



## **Case Notes Procedures**

**A billable unit consists of a minimum of 8 minutes. Billable minutes entered into Therap as of April 2017 will be combined throughout the day for each participant and will no longer be required to be consecutive. Therefore, any billable activity should be entered as billable in Therap, even if the activity was less than 8 minutes. Billable minutes should still be entered as separate case notes if they are not consecutive. Therap will combine all billable minutes for a participant for the day to determine the total billable units and apply the half up rounding algorithm for the total minutes per day (for example: a total of 53 minutes per day would equal 4 units). Non-billable units must also be entered into Therap along with a case note.**

The rate for CTS and HCBS waiver participants is established anticipating each case manager will support on average of 34 participants with an average of 13 billable units per individual, per month. DHS will monitor the usage of units through the Therap case management system.

When entering a case note, the type of service must be selected prior to entering the note. The options are listed below and include examples of the types of activities that would fall under each service. These examples are not intended to be an all-inclusive listing.

### **Assessment**

- Completion of personal outcome measures, ICAP, or any other assessment actually completed by the case manager
- Review of assessments completed outside of preparation of annual ISP meeting. This could include review of assessments throughout the year that do not result in changes to a person's ISP

### **CIR Reporting and Follow Up**

- Meetings, phone calls and e-mails concerning a CIR or follow up to a CIR

### **Collateral Contacts**

- Contact with any person or other source of information regarding the participant such as doctors, other specialists and community support providers

### **Contact with Guardian, Family**

- Phone calls, e-mails or any other type of contact made with a family member or guardian regarding the participant

### **Contact with Participant**

- Phone calls, e-mails or any other type of contact made with the participant

### **Coordination of Natural Supports**

- Phone calls, e-mails or any other type of contact made with family members, friends, neighbors, co-workers etc. to assist the person to participate in activities without paid support and/or to enhance natural supports role in advocacy

### **Crisis Intervention**

- Any activity revolved around crisis intervention for the participant

### **ISP Development**

- Annual completion and review of assessments of individual needs to develop, revise and update the ISP
- Establishment of needs and goals for an individual which could include team meetings and phone calls associated with developing the ISP
- Facilitation and writing of the ISP
- Meetings, phone calls or e-mails related to the development or revision of the ISP

### **Quarterly Monitoring**

- Any activity that involves monitoring of the participant's services, health and welfare

### **Referral and Related Activities to Other Resources**

- Assistance in gaining access to CTS, HCBS and Medicaid State Plan services, educational, employment, social, medical, individual budget, protection and advocacy and other services
- Assistance in transitioning from one HCBS provider to another, from CTS to HCBS or from HCBS to CTS

### **Service Observation**

- Face to face Observation of services and support, could include conversation with support staff

### **Team Meeting**

- General team meetings not related to ISP development, crisis intervention or CIRs

### **Training Provided to Participant**

- Participant specific training, such as ANE, grievance and rights

### **Non-Billable**

- Any non-billable service

### **Non-Billable Services**

- Travel
- Time spent with the participant or guardian for social reasons
- Non-participant specific general filing, meetings, conference calls, emails, correspondence or training
- Processing requests for payment, purchase orders, vouchers or database entry
- Establishment of eligibility

If the case manager goes to a previously scheduled home or work site visit and the participant is not available, one unit (15 minutes) can be billed. There must be a case note made within Therap when the visit is set up to document that it was a scheduled visit.

The Therap system will require a case note for each entry, billable and non-billable. The case note must be able to support the time being billed and be descriptive about the activities that were performed to justify the units being billed. The case note must also include the person who the service is provided to and if any follow up is needed.

#### **Example of an acceptable case note:**

- Phone contact with John. Discussed with John how his health has been. He indicated he is not feeling 100% yet and is going back to the dr. on Monday. After reviewing John's files I advised him I needed to set up a meeting with him to go over details of his personal measures and needed to go through some questions him. Went through the questions I had and spent some time discussing other activities that John has been involved in since we last talked. Set up a time to meet for the following week.
- Researched information on winter weather preparedness to send to John. Located and compiled information and put in envelope to mail to John at his address in Pierre.

#### **Examples of an unacceptable case note:**

- Phone call with John;  
(The case note needs to include what the phone call was about and provide detail of the conversation.)
- Research information on winter weather preparedness. Locate and compile information and mail out to participant;  
(The case note is generic and not specific to the participant. There needs to be something that is individual specific to the notes to meet the documentation requirements.)