

CHCPE Tiered Case Management Rates, Criteria, Processes, & Methodology

2015

Level 1

Frequency:	Quarterly contact with annual reassessment
Criteria:	3 or less Care Management interventions in a 6 month period; if 2 of those interventions are crisis interventions, client is automatically elevated to Level 2.
Rate:	\$4.40
Methodology:	Rate is 7.37% less than the Level 2 rate based upon the frequency of contact with the client. Access Agencies spend less than 30% of their time working with clients that fall into this level.

Level 2

Frequency:	Monthly monitoring, six month field visit, annual reassessment
Criteria:	4-6 Care Management interventions in a 6 month period
Rate:	\$4.75
Methodology:	Rate is cost based determined by the budgets submitted by each Access Agency in response to a previous RFP. The maximum allowable rate for the per diem care management service was lowered as a result of the unbundling and reassigning of the fiscal intermediary functions to a currently contracted fiscal intermediary. The rates for assessments, status reviews and annual reassessments were also based on costs and budgets in the RFP. Based on requirements of each service, status reviews are billed at one third the cost of the assessment and the annual reassessment is seventy five percent of the cost of a full assessment. Access Agencies spend between 50% and 70% of their time in working with clients that fall into this level.

Level 3

Frequency:	Monthly monitoring, quarterly field visits, six month assessment and annual reassessment
Criteria:	6+ Care Management interventions in a 6 month period
Rate:	\$4.95
Methodology:	Rate is 4.21% more than the Level 2 rate based upon the frequency of contact with the client. Access Agencies spend 30% of their time in working with clients that fall into this level.