



COBRA Community Follow Up Program

T.A.G. Meeting Summary

Wednesday August 16, 2007

Announcements

Co-chairs Anita Septimus and Howard Schwartz welcomed participants, led introductions, and made the following announcements:

- **Co-enrollment of New COBRA Clients in an AIDS Day Health Care Program (ADHC) is Limited to 60 Days as of September 1, 2007**

Howard Schwartz reminded the group that as of September 1, new clients may not be dually enrolled in COBRA and an ADHC, unless their situation meets specific criteria outlined in the new Technical Assistance Bulletin II-B 2007 (view at cobracm.org under "Resources"). As of September 1, co-enrollment is limited to 60 days only.

Judith Mazza clarified that the September 1 start date is for new clients only. The AIDS Institute expectation has been that COBRA programs have already identified current clients who are dually enrolled, reviewed their cases, conferenced as needed with the client and ADHC to determine which

program best serves the client's needs, and dis-enrolled the client accordingly from one of the programs. Current clients dually enrolled prior to September 1 should have been dis-enrolled in either COBRA or ADHC by September 1.

As of September 1, agencies with COBRA clients enrolled in their CFP and an ADHC beyond 60 days may be subject to voiding claims.

- **COBRA Transfer Policy**

Marcy Thompson (ASC-NYC) announced a concern that a staff person at MAP has suggested to NYC COBRA providers that they send MAP incomplete transfer forms rather than first completing a CMCM Restriction Code Request form and Release form.

COBRA programs were reminded that this shortcut is not the protocol for completing transfers (see Technical Assistance Bulletin 3B-2004 for policy on transfers). When a swipe of a client's Medicaid card produces a Code 35, providers are to determine from MAP which program a client is enrolled in, confer

with the client, and then contact the other CMCM program to agree on a transfer date. Then a transfer form is submitted to MAP.

Providers having difficulty getting MAP to identify a code 35 provider may email BCSS staff for assistance. In NYC write Doug Sanders at dls17@health.state.ny.us or Elijah Scott, Jr. at exs10@health.state.ny.us. In Albany contact John Godfrey, jhg02@health.state.ny.us or Janet Barber, jeg06@health.state.ny.us. Please also cc Judith Mazza, jam10@health.state.ny.us

If each COBRA program disenrolls a client from MAP immediately after case closing, there will be far fewer situations requiring the transfer process.

- **Minority AIDS Initiative (MAI) Funding Reductions for NYC**

Howard Schwartz announced that reductions in Ryan White case management funding through MAI may have an impact on increasing demand for COBRA case management.

Training Opportunities

Cornell Wrisby, of Cicatelli Associates, demonstrated a new online class based on the one day face-to-face training “**Improving Documentation Skills.**” The class is intended for new case management staff or as reinforcement for staff who’ve taken the in-person course. A goal of the course is to help staff apply class learning to on-the-job situations. The class is appropriate for CMs, CMT’s, CFWs and, in particular, supervisors who want to brush up on training and reinforce staff learning.

This course is not available yet, but is expected to be up online sometime in late September. The AI will send an email out to program directors with the web site address when the course is operational.

Deb Brown, of Center for Public Health Education at SUNY Stonybrook, announced their new 11/2 day face-to-face **Advanced Service Plan Training.** The curriculum for this course takes a harm reduction/client readiness approach, and incorporates lots of practice writing goals and objectives for clients in a variety of circumstances (i.e. clients who’ve “graduated”; clients where no previous service plan has worked, etc.). The course is being held throughout the fall. A special session for supervisors and directors only will be held in NYC on December 13 and

14. Dates of all classes and registration information can be found at:

<http://www.stonybrook.edu/ephe>

Update on IPRO Utilization Review

IPRO has been informing COBRA providers of the results of their utilization reviews by mail. Several providers had 0 claims denied by IPRO. Providers who have had some claims denied will receive from IPRO a list of clients, claim dates, and the reasons for denial for each claim. Each provider has 45 days to review and appeal an IPRO denial if they feel they have grounds.

Best Practices: Efficient and Effective COBRA Billing Systems

TAG invited the billing staff from two COBRA agencies **Ana Resto and Marcia Young**, both of **Argus Community, Incorporated**, and **Sandra Thomas**, of **Community Health Action of Staten Island** to describe the practices they have established that help ensure a well run billing system.

Marcia and Ana described the well organized, tightly-run system they maintain at Argus Community for handling all the billing of the 18 teams located there. Marcia distributed a packet given to CMs and CMTs which clearly outlines program expectations regarding a set weekly billing turn-in time

(Friday 4:30 or Monday 10:00) and procedures to follow in the rare instance billing will be late. Specific forms are included in the orientation packet that must be submitted to the billing department, including a CM/CMT Client Contact Log and progress notes/home visit forms marked up showing key sections billing staff need completed. Billable staff must check their mailboxes daily for Marcia’s Contact Error Log, which itemizes billing errors to be corrected and returned by a set due date (Thursday 11:00).

Marcia also regularly reviews the “Encounters/Services Billing Report” in URS to detect any potential errors in recording time (i.e. unusually long encounters, overlaps in time), and the “Activities and Services Report” to review the billing of individual staff having problems with billing errors. Incoming remittances are also checked against claims, and Ana maintains a form tracking the status of pending and denied claims week by week.

Sandra Thomas has been handling the COBRA billing affairs of Community Health Action of Staten Island for 11 years! The agency currently has 6 teams, and as the first Billing Coordinator devoted to the program, she set up and now maintains their billing system. In her talk, she emphasized the following as key to her success in maintaining a

system that maximizes accuracy and minimizes pending and denied claims:

- **Regular communication between COBRA Director and Billing Coordinator.** It is essential for program administration to understand the impact of pending and denied claims on revenue, to be aware of the status of claims, and to provide support for rectifying denials.
- **Medicaid Eligibility Status Verification Software.** Sandra checks Medicaid eligibility of all clients routinely, in a number of different ways. For example, every morning she does a batched eligibility query. Each morning she emails a memo to all COBRA CM staff listing names of MA ineligible clients and any clients with unresolved MAP enrollments for follow-up by the teams. She keeps an updated list of all client CINs and sequence numbers, and at least once a week checks each client's eligibility individually with ePaces.
- **Billing Coordinator has combined functions.** Sandra handles all MAP enrollment issues and COBRA billing data entry (including URS intakes) as well as Medicaid eligibility

checks and the actual billing and remittance tracking. She feels combining these functions in as few staff as possible helps keep billing accurate and efficient, especially in a moderately sized program such as CHASI. CHASI does utilize CFW's to ensure progress notes match entries on CM/CMT Billing Activities Sheets.

- **Track remittances and utilize URS reports to check billing.** As with Argus, Sandra at CHASI uses the "Claims Detail Report" and "COBRA Services Billing Report" to check billing. She enters remittance receipts into URS and uses "URS Claims Maintenance" to enter pending and denied claims, and "URS Mark Claim Results" to mark paid claims. She uses her own tracking grid in Word to record when claims are submitted and the corresponding remittances received.

Samples of forms discussed by the speakers are available by contacting Lisa Tackley at llt02@health.state.ny.us

Next NYC COBRA TAG Meeting

October 17, 2007
10:00 am-1:00 pm
90 Church Street NYC
Rooms 4A & 4B