SECTION 5

Entering TCM Encounter Data Into the TCM System

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INTRODUCTION

To claim reimbursement for Targeted Case Management (TCM) encounters, the Local Governmental Agency (LGA) must submit an invoice that has been generated from the online TCM System (System). An invoice is a summary of claims for TCM encounters from one program type that have service dates that fall within the State fiscal year (July 1 through June 30). The System produces separate invoices by program type and either month or quarter. The System also produces separate invoices by the rate of reimbursement (100, 75, or 50 percent) assigned to each encounter according to the number of months that passed between the encounter’s date of service and the date the invoice was created. However, the reimbursement rate is ultimately determined by the date the invoice is postmarked for delivery to DHS (see Section 6, page 1).

This section presents the steps involved in entering TCM encounter data into the System. The process of creating and submitting the TCM invoice is described in Section 6 of this manual. The System is an internet-based application, and is accessed at https://tcm.dhs.ca.gov (online training is also available at this address). The System provides:

- Online verification of Medi-Cal eligibility;
- A tool to use to identify and prevent duplicate claims;
- Creation of invoices for reimbursement;
- Tracking of reimbursement received by the LGAs;
- A statewide database of all TCM encounters and invoices;
- A tool to use for performance monitoring; and
- Data to use to create statistics regarding the overall TCM program.

LGAs participating in the TCM program access the application using a browser that is either a Netscape 4.78 or higher or an Explorer 5.5, service pack 2, or higher. Your browser must have 128-bit encryption to use the System.

User Access and Security

The architecture and programming of the System meet all requirements of the federal Centers for Medicare and Medicaid Services’ (CMS’s) Internet Security Policy issued November 24, 1998, regarding encryption, authentication, identification, and security; and the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

All information entered into the System is considered Medi-Cal data. Medi-Cal confidentiality requirements as defined in Article II, Paragraph G, of the Medi-Cal TCM Provider Participation Agreement and in Welfare and Institutions (W&I) Code, Section 14100.2, must be met. Each user of the System must complete and sign a “TCM System Request for User ID” form (attached), which includes an Oath of Confidentiality. This form is found at the end of this section and on the TCM website under “Access the TCM System.” Each TCM System “Request for User ID” form must be kept on file with the LGA’s TCM Coordinator. Any information printed from the System must be kept confidential and must be shredded when it is no longer used. There are two levels of users available to the LGA.
• LGA User: May enter (manually or via upload process), modify, and view encounter data.

• LGA Administrator: Assigns LGA User level access, downloads LGA data, and creates/submits invoices. Each LGA can have more than one LGA Administrator.

Before LGA staff may access the System, the LGA TCM Coordinator must establish an LGA Profile by completing the “Request for LGA Profile” form (attached and on the TCM website under “Access the TCM System”) and mail it to:

Department of Health Services
Medi-Cal Benefits Branch
Local & Schools Services Unit
TCM System Administrator
1501 Capitol Avenue, MS 4603
P.O. Box 942732
Sacramento, CA 94234-7320

The LGA must designate an LGA Administrator. The administrator is responsible for ensuring that encounters entered into the TCM System are appropriate for claiming federal reimbursement, that encounters have been entered correctly into the TCM System, and creating and submitting the invoice. To request an LGA Administrator ID, complete the “TCM System User Request” form and send it to the above address. For expedited service, you may fax the forms to the TCM System Administrator at (916) 552-9602. In either case, the original hardcopies of these forms must also be mailed to the above address.

Once the LGA Administrator ID is assigned, the LGA Administrator can designate LGA Users. The LGA User must complete and submit a TCM System User Request to the LGA Administrator. The TCM Coordinator must retain these forms for each LGA User granted access to the system.

Access to the System by the LGA User is limited to entering and modifying encounter data. The LGA Administrator can limit an LGA User logon by Program and Sub-program Type(s). The LGA Administrator can terminate an LGA User’s System access by entering an End Date on the System’s Add User ID screen.

Each LGA Administrator assigns user IDs and passwords. User IDs and passwords must contain at least five, and not more than eight, characters. The user ID consists of the first initial of the user’s first name and the first seven letters (or fewer for short names) of the user’s last name.

