



Managed Care Division

Alabama Medicaid Agency
Managed Care Division
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P R E S E N T S

An Overview of

Targeted Case Management

Targeted Case Management

- o Case Management services are services that assist eligible individuals in gaining access to needed medical, social, educational, and other services.
- o TCM services assist specific eligible recipients, or targeted individuals with access to other services.



Who is eligible for TCM services?

- o Targeted Case Management services may be provided to recipients who reside in their own home, the household of another, or in a supervised residential setting. TCM services are provided to eligible recipients in the following eight target groups:
 - o Mentally ill adults
 - o Intellectually disabled adults
 - o Disabled children
 - o Foster children
 - o Pregnant women
 - o Adult protective service individuals
 - o Technology Assisted (TA) Waiver for adults

TCM Provider Enrollment

- Interested Providers will submit a written request to the Project Development and Quality Improvement Unit within the Managed Care Division for enrollment. The request must contain the TCM target group to be covered along with the following:
 - The name, address, and phone number of the payee
 - (If different from the provider) the name and phone number of the contact person; and the tax ID number of the payee
 - Subcontract providers must have a contract with the primary provider. A copy of this contract will be submitted with the request to enroll.

Target Groups



- o The State of Alabama Medicaid Agency currently covers (8) target groups.



Target Groups...cont'd

- o Target Group 1

 - Mentally Ill Adults*

 - Consists of functionally limited individuals age 18 and over with multiple needs who require mental health case management.

- o Target Group 2

 - Intellectually Disabled Adults*

 - Consists of individuals who are 18 years of age or older with a diagnosis of intellectual disability, as defined by the American Association of Intellectually Disabled.

Target Groups...cont'd

- Target Group 3

 - Disabled Children*

 - Consists of individuals, age 0-21 considered to be disabled as defined in the following six subgroups:

 - Intellectually Disabled/related conditions
 - Seriously emotionally disturbed
 - Sensory impaired
 - Disabling health condition(s)
 - Developmentally disabled
 - Disabled Children - combination of two or more conditions that adversely affect development.

Target Groups...cont'd

- **Target Group 4**

 - Foster Children***

 - Consists of children age birth to 21 who receive preventive, protective family preservation or family reunification services from the State, or any of its agencies, as a result of State intervention or upon application by the child's parent(s), custodian(s), or guardian(s).

- **Target Group 5**

 - Pregnant Women***

 - Consists of Medicaid-eligible women of any age in need of maternity services.

Target Groups...cont'd

o Target Group 6

AIDS/HIV-positive individuals

Consists of Medicaid-eligible individuals of any age who have been diagnosed with AIDS or are HIV-positive as evidenced by laboratory findings.

o Target Group 7

Adult Protective Service Individuals

Consists of individuals 18 years of age or older who meet either of the following criteria:

- o At risk of abuse, neglect, or exploitation
- o At risk of institutionalization due to their inability or their caretaker's inability to provide the minimum sufficient level of care in the home.

Target Groups...cont'd

- o Target Group 8

 - Technology Assisted Waiver for Adults*

 - Consists of Medicaid-eligible individuals age 21 and older, who meet the eligibility criteria for the Technology Assisted (TA) Waiver for Adults.

Core Elements of Targeted Case Management

- o Case management services assist Medicaid-eligible recipients in gaining access to needed medical, social, educational, and other services. The case manager provides these services through telephone and face-to-face contact with recipients, and/or telephone and face-to-face contact with collaterals. Collaterals are the Medicaid-eligible client's immediate family and/or guardian, federal, state, or local service agencies (or agency representatives), and local businesses who work with the case manager to assist the recipient.

Core elements cont'd

- Targeted Case Management services consists of the following six core elements:
 - Needs assessment
 - Case planning
 - Service arrangements
 - Social support
 - Reassessment and follow-up
 - Monitoring



Definitions of core elements

○ Needs assessment

- A TCM provider performs a written comprehensive assessment of the recipient's assets, deficits, and needs.

○ Case planning

- TCM providers must develop a systematic, recipient-coordinated plan of care that lists the actions required to meet the identified needs of the recipient based on the needs assessment.

○ Service arrangement

- Through linkage and advocacy, the case manager coordinates contacts between the recipient and the appropriate person or agency. These contacts may be face to face, via phone calls, or electronic communication.

Definitions cont'd

- **Social Support**

- Through interviews with the recipient and significant others, the case manager determines whether the recipient possesses an adequate personal support system. If this personal support system is inadequate or non-existent, the case manager assists the recipients in expanding or establishing such a network through advocacy and linking the recipient with appropriate persons, support groups, or agencies.



Definitions cont'd

o Reassessment and Follow-up

- o Through interviews and observations, the case manager evaluates the recipient's progress toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the case manager contacts persons or agencies providing services to the recipients and reviews the results of these contacts, together with the changes in the recipient's needs shown in the reassessments, and revises the case plan if necessary.

Definitions cont'd

- o The case manager determines what services have been delivered and whether they adequately meet the needs of the recipient. The plan of care may require adjustments as a result of monitoring.

Prior Authorization

- o TCM procedure codes generally do not require prior authorization, except for target groups 3&4. TCM providers must obtain prior authorization from HPE to avoid duplicate payments.
- o NOTE: Direct all inquiries and requests relating to prior authorization for a specific target group to HPE' Provider Communication Unit at 1(800)688-7989.

Interagency Transfer

- If a recipient in a target group requiring prior authorization requests to change case managers from one agency to another, the TCM provider must complete a Request for Interagency transfer form. This form authorizes HPE to reassign the prior authorization number to the receiving agency providing the continuation of case management services.
 - Obtain the request for Interagency Transfer forms from Avis Stallworth, Avis.Stallworth@medicaid.alabama.gov; 334-353-4322, State of Alabama Medicaid Agency, 501 Dexter Avenue, P.O. Box 5624, Montgomery, Alabama 36103-5624.

Case Management Services Provider Records

- TCM providers must maintain complete and accurate medical, psychiatric and fiscal records that fully disclose the extent of the service. All documented entries must be legible, signed and dated by the person (identified by name and discipline) who is responsible for ordering, providing, or evaluating the service furnished. The author of each entry must be identified and must, either personally or electronically sign his or her entry.



Provider Records cont'd

- TCM records shall be retained for three years plus the current year to substantiate that the services billed to Medicaid were actually delivered to the Medicaid recipient and to substantiate the charges billed to Medicaid.
- Provider's records must contain the following information:
 - Recipient's Name
 - Dates of Service
 - Name of Provider Agency and person providing services
 - Nature, extent or units of services provided
 - Place of Service

Additional Information

- For additional information, refer to Chapter 106 Targeted Case Management in the Provider Manual.