -
Chippewa	\$ 145.35	\$ -	\$ 40.00	\$ 46.04
Dane	\$ 80.42	\$ -	\$ 42.80	\$ 82.83
Eau Claire	\$ 142.14	\$ -	\$ -	\$ -
Jefferson	\$ 112.08	\$ 29.46	\$ 51.44	\$ 72.97
Juneau	\$ 61.04	\$ 40.80	\$ -	\$ -
La Crosse	\$ 91.17	\$ -	\$ -	\$ -
Monroe	\$ 148.02	\$ -	\$ -	\$ -
North Central HC	\$ 119.37	\$ 18.25	\$ -	\$ 146.00
Pepin	\$ 212.35	\$ -	\$ -	\$ -
Portage	\$ 94.02	\$ 22.00	\$ -	\$ -
Richland	\$ 117.57	\$ 22.50	\$ -	\$ -
Sheboygan	\$ 144.32	\$ -	\$ -	\$ -
Washington	\$ 105.48	\$ 26.90	\$ -	\$ -
Waukesha	\$ 147.11	\$ 26.04	\$ 16.25	\$ 73.55
Wood	\$ 80.83	\$ 28.36	\$ 16.00	\$ 31.52
Average County Cost for Service	\$ 109.86	\$ 30.02	\$ 36.29	\$ 121.50
Medicaid Fee Schedule	\$ 125.00	\$ 20.00	\$ 46.04	\$ 39.12
Difference Between Avg and MFS	\$ 15.14	\$ (10.02)	\$ 9.75	\$ (82.38)