**How to Enter Encounters**

To create an invoice, an LGA first enters TCM encounter data into the System. After accessing the System at [https://tcm.dhs.ca.gov](https://tcm.dhs.ca.gov), select the option “Access to the TCM System.” Then select the option “Proceed to the Login Page,” and enter your user ID and Password. (To maintain System security, be sure to Log Off when you finish using
the System or when you leave your desk.) On the left side of the screen is a column of folders you can enter (Encounters, Invoice, Report, etc.).

To add an encounter, click on the “Encounters” folder and then on the “Add” button that shows beneath the word “Encounters.” The “Add Encounters” page will appear. Enter the following required information into the blank fields on this page:

- Program Type (Select an option from the pull-down menu. This may be restricted according to your user ID permissions.)
- Case Manager ID (Use either the last name or the code your county uses to identify the person who provided the TCM service.)
- Location (Select Home, Office, or Other from the pull-down menu.)
- Date of Service (The System will calculate if the 12-month limit has been exceeded.)
- Date of Birth
- Client ID (Client’s Social Security Number or Medi-Cal ID number.)
- Last Name (Required if the Client ID has not been entered.)
- Newborn Date of Birth (if applicable—see note below)*

Other blank fields on the Add Encounters screen are optional but recommended. Optional Fields 1 through 3 are also available to more clearly define the encounter (e.g., to define the TCM services provided, to describe the encounter location [park, coffee shop, nursing facility, hospital, jail] or to provide other useful information to support the encounter).

To submit the data you entered on the Add Encounters page for processing, hit the “Save” button at the bottom of the page. To erase data you entered that has not already been saved, hit the “Reset” button. To leave the Add Encounters page, hit the “Back” button.

Once you submit encounter data for processing, the System assigns the encounter data an Encounter ID number. This number appears at the top of the Add Encounter page to notify you of the encounter status for the data you just submitted. If the System cannot verify the client’s Medi-Cal eligibility, this top line of the page will read “added with a status of not eligible.” The System checks the eligibility status of every client nightly against the Medi-Cal Eligibility Database System (MEDS), thereby enabling you to enter encounter data for clients whose Medi-Cal eligibility may soon change. This “nightly MEDS sweep” results in many encounters becoming eligible for invoicing months after they were entered into the System (see Section 6).

**Note:** LGA staff may enter encounter data on the System before the annual cost report is approved (see Section 4). However, invoices may not be created until after the cost report is approved.
Duplicates

When an LGA enters an encounter into the System, the application ensures that the encounter contains the required information (e.g., client ID, date of service, provider, case manager, location, and program type) and performs a duplicate match against all other encounters entered by the LGA. The application verifies that encounters are entered into the System within mandated timeframes (see PPL 03-009) and that the client is Medi-Cal eligible for the month in which the service was provided. These results are transmitted back to the LGA immediately. A potentially duplicate encounter appears on the Encounter View page with the status “DUPE.” The data used to determine potential duplicates are:

- LGA
- Program Type
- Client ID
- Date of Service
- Newborn Date of Birth (if applicable)

When a potentially duplicate encounter is identified, the TCM System identifies all matching encounters. The LGA must review these encounters (click the “Show Matches” button) to determine the cause of the duplication. The LGA must then choose a “Valid Reason” on the duplicate encounter to override the duplicate indicator so that the encounter can be invoiced. The encounter will not be included on an invoice until a valid reason code is assigned. The valid reason codes are:

- Significant Additional Visit (01)
- Multiple Births (02)
- Other (00) – The “Valid Reason Other” text field must be completed to explain why this code was used.

**Significant Additional Visit (01).** This valid reason code means that the client had a compelling need for TCM services on the same day another TCM service had already been provided. This compelling need can be for services that were not provided by the same case manager earlier that day or that could not be provided by the same case manager. Documentation must support the need for multiple encounters on the same day.

Ideally, a single case manager is responsible for providing the whole range of TCM services to one client; this is the best way to prevent duplication of services. A TCM encounter conducted by one case manager should consider and/or provide a range of TCM services, from assessment to periodic review. When a case manager makes multiple referrals or provides multiple TCM services during a single visit, the referrals or services cannot be billed as separate encounters.

