

Rule No. 560-X-40-.01 Definitions

(1) Optional Targeted Case Management Services - those services to mentally ill adults (Target Group 1), intellectually disabled adults (Target Group 2), disabled children (Target Group 3), foster children (Target Group 4), pregnant women (Target Group 5), AIDS/HIV-positive individuals (Target Group 6), adult protective service individuals (Target Group 7), and individuals who meet the eligibility criteria for the HCBS Technology Assisted Waiver for Adults (TAW) (Target Group 8), paid for by the Alabama Medicaid Agency to assist Medicaid-eligible persons in gaining access to needed medical, social, educational, and other services.

(2) Case Management Services Target Group 1 - Mentally Ill Adults - the population to be served consists of functionally limited individuals age 18 and over with multiple needs who have been found to require mental health case management. Such persons have a DSM-~~III-R-V~~ diagnosis (other than ~~mental retardation~~intellectual disability -or substance abuse), impaired role functioning, and a documented need for access to the continuum of services offered through a Medicaid-enrolled mental health clinic services provider.

(3) Individual Case Managers for Mentally Ill Adults - professionals meeting the following qualifications:

- (a) At a minimum, Bachelor of Arts or a Bachelor of Science degree, preferably in a human services related field, or
- (b) A registered nurse, and
- (c) Training in case management curriculum provided or approved by the Department of Mental Health and the Alabama Medicaid Agency.

(4) Case Management Providers for Mentally Ill Adults - Regional Boards incorporated under Act 310 of the 1967 Alabama Acts and Comprehensive Community Mental Health Centers. Providers must be certified by and provide services through a contract with the Alabama Department of Mental Health.

(5) Case Management Services Target Group 2 - Intellectually Disabled Adults- the population to be served consists of individuals with a diagnosis of ~~mental retardation~~intellectual disability who are 18 years of age or older. Diagnosis must be determined and must include a primary determination of both intellectual and adaptive behaviors indicating the individual's primary problems are due to ~~mental retardation~~intellectual disability.

(6) Individual Case Managers for Intellectually Disabled Adults - professionals meeting the following qualifications:

- (a) At a minimum, Bachelor of Arts or Bachelor of Science degree, or
- (b) A registered nurse, and
- (c) Training in case management curriculum approved by the Alabama Medicaid Agency.

(7) Case Management Providers for Intellectually Disabled Adults - Regional Boards incorporated under Act 310 of the 1967 Alabama Acts who have demonstrated ability to provide targeted case management services directly, or the Alabama Department of Mental Health. Providers must be certified by the Department of Mental Health.

(8) Case Management Services Target Group 3 Disabled Children - the population to be served consists of individuals age 0-21 considered to be disabled as defined in the following six subgroups:

(a) Intellectually Disabled/related conditions: (Individuals in this subgroup will be age 0-17.)

1. Intellectually Disabled - diagnosis must be determined and must include a primary determination of both intellectual and adaptive behaviors indicating the individual's primary problems are due to intellectual disability.

2. Related conditions - individuals who have a severe chronic disability that meets all of the following

(i) It is attributable to:

(I) Cerebral palsy or epilepsy; or

(II) Any other condition, other than mental illness, found to be closely related to intellectual disability because this condition results in impairment of general intellectual functioning or adaptive behavior similar to that of intellectually disabled persons, and requires treatment or services similar to those required for these persons.

(ii) It is manifested before the person reaches age 22.

(iii) It is likely to continue indefinitely.

(iv) It results in substantial functional limitations in three or more of the following areas of major life activity.

(I) Self-care,

(II) Understanding and use of language,

(III) Learning,

(IV) Mobility,

(V) Self-direction,

(VI) Capacity for independent living.

