

Targeted Case Management (TCM) System

Web page addresses

For general information and training:

<http://www.dhcs.ca.gov/provgovpart/Pages/TCMSysTraining.aspx>

TCM System & Training:

<https://tcm.dchs.ca.gov>

System Requirements

Minimum Internet Browser requirements:

- Explorer 4.x or Netscape 4.x
- 128-bit encryption

Recommended Browser requirements:

- Explorer 5.5 SP2 or higher, or
- Netscape 4.77 or higher

Users of the System

01 – DHS Accounting User ID

- Enter information when invoice is sent to State Controller for payment
- Change Password

02 – LGA User

- Enter/modify/view encounters
- Upload encounter information
- Change Password

03 – LGA Administrator

- Enter/upload/modify encounters
- Create/submit/cancel invoices
- View LGA Profile
- View summary data
- Download LGA encounter data
- Enter receipt of payment
- Assign LGA User access
- Change Password

04 – DHS User

- Create/edit LGA Profiles
- Review/approve/adjust/offset invoices
- Change Password

05 – DHS Administrator

- Assign User IDs (all levels)
- Download statewide/LGA data
- VOID Invoices
- Change Password

Program Types (Required)

- 06 Public Health
- 07 Outpatient
- 09 Public Guardian
- 10 Linkages
- 11 Probation
- 13 Community

Location (Required)

- Office
- Home
- Other

Encounter Status Reasons

Claimable (CLAM) – MEDS eligibility verified, time limits met, not a duplicate. Reimbursement can be claimed.

Denied (DENY) – Reimbursement for an encounter has been denied by DHS during the invoice review process.

Duplicate (DUPE) – Encounter is the same as another encounter based on: LGA Code, Program Type Client ID, Date of Service, and Newborn Date of Birth.

Exceeded (EXCD) – Reimbursement cannot be claimed because approved “cap amount” has been exceeded.

Expired (EXPD) – Date of service is greater than 12 months after the month of service, the newborn date of birth is after the month following the month of service for claiming on the mother’s Medi-Cal or the time limit for verifying Medi-Cal eligibility is past.

Hold (HOLD)– Encounter is being held by the LGA for further research before invoicing.

Inactive (INAC) – Encounter has been saved as inactive by LGA.

Invoiced (INVC) – Reimbursement has been claimed for this encounter. This does not mean that the invoice has been submitted, approved or paid.

Not Eligible (NELG) – Unable to verify Medi-Cal eligibility.

PAID (PAID) – Reimbursement for the encounter has been received.

Pending (PEND) – Necessary information to claim reimbursement is missing (e.g, Client ID, location, NPI, Subprogram code)

MEDS Match Codes

- 00 Eligible
- 11 Date of Birth does not match MEDS
- 22 Date of Service exceeds 12 months
- 33 CIN not found
- 44 No record found on MEDS
- 55 Client not eligible on MEDS for Date of Service
- 66 Client has unmet Share of Cost
- 67 Non-federal Aid code
- 77 Client in Long Term Care status

- 90 System error reading CASXREF
- 91 System error reading CIXREF
- 92 System error reading MEDS



**Remember:
Medi-Cal
information is
confidential**

Invoice Status Reasons

Created (CREA) – Invoice has been created for LGA review

Submitted (SUBM) – Invoice has been printed on LGA letterhead, signed and submitted to DHS.

Approved (APPR) – Invoice has been approved by DHS for reimbursement.

Adjusted (ADJU) – DHS has denied some encounters and approved others attached to submitted invoice.

Denied (DENY) – Invoice has been denied by DHS.

Paid (PAID) – LGA has received payment and recorded payment on the system.

Offset (OFFS) – DHS has offset the amount of the invoice for a previous overpayment that occurred in the same fiscal year and for the same program type.

Cancel (CNCL) – Invoice was created.

LGA Void (VOID) – Invoice was submitted. DHS reset all encounters attached to invoice to claimable.

Invoice Denial Reasons

- 0001 – Invoice not on LGA letterhead
- 0002 – Signature requirements not met
- 0003 – All encounters are questionable.
- 0004 – All encounters exceed the remaining cap.
- 0005 – LGA request

Potential Duplicate Encounter Reasons

- 00 – Other
- 01 – Significant Additional Visit
- 02 – Multiple Births
- CV – Conversion

Encounter Denial Reasons

- 0001 – Questionable duplicate exists
- 0002 – Questionable number of encounters by Case Manager ID
- 0003 – Lack of documentation
- 0004 – Inappropriate encounter
- 0005 – LGA request

Offset/Supplement Reasons

- 0001 – Supplement due to increased encounter rate (amended cost report)
- 0002 – Supplement due to correction of administrative error
- 0003 – Offset due to lack of documentation found during site visit
- 0004 – Offset due to LGA request
- 0005 – Offset due to other previous invalid payment

Questions:

Call your LGA Administrator

Prepared by the CA Dept. of Health Care Services
SNFD/ACLSSB/TCM dl(12/22/08)

Targeted Case Management (TCM) System

The Targeted Case Management (TCM) System is a web-based application that participating Local Governmental Agencies (LGAs) may access via the Internet. The TCM System is used to:

- verify Medi-Cal eligibility for individuals to whom TCM Services have been provided
- prevent submission of duplicate claims
- create invoices for claiming federal reimbursement



- monitor performance
- approve payments and
- record receipt of payments by the LGA.