A client may experience a crisis requiring a significant additional visit from the same case manager. The case manager must document in the client case records the reason for the significant additional visit. The significant additional visit may not constitute a
continuation of an earlier encounter; it must be a separate service for a separate reason.

In addition, the first case manager may not have the specialized skills required to provide the additional TCM services the client needs. When multiple case managers interact directly with a client to provide different TCM services, as a result of the client’s immediate needs, each provider can claim a TCM encounter. When case managers provide services to the same client, the LGA must determine which is the lead case manager. The client case records must indicate the specialized skills (e.g., nursing, social service) possessed by the additional case manager(s) that justified the additional encounter. The lead case manager must coordinate with the other case managers who provided services to the client in order to prevent duplication of services (e.g., assessment, developing a service plan) among those case managers.

**Multiple Births (02).** This valid reason code means that two or more children share the same Newborn Date of Birth and the mother’s Medi-Cal ID Number. Entering an encounter for a single newborn will not result in a duplicate flag if the Newborn Date of Birth is entered. Be sure to enter the Newborn Date of Birth. Newborns have “presumptive” Medi-Cal eligibility until the end of the month following the month in which they were born. After that time, TCM encounters for children must use each child’s own Medi-Cal ID number. The child(ren) must be present for the TCM encounter to be claimed.

**Other (00).** This valid reason code means that some other compelling reason caused the duplicate encounter. When using this code, the space “Valid Reason Other” must be complete.

Once the encounter data has been processed, you can enter data for your next encounter into the blank encounter fields, or you can click the View button at the bottom of the page to access the Encounter View page and to review or modify the encounter data you just entered. The Encounter View page can also be accessed by clicking on the Search button beneath the Encounters folder on the left side of the screen and entering an encounter number in the blank field.

The Encounter View page displays the encounter data you entered and encounter status, client eligibility, and encounter duplicate information. Possible Encounter Status Codes are:

- **CLAM (Claimable):** The encounter meets all requirements for federal reimbursement. Encounters with this code are ready to be invoiced and submitted to DHS for payment.
- **DENY (Deny):** DHS questioned the validity of this encounter after it was submitted to DHS in an invoice or at the request of the LGA that submitted it. Denied encounters might still be invoiced and submitted for payment if the reason for their denial can be repaired (e.g., a data entry error).
- **DUPE (Duplicate):** A possible duplicate exists based on Client ID, Program Type, Date of Service, or Newborn DOB. This code requires that a
Valid Reason code be entered, as explained in the previous paragraphs.

**EXCD (Exceeded):** Not claimable because the annual cap amount for the LGA has been exceeded. To receive payment for claims with this code requires establishing a new written agreement with DHS concerning the number of encounters that may be claimed during the current fiscal year.

**EXPD (Expired):** Entered past the 12-month time limit for submitting an encounter. This time limit is established by federal law and cannot be changed.

**HOLD (Hold):** The LGA can enter this code to keep the System from processing it further while the LGA is researching some aspect of the encounter data.

**INAC (Inactive):** The LGA enters this code when they decide to take no action toward resolving questions regarding this encounter.

**NELG (Not Eligible):** Medi-Cal eligibility cannot be verified.

**PAID (Paid):** Federal reimbursement for this encounter has been received. The LGA fills in the required field in the System to change the invoice status from INVC to PAID.

**PEND (Pending):** Additional information is needed to determine if this encounter is claimable.

To correct any information displayed on the Encounter View page, click the “Modify” button at the bottom of the page. The “Encounter Modify” page will then open. LGA staff can enter information in any of the encounter data fields. This is where you can override the duplicate status of an encounter by selecting a “Valid Reason” from the pull-down menu in the Valid Reason field. If you select “Other” as a Valid Reason, you must type in a description of what Other means. When you are finished making entries on the Encounter View page, click one of the three options at the bottom of the page.

If the encounter you’re reviewing on the Encounter View page has a “Y” as a Duplicate Indicator, you can view those encounters that are matched against the encounter you’re reviewing by clicking the “Show Matches” button at the bottom of the page.

