

Response to inquiry about the Wiser Choice CMHC MIS

If providers have questions/suggestions about CMHC, to whom should we direct them?

When providers have questions about the usage of the system they have a number of resources available to them.

1. Review the training materials that were provided at the user training.
2. If the issue is with connectivity to CMHC or with connection related error message they may call Robert Jones at 257-4541, one of our Accenture Team, for assistance.
3. For additional questions on menu items usage or how to interpret a report on the menu, the provider may call Jena Scherer at 257-7331.
4. For assignment of a User ID the provider may contact Chuck Sigurdson at 257-7361. These ID's will be issued upon submission of the CMHC usage and confidentiality statements. As a reminder when staff leaves the provider the provider must notify us so that we can inactivate the User ID.
5. During provider operations meetings and in ongoing discussions with providers we acquire comments, questions, issues and suggestions about enhancements to the system. These are reviewed and prioritized along with other business function enhancements and are developed as resources allow.
6. Additional technical assistance is available to providers as needed.

Access to client records within the CMHC System.

We utilize a client ID, the Wiser Choice ID, for client identification purposes. Essentially this Client ID is not unlike an enrollment ID that many of us have for our own insurances or other transactions that we may have needed to perform.

Is CMHC a new program developed for invoicing the county funded AODA clients? Were service providers consulted when the program was developed?

We have utilized the CMHC MIS within BHD since 1995. Over 400 plus Behavioral Health Providers or Behavioral Health Authorities such as Milwaukee County BHD utilize the CMHC MIS. As time has evolved we've introduced enhancements, including our secure web deployment to providers. As we initiate new projects we involve a variety of stakeholders to participate in these project designs. This was done during the AODA redesign as well.

Can the national/WI Medicaid standard CPT codes be used for Outpatient and Day Treatment instead of the current codes supplied by Milwaukee County?

We utilize our current service coding methodology to support the wide and varied payment and other reporting requirements that we have.

Why have the reimbursement rates from Milwaukee County for the above listed services been so much higher than standard Medicaid reimbursement rates for the same services provided by the same credential level provider (CSAC)?

As part of AODA Redesign we did a regional comparative analysis of rates within our communities funded by a variety of public funding. After this review we established rates that were determined to be fair and equitable.

Why are so many different invoicing/authorization/tracking applications used for Milwaukee County clients for the same type of services being purchased from community providers?

There are a number of reasons for this. Many of the programs are administered by differing divisions, and programs may have unique requirements, including which types of MIS or invoicing must be done, or how to manage funds that may be granted or allocated to us for the provision of services to the community. As we are able, we attempt to reduce the complexities within our own division. An example of this is underway in our movement towards a more integrated CMHC that allows for the development and implementation of a co-occurring disorders delivery system.