

DSS ADMINISTRATIVE LETTER NO. Fiscal 5-95

TO: County Director of Social Services

SUBJECT: Reimbursement Reporting Procedures for Adult Care Home Case Management (previously called *Domiciliary Care Case Management*)

DATE: September 26, 1995

The General Assembly has authorized the use of Medicaid funding for Case Management for selected SNMedicaid-eligible residents of domiciliary homes. This program will be called *Adult Care Home Case Management* and is funded (direct workers and overhead) with 50% Federal (Medicaid), 25% State and 25% Local money. Funding authorizations will be provided for your share of State funds.

The Services Information Systems (SIS) Users Manual Update (No. 4-95) provides a new program code "2" with the SIS code "396". The following reimbursement reporting procedures are effective with September 1995 services reported October 1995.

Part I (Salary & Fringe Benefits):

Function Code 09 *Column 09* Time in this column should equal 100%.

Part II (Administrative Expenditures):

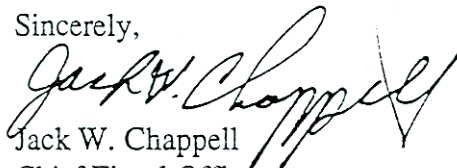
Counties who direct charge their administrative expenditures may use code "211" with a description of "Adult Care Home Case Management". Counties who cost pool (*allocate*) their administrative expenditures must use code "349" General Services Support.

Part IV (Purchase Services):

Counties purchasing client services will report Adult Care Home Case Management on the Part IV by client. The Fund 1D code to be reported in Column 19 should be "2" (and should be used with the Service Code 396). A DSS-1571 Part III must accompany the DSS-1571 Part IV if a county enters a total cost contract for these services.

If you have any questions concerning these fiscal instructions, please contact the County Administration Accounting Branch at (919) 733-2306.

Sincerely,



Jack W. Chappell
Chief Fiscal Officer

JWC:tp

C: *DSS-1571* Preparers