Policy and Procedure Letters 00-012 and 02-001 contain additional information about the TCM System. They are attached to this section and can be accessed online at www.dhs.ca.gov/tcm.

**Upload Function**

Encounters can be uploaded from an electronic file from your local system to the TCM System. To do so, you must have a licensed copy of Microsoft Access® and request an Access® template from DHS (email your request to Carlene Hess at chess@dhs.ca.gov). The upload function is located on the System in the “Data Transfer” folder on the left margin of the screen.
Requirements for Upload

- Data must be in a fixed block text format.
- Data fields must match the layout described in the attached “TCM File Format for Uploaded Encounter Record.” (attached). There can be no deviation from this format.

Files uploaded without all the required information will be given a status of “pending,” and will not be included on an invoice until the missing information is provided.

For detailed information about the TCM System please visit the TCM training website at https://tcm.dhs.ca.gov, and enter the training section. Online training is available, as well as forms and the format for uploading and downloading encounters into the System.
### File Format for Uploaded Encounter Record

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Start Position</th>
<th>End Position</th>
<th>Length</th>
<th>Type</th>
<th>Format</th>
<th>Option</th>
<th>Permitted Values</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Manager ID</td>
<td>001</td>
<td>009</td>
<td>09</td>
<td>AN</td>
<td></td>
<td>Required</td>
<td></td>
<td>Required if Client Last Name is left blank.</td>
</tr>
<tr>
<td>Client ID</td>
<td>010</td>
<td>018</td>
<td>09</td>
<td>AN</td>
<td></td>
<td>Optional</td>
<td></td>
<td>Required if Client ID is left blank.</td>
</tr>
<tr>
<td>Date of Service</td>
<td>019</td>
<td>028</td>
<td>10</td>
<td>Date</td>
<td>MM/DD/CCYY</td>
<td>Required</td>
<td>&gt; 07/01/1995</td>
<td>Required if Client Last Name is left blank.</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>029</td>
<td>038</td>
<td>10</td>
<td>Date</td>
<td>MM/DD/CCYY</td>
<td>Required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client Last Name</td>
<td>039</td>
<td>058</td>
<td>20</td>
<td>AN</td>
<td></td>
<td>Optional</td>
<td>Required if Client ID is left blank.</td>
<td></td>
</tr>
<tr>
<td>Client First Name</td>
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<td>073</td>
<td>15</td>
<td>AN</td>
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<td>Optional</td>
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<tr>
<td>Client Middle Initial</td>
<td>074</td>
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<td>01</td>
<td>AN</td>
<td></td>
<td>Optional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Type Code</td>
<td>075</td>
<td>076</td>
<td>02</td>
<td>N</td>
<td></td>
<td>Required</td>
<td>06 = Public Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>07 = Outpatient Clinics</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>09 = Public Guardian</td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10 = Linkages</td>
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<td>11 = Probation</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13 = Community</td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>077</td>
<td>082</td>
<td>06</td>
<td>AN</td>
<td></td>
<td>Required</td>
<td>Office</td>
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<td>Home</td>
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</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Newborn Date of Birth</td>
<td>083</td>
<td>092</td>
<td>10</td>
<td>Date</td>
<td>MM/DD/CCYY</td>
<td>Optional</td>
<td>Defined by the LGA. If not used the field should be equal to spaces.</td>
<td></td>
</tr>
<tr>
<td>Optional Field 1</td>
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<td>102</td>
<td>10</td>
<td>AN</td>
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<td>Defined by the LGA. If not used the field should be equal to spaces.</td>
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</tr>
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</tr>
<tr>
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<td>122</td>
<td>10</td>
<td>AN</td>
<td></td>
<td>Optional</td>
<td>Defined by the LGA. If not used the field should be equal to spaces.</td>
<td></td>
</tr>
<tr>
<td>Sub Program</td>
<td>123</td>
<td>126</td>
<td>04</td>
<td>AN</td>
<td></td>
<td>Optional</td>
<td>Permitted Values defined by the LGA.</td>
<td></td>
</tr>
</tbody>
</table>

**Record Format:** Fixed Block (FB)  
**Record Length:** 126
Download Function

An LGA can download their encounter data from the System to help research potential duplicates and identify trends and to provide a useful tool for tracking fiscal trends. Encounter data can be downloaded by program type, within a certain date range, or from the date of the last download. The download function is located on the System in the “Data Transfer” folder on the left margin of the screen.

