ECSII & CASII Policy and Billing Information

Wyoming Medicaid’s Care Management Entity (CME) contractor, Magellan Healthcare, serves Medicaid-covered children and youth ages of four through twenty years of age who are experiencing serious emotional and/or behavioral challenges. The CME provides intensive care coordination services using the High Fidelity Wraparound (HFWA) model. Children and youth not eligible for Wyoming Medicaid may access CME services through the State’s Children’s Mental Health Waiver (CMHW).

All youth applying for CME enrollment must meet clinical eligibility requirements which include completion of the Early Childhood Service Intensity Instrument (ECSII) for children 4-5. Or, completion of the Child & Adolescent Service Intensity Instrument (CASII) for youth 6-20.

In order to enroll with Wyoming Medicaid as an ECSII or CASII evaluator to perform evaluations as an Independent Assessor, one must:

- Be certified by the CMHW/CME Program Manager as having met the training and certification guidelines,
  - Certification is demonstrated by a certificate of good standing which is issued by the CMHW/CME Program Manager to qualified evaluators
- Agree to be listed on a public facing roster for selection by youth and families seeking an evaluation, and
- Meet ongoing recertification requirements as specified in policy

Independent Assessor's (IA's) who are performing a ECSII/CASII assessment for children/youth who are applying for the Wyoming Medicaid Children’s Mental Health Waiver (CMHW) and not currently covered by Wyoming Medicaid will need to complete a ECSII/CASII online add form and submit to Magellan per their instructions. The online add form is available on the "Forms" page of the Care Management Entity (CME), Magellan Healthcare Inc., website: www.MagellanofWyoming.com

- The completed ECSII/CASII online add form is forwarded by the CME, along with the application packet (or by itself if the child/youth did not clinically qualify) to the Medicaid CMHW/CME Program Manager for submission to the Medicaid fiscal agent who makes the child/youth assessed eligible for Medicaid payment for the assessment.
- The CMHW/CME Program Manager responds to the assessor with the client ID and confirmed date of service when the online addition is complete.

Medicaid home and community-based service (HCBS) waivers are required to adhere to conflict of interest standards. Conflicts of interest can arise from:

- incentives for either over- or under-utilization of services;
- problems such as an interest in retaining an individual as a client rather than promoting independence; or,
- issues that focus on the convenience of the service provider rather than being person-centered.

Many of these conflicts of interest may not be conscious decisions on the part of individuals or entities responsible for the provision of service.
A key component to a conflict free system is keeping the program’s eligibility decisions separate from service provision. This means that individuals or agencies who would benefit financially from the provision of the assessed needs and services may not perform the Independent Assessment.

To accomplish this separation, the Independent Assessor:

- May not have an interest in or be employed by a potential provider of the waiver services. If a family indicates interest in working with a specific Family Care Coordinator (FCC) or High Fidelity Wraparound (HFWA) provider agency, the Independent Assessor needs to be independent of that FCC or agency that provides FCC. The family can be informed of this decision during the IA process so they have the option to select another IA should there be a potential conflict of interest.
- Must avoid performing more than two consecutive ECSII/CASII’s for the same youth. While it is unusual for a child/youth to be involved in HFWA for a long period of time, the third assessment that is used to determine ongoing eligibility needs to be completed by a different assessor than the IA who performed the last two assessments.

The procedure code for an ECSII or CASII assessment is **H0002**. A modifier (CG) is allowed in certain circumstances based on the work performed, as described below.

To be eligible to receive payment for initial ECSII/CASII assessments performed by the IA as part of the CMHW/CME application process, the complete CME application must be submitted in the manner specified by the CME’s policy which is detailed in the provider section of the CME’s website.

A complete CME/CMHW application includes:

- Application form-signed by the parent, guardian, or young adult applying (18+ with no guardian) for CMHW/CME services.
  - Page 3 of the application is signed by the IA who completed the application packet
- Level of Care form signed by a qualified Wyoming clinician who is able to diagnose behavioral health disorders per their license and scope of practice
- Completed/signed Freedom of Choice and Provider Choice forms
- Completed ECSII or CASII assessment completed by the IA
- Financial application packet for youth applying for the CMHW only

IA’s who complete the full application process are eligible to add the modifier **“CG”** to the evaluation’s procedure code which increases reimbursement by 25%.

For ECSII/CASII evaluations that aren’t part of the initial enrollment, please bill with the procedure code only

- In this case the procedure code modifier is not used