

(19) "Border-status provider" means a provider located outside of Wisconsin who regularly gives service to Wisconsin recipients and who is certified to participate in MA.

(20) "Budgetable income" means earned and unearned income that is considered available for determining financial eligibility for MA under s. 49.46 (1) or 49.47 (4), Stats., and ch. HSS 103.

(21) "Bureau of health care financing" or "bureau" means the bureau within the division responsible for administration of MA.

(22) "Capitation fee" means a fee the department pays periodically to a provider for each recipient enrolled under a contract with the provider for the provision of medical services, whether or not the recipient receives services during the period covered by the fee.

(22m) "Case management" means activities which help MA recipients and, when appropriate, their families, identify their needs and manage and gain access to necessary medical, social, rehabilitation, vocational, educational and other services. Case management includes assessment, case plan development, and ongoing monitoring and service coordination under s. HSS 107.32.

(23) "Categorically needy" means the group of persons who meet the nonfinancial and financial eligibility conditions to be eligible for the AFDC program or the SSI program.

(24) "Certified occupational therapist assistant" or "COTA" means a person who meets the requirements of s. HSS 105.28 (2).

(25) "Chronic mental illness" means a mental illness which may be of lifelong duration, which is severe in degree and persistent in duration, which causes a substantially diminished level of functioning in the primary activities of daily living and an inability to cope with the ordinary demands of life, and which may lead to an inability to maintain stable adjustment and independent functioning without long-term treatment and support.

(26) "Claim" means a request from a provider on an approved claim form for payment for services to a recipient.

(27) "Clinical note" means a dated written notation of contact with a patient by a member of a health care team, which contains a description of signs and symptoms, treatment or drugs given, the patient's reaction and any changes in physical or emotional condition.

(28) "Compensation received" means the dollar value that can be attached to what is received in return for property and, without limitation by enumeration, that is in one or more of the following forms:

(a) Cash;

(b) Other assets such as accounts receivable and promissory notes, both of which must be valid and collectible to be of value, and stocks, bonds, and both land contracts and life estates;

(c) Discharge of a debt;

(d) Prepayment of a bona fide and irrevocable contract such as a mortgage, shelter lease or loan, or the prepayment of taxes; or

(e) Services, for which a valuation equal to the cost of purchase on the open market is assigned.

Note: The presumption that services and accommodations rendered to each other by the members of a family or other relatives were gratuitous can be rebutted only by direct and positive evidence of a prior express contract for payment.

(29) "Concurrent review" means the department's informal review of a complaint on the basis of which a fair hearing has been requested, including an investigation into the facts of a recipient's request for a fair hearing, whereby the department attempts to achieve an informal resolution acceptable to the recipient before the fair hearing takes place.

Note: This review does not preclude the recipient's right to a fair hearing.

(30) "Conditional eligibility" means eligibility for MA which is conditional upon the applicant or recipient meeting the financial eligibility standards specified in 20 CFR 416.1240 and 416.1242 within a predetermined period of time.

(31) "Confined to a place of residence" means a recipient's condition resulting from an illness or injury which:

(a) Restricts the recipient's ability to leave his or her place of residence except with the aid of a supportive device such as crutches, a cane, a wheelchair or a walker, the assistance of another person or the use of special transportation;

(b) Is such that leaving the residence is medically contraindicated; or

(c) Requires a considerable and taxing effort to leave the home for medical services.

(32) "Consultation" means communication between 2 or more providers concerning the diagnosis or treatment in a given case, which may include, but is not limited to, history-taking examination of the patient, rendering an opinion concerning diagnosis or treatment, or offering service, assistance or advice.

(33) "Controlling interest or ownership" means that a person:

(a) Possesses a direct or indirect interest in 5% or more of the issued shares of stock in a corporate entity;

(b) Is the owner of an interest of 5% or more in any mortgage, deed of trust, note, or other secured obligation;

(c) Is an officer or director of the corporation; or

(d) Is a partner in the partnership.