Requirements for Download

- Only DHS and LGA Administrators can download data.
- LGA Administrators can only download encounter data for their LGA.
- Data is downloaded in a “fixed block” text file. “File Format for Downloaded Encounter Record Data – Release 2” is attached.
- You must have the WinZip program on your computer. If you don’t have WinZip, it can be downloaded from the TCM System training website at https://tcm.dhs.ca.gov.

Once the data for download is created, the text file is compressed into a WinZip file to accommodate any size file. The downloaded file can then be imported into any database program as a “fixed length text file.” The file can also be imported into a spreadsheet application.

For more information on how to download a file, please visit the TCM training website listed above.
<table>
<thead>
<tr>
<th>Field Name</th>
<th>Start Position</th>
<th>End Position</th>
<th>Length</th>
<th>Type</th>
<th>Format</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encounter ID</td>
<td>001</td>
<td>007</td>
<td>07</td>
<td>AN</td>
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<td></td>
</tr>
<tr>
<td>LGA Code</td>
<td>008</td>
<td>009</td>
<td>02</td>
<td>AN</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Invoice Number             | 010            | 020          | 11     | AN   |        | Position 1 – 2: LGA Code  
Position 3 – 4: Begin SFY  
Position 5: /  
Position 6 – 7: End SFY  
Position 8: –  
Position 9: Quarter of SFY  
Position 10: Alpha character  
Position 11: Alpha character |
| Case Manager ID            | 021            | 029          | 09     | AN   |        |                                                                         |
| Client ID                  | 030            | 038          | 09     | AN   |        | Client Identification Number  
BIC Number  
Social Security Number  
MEDS ID                                                                 |
| Filler                    | 039            | 047          | 09     | AN   |        | Reserved for future use.                                                |
| Date of Service            | 048            | 057          | 10     | AN   | MM/DD/CCYY |                                                                         |
| Date of Birth              | 058            | 067          | 10     | AN   | MM/DD/CCYY |                                                                         |
| Last Name                  | 068            | 087          | 20     | AN   |        |                                                                         |
| First Name                 | 088            | 102          | 15     | AN   |        |                                                                         |
| Middle Initial             | 103            | 103          | 01     | AN   |        |                                                                         |
| Program Type Code          | 104            | 105          | 02     | AN   |        | 06 = Public Health  
07 = Outpatient Clinics  
09 = Public Guardian  
10 = Linkages  
11 = Probation  
13 = Community                                                                 |
| Location                   | 106            | 111          | 06     | AN   |        |                                                                         |
| Newborn Date of Birth      | 112            | 121          | 10     | AN   | MM/DD/CCYY |                                                                         |
| Optional Field 1           | 122            | 131          | 10     | AN   |        |                                                                         |
| Optional Field 2           | 132            | 141          | 10     | AN   |        |                                                                         |
| Optional Field 3           | 142            | 151          | 10     | AN   |        |                                                                         |
| Sub Program                | 152            | 155          | 04     | AN   |        |                                                                         |
| Encounter Status           | 156            | 159          | 04     | AN   |        | CLAM = Claimable  
CNCL = Cancelled  
DENY = Denied  
DUPE = Duplicate  
EXCD = Exceeded  
EXPD = Expired  
HOLD = Hold  
INAC = Inactive  
INVC = Invoiced  
NELG = Not Eligible  
PAID = Paid  
PEND = Pending                                                                 |
<p>| Filler                    | 160            | 160          | 01     | AN   |        | Previously Duplicate Override Flag                                     |
| Duplicate Indicator        | 161            | 161          | 01     | AN   |        |                                                                         |</p>
<table>
<thead>
<tr>
<th>Field Name</th>
<th>Start Position</th>
<th>End Position</th>
<th>Length</th>
<th>Type</th>
<th>Format</th>
<th>Notes</th>
</tr>
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<tbody>
<tr>
<td>MEDS Eligibility Indicator</td>
<td>162</td>
<td>162</td>
<td>01</td>
<td>AN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEDS Failure Reason</td>
<td>163</td>
<td>242</td>
<td>80</td>
<td>AN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Encounter Rate</td>
<td>243</td>
<td>252</td>
<td>10</td>
<td>N</td>
<td>+999999.99</td>
<td>0001 = Invoice not on LGA letterhead</td>
</tr>
<tr>
<td>Invoice Deny Reason</td>
<td>253</td>
<td>256</td>
<td>04</td>
<td>AN</td>
<td></td>
<td>0002 = Signature requirements not met</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0003 = All encounters are questionable</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0004 = All encounters exceed the remaining cap</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0005 = LGA request</td>
</tr>
<tr>
<td>Entry Date-Time Stamp</td>
<td>257</td>
<td>282</td>
<td>26</td>
<td>AN</td>
<td></td>
<td></td>
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<td>CNCL = Cancel</td>
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<td>CREA = Created</td>
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<td>SUBM = Submitted</td>
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<td>APPR = Approved</td>
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<td>ADJU = Adjusted</td>
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<td>DENY = Denied</td>
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<td>00 = Other</td>
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<td>CV = Converted</td>
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<td>Valid Encounter Reason</td>
<td>347</td>
<td>376</td>
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Targeted Case Management (TCM) System
LGA Profile Request

☐ Add  ☐ Change  Effective: ___________________

LGA Name: ________________________________________________ LGA Code: _____________

TCM Coordinator: __________________________________________________________________

Phone: _________________________ Coordinator's email: ________________________________

Address (1): ______________________________________________________________________

Address (2): ______________________________________________________________________

City: _________________________________________  Zip: _______________________________

Subprogram Codes Requested:

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<tr>
<th>Program #</th>
<th>Subprogram Code (max. 4 characters)</th>
<th>Program #</th>
<th>Subprogram Code (max. 4 characters)</th>
<th>Program #</th>
<th>Subprogram Code (max. 4 characters)</th>
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</table>

Signature of TCM Coordinator    Date

Return Completed form to:  
Department of Health Services  
Medi-Cal Benefits Branch  
TCM System Administrator  
1501 Capitol Avenue, MS 4603  
P.O. Box 942732  
Sacramento, CA  94234-7320

DHS Use Only:

Completed by       Date

Do your part to help California save energy. To learn more about saving energy, visit the following web site:
www.consumerenergycenter.org/flex/index.html
Targeted Case Management System
Request for User ID

LGA Name:
User Name:
User email:
User phone:
Last 4 digits of SSN
User Level: LGA User LGA Administrator DHS User DHS Accounting
Begin Date:
End Date:
Authorized by: ____________________________

LGA or DHS Administrator use only: ID Assigned: By: Date:

Oath of Confidentiality

As a condition of obtaining access to information concerning data and records used and maintained by the State Department of Health Services, I, __________________, agree not to divulge, publish, or otherwise make public any information regarding person(s) receiving Medi-Cal services such that the persons who received such services are identifiable.

Access to such data shall be limited to Local Governmental Agencies and their subcontractors participating in the Targeted Case Management Program who require the information in the performance of their duties and to such others as may be authorized by the Department of Health Services.

I recognize that unauthorized release of confidential information may make me subject to civil and criminal sanctions pursuant to the provisions of the Welfare and Institutions Code, Section 14100.2.

Signature of TCM System User Date

Revised 5/6/02

Do your part to help California save energy. To learn more about saving energy, visit the following web site: www.consumerenergycenter.org/flex/index.html
March 5, 2002

PPL NO. 02-001

TO: Local Governmental Agencies (LGAs)
    Targeted Case Management (TCM) Coordinators

SUBJECT: Release 2 of the TCM System

The Department of Health Services (DHS), in collaboration with the LGAs, automated the TCM System to enter encounter information and create invoices for the TCM Program.

DHS and the LGAs identified a list of enhancements that are programmed into Release 2 of the TCM System. An Enhancement Workgroup (Workgroup), with representatives from DHS and the LGAs, refined and tested the enhancements.