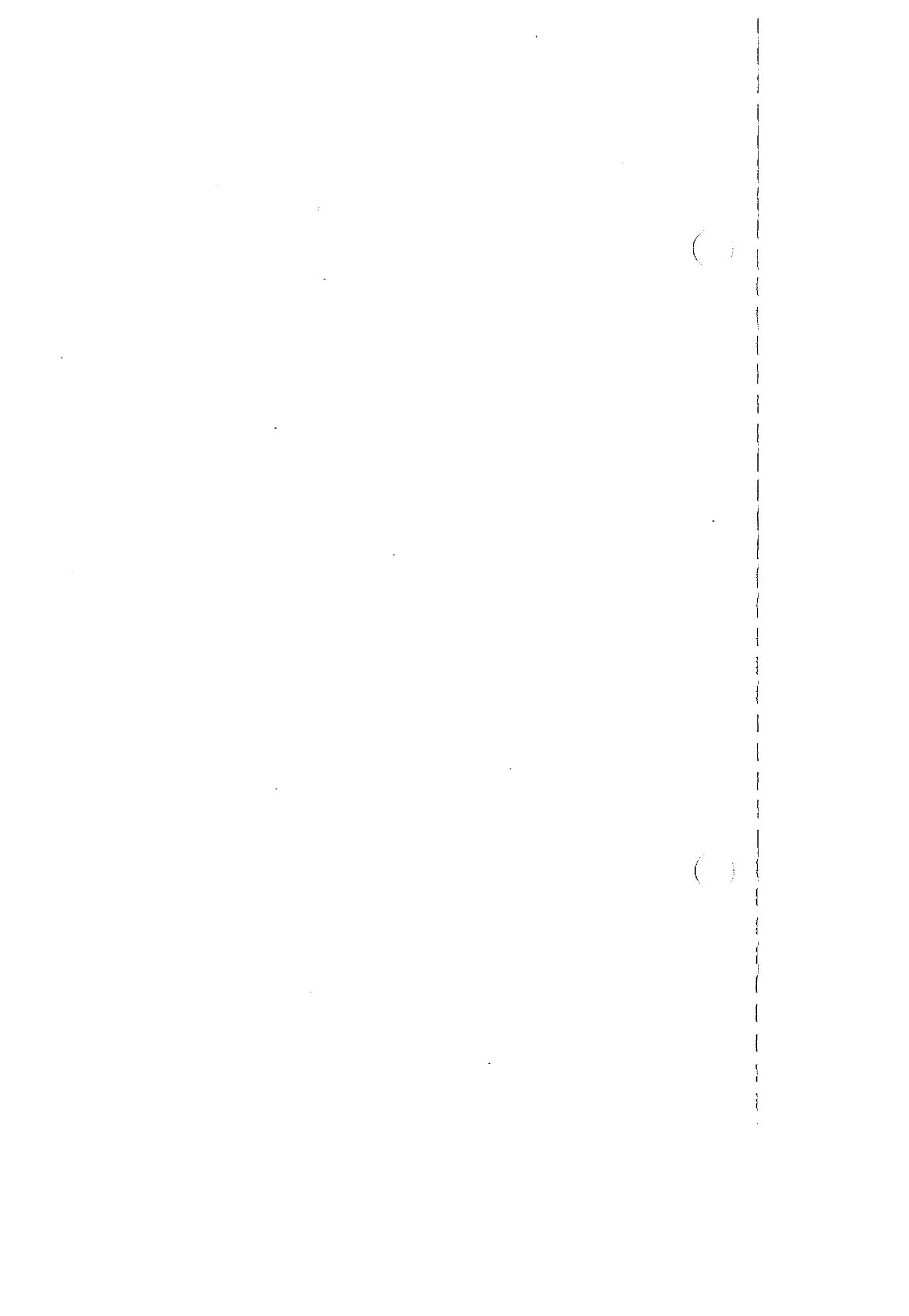
(33m) "Convalescent leave" means a resident's temporary release from an institution for mental diseases (IMD) to residency in a community setting, not more frequently than once a year and beginning on the fourth day after release, with the trial period of residence in the community lasting at least 4 days but not longer than 30 days or until the person is permanently discharged from the IMD, whichever occurs first.

(34) "Corrective shoes" means:

(a) Surgical straight case shoes for metatarsus adductus;

- (b) Any shoe attached to a brace, not including arch supports, for prosthesis;
- (c) Mismatched shoes involving a difference of a full size or more; or
- (d) Shoe modifications for a discrepancy in limb length or a rigid foot deformation.

Next page is numbered 7



(169) "SSI" means supplemental security income, the assistance program under Title XVI of the Social Security Act of 1935, as amended, and s. 49.177, Stats.

(170) "SSI-related person" means a person who meets the requirements of s. HSS 103.03 (1) (c).

(171) "Stepparent case" means an MA case consisting of a family in which a legal parent, a stepparent and a child under age 18 reside in the home.

(172) "Sterilization" means any medical procedure, treatment, or operation for the purpose of rendering an individual permanently incapable of reproducing.

(173) "Supervision," unless otherwise indicated in chs. HSS 101 to 108, means at least intermittent face-to-face contact between supervisor and assistant and a regular review of the assistant's work by the supervisor.

(174) "Tape billing service" means a provider or an entity under contract to a provider which provides magnetic tape billing for one or more providers.

(175) "Therapeutic/rehabilitative program" means a formal or structured medical or health care activity which is designed to contribute to the mental, physical or social development of its participants, and is certified or approved, or its sponsoring group is certified or approved, by a national standard-setting or certifying organization when such an organization exists.

(176) "Therapeutic visit" means a visit by a resident recipient to the home of relatives or friends for at least an overnight stay.

(177) "Three-generation case" means an MA case in which there are 3 generations living in the home and the second generation is a never-married minor parent.

(178) "Time out" means time away from positive reinforcement. It is a behavior modification technique in which, in response to undesired behavior, the resident is removed from the situation in which positive reinforcement is available.

(179) "Treatment unit" means, for purposes of reimbursement for therapy services, the time spent in direct treatment services to the individual patient. Time spent in activities not associated with the treatment of the individual patient such as preparation of the patient for treatment, preparation of the treatment area and preparation of the patient for return from the treatment area, otherwise known as "preparation time", shall also be reimbursable for up to 15 minutes per patient per treatment day. Time spent in other activities which are not associated with the treatment of the individual patient, including end of the day clean-up of the treatment area, paperwork, consultations, transportation time and training, is not reimbursable.

(180) "Unearned income" means income which is not the direct result of labor or services performed by the individual as an employe or as a self-employed person.

(181) "Usual and customary charge" means the provider's charge for providing the same service to persons not entitled to MA benefits.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86; cr. (9m), (22m), (75m), (85m), (114m), (122m), (129m) and (149m), am. (88), Register, February, 1988, No. 386, eff. 3-1-88; am. (73), (116) and (117), r. (74), Register April, 1988, No. 388, eff. 7-1-88; emerg. cr. (30m) and (33m) eff. 8-1-88; cr. (30m) and (33m), Register, December, 1988, No. 396, eff. 1-1-89; emerg. cr. (12m), eff. 3-9-89; emerg. am. (30m), eff. 6-1-89; cr. (12m), Register, December, 1989, No. 408, eff. 1-1-90; r. (33m), renum. (30m) to be (33m) and am. Register, February, 1990, No. 410, eff. 3-1-90.