Release 2 will be available March 8, 2002. The following are the new features for LGAs:

1. The TCM System will recheck Medi-Cal Eligibility Data System (MEDS) for eligibility;
   Encounters with a status “Not Eligible” will be rechecked against MEDS daily to reflect any changes in eligibility that have occurred.
2. The LGA can “Cancel” an invoice before it is submitted;
   The LGA Administrator can “Cancel” an invoice after it has been created but before it has been electronically submitted. This resets the status of all encounters associated with that invoice to “Claimable.”
3. DHS can “Void” an invoice after it is submitted but before it is approved;
   DHS can “Void” an invoice that has been electronically submitted but before it has been approved for payment. This resets the status of all encounters associated with that invoice to “Claimable.”
4. The LGA Administrator can limit an LGA logon by Program and Sub-program Type(s);
   The LGA Administrator can set up LGA accounts that limit entering, modifying, and viewing encounters by program and subprogram.
5. The TCM System returns the original encounter for a potential duplicate encounter;
   When a potential duplicate encounter is entered, the TCM system will return all encounters that match on LGA, MEDS ID, Date of Service, and Program Type.
6. The TCM System has a drop-down menu providing the reason a potential duplicate encounter is valid;

When a potential duplicate encounter is entered into the TCM System, the System will return a message of “DUPE.” The LGA must choose a valid reason code to allow the encounter to be invoiced. The Workgroup identified three reasons why a potential duplicate encounter could be valid:

- Significant Additional Visit – encounters that do not duplicate other encounters provided to the same beneficiary on the same day for the same purpose
- Multiple Births
- Other - Requires completion of the “Valid Reason Other” text box

Encounters with a duplicate override of “Y” for which no invoice has been created prior to Release 2 will display “CV” (conversion) in the “Valid Reason.” LGAs must research these encounters and indicate one of the preceding valid reasons to allow the encounter to be invoiced.

7. The LGA may use default values when adding encounters;

The user can use default values when adding an encounter to the screen. Default values are Case Manager ID, Program Type, Sub Program Type, and Location.

This option can be turned on or off.

8. The TCM System will automatically reduce reimbursements for encounters invoiced after six months from the end of the month of service;

Welfare and Institutions Code, Section 14115 mandates that the rate of reimbursement be calculated by the age of the encounter as follows;

- 100% reimbursement: 0–6 months
- 75% reimbursement: 7–9 months
- 50% reimbursement: 10–12 months
- 0% reimbursement: Greater than 12 months

Invoices are created according to reimbursement rate and program type, and reflect the adjusted rate of reimbursement.

9. The TCM System will create invoices by specific month and date range within a given fiscal year;

10. The LGA Administrator can view his/her LGA Profile;

11. The LGAs can change their password;

12. The LGA can search encounters by case manager;

An “*” may be used as a wildcard when searching encounters.

13. The LGA can print encounters associated with an invoice, in increments of 200.

14. The TCM System has additional information in the LGA Summary View;

- Commas and dollar signs
- Sub-program views
- Separate lines for each reimbursement rate
- Remaining cap balance per program
15. The TCM System places the cursor on each screen at the first field in which data may be entered;

16. The TCM System has a Frequently Asked Questions (FAQ) page link added to each screen;
   A link has been added on the left side of the page. When the link is accessed, a separate page opens, and the user can browse through questions and answers. DHS will periodically add frequently asked questions and answers to this page.

17. The TCM System has an additional option for downloading data;
   A new option allows the user to download only the data that has been added to the TCM System since the last download.

18. The TCM System returns a message to indicate a download is complete.

With the implementation of Release 2, the TCM System automatically calculates invoices reduced due to late submission. Therefore, effective March 30, 2002, DHS will no longer accept encounters on disk.

The file format for uploading encounters has remained the same. The file format for downloading encounters has changed slightly. (The new download record format is attached.) The new format will be available online at the TCM website after March 8, 2002. The revised TCM brochure is also attached. Revised online training will be available at the TCM website when it is completed.

If you have any questions, please call Elizabeth Touhey at (916) 552-9616 or by email at etouhey@dhs.ca.gov. If you need technical assistance, please call Carlene Hess at (916) 552-9578 or by email at chess@dhs.ca.gov.