(b) Seriously emotionally disturbed - In order to meet the definition of seriously emotionally disturbed, at least one criterion from Section 1. or 2. and two from Section 3. below must be met:

1. Mental Health Treatment History:

(i) Has undergone mental health treatment more intensive than outpatient care (emergency services, inpatient services, etc.);

(ii) Has experienced structured, supportive residential treatment, other than hospitalization, for a total of at least two months in their lifetime;

(iii) Has been assigned to a program of psychotropic medication; or

(iv) Has received mental health outpatient care for a period of at least six (6) months, or for more than twenty (20) sessions, or has been admitted for treatment on two or more occasions.

2. Indicators of Mental Health Treatment Needs:

(i) Family history of alcohol or drug abuse,

(ii) Family history of mental health treatment,

(iii) Failure to thrive in infancy or early development indicated in medical records,

(iv) Victim of child abuse, neglect or sexual abuse,

(v) Pervasive or extreme acts of aggression against self, others, or property (homicidal or suicidal gestures, fire setting, vandalism, theft, etc.), or

(vi) Runaway episode(s) of at least twenty-four (24) hours duration.

3. Current Functioning - problem areas of one year duration or substantial risk of over one year duration.

(i) Is not attending school (and has not graduated), is enrolled in a special education curriculum, or has poor grades;

(ii) Dysfunctional relationship with family and/or peers;

(iii) Requires help in basic, age-appropriate living skills;

(iv) Exhibits inappropriate social behavior; or

(v) Experiences serious discomfort from anxiety, depression, irrational fears, and concerns (indicated by serious eating or sleeping disorders, extreme sadness, social isolation, etc.).

(c) Sensory impaired:

1. Blind - One who after the best possible correction has no usable vision; therefore, must rely upon tactile and auditory senses to obtain information.

2. Partially sighted - One who has a visual acuity of 20/70 or less in the better eye with the best possible correction, has a peripheral field so restricted that it affects the child's ability to learn, or has a progressive loss of vision which may in the future affect the child's ability to learn.

3. Deaf - A hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification which adversely affects educational performance.

4. Blind multi- need - One who has a visual impairment (as defined in (c) 1. and (c) 2. above) and a concomitant handicapping condition.

5. Deaf multi- need - One who has a hearing impairment (as defined in (c) 3. above) and a concomitant handicapping condition.

6. Deaf-blind - One who has concomitant hearing and visual impairments, the combination of sensory impairments causing such severe communication and other developmental and educational problems that they cannot be properly accommodated in the educational programs by the Alabama School for the Blind or the Alabama School for the Deaf.

(d) Disabling health condition(s) - One which is severe, chronic and physical in nature, requiring extensive medical and habilitative/rehabilitative services:

1. Central nervous system dysraphic states, (such as spina bifida, hydranencephaly, encephalocele);

2. Cranio-facial anomalies, (such as cleft lip and palate, Apert's syndrome, Crouzon's syndrome);

3. Pulmonary conditions, (such as cystic fibrosis);

4. Neuro-muscular conditions, (such as cerebral palsy, arthrogryposis, juvenile rheumatoid arthritis);

5. Seizure disorders, (such as those poorly responsive to anticonvulsant therapy and those of mixed seizure type);

6. Hematologic/immunologic disorders, (such as hemophilia, sickle cell disease, aplastic anemia, agammaglobulinemia);

7. Heart conditions, (such as aortic coarctation, transposition of the great vessels);

8. Urologic conditions, (such as extrophy of bladder);
9. Gastrointestinal conditions, (such as Hirschsprung's Disease, omphalocele, gastroschisis);
10. Orthopedic problems, (such as clubfoot, scoliosis, fractures, poliomyelitis);
11. Metabolic disorders, (such as panhypopituitarism);
12. Neoplasms, (such as leukemia, retinoblastoma); and
13. Multisystem genetic disorders, (such as tuberous sclerosis, neurofibromatosis).

(e) Developmentally delayed -

1. A child age birth to three years who is experiencing developmental delays equal to or greater than 25 percent as measured by appropriate diagnostic instruments and procedures in one or more of the following areas:

- (i) Cognitive development;
- (ii) Physical development (including vision and hearing);
- (iii) Language and speech development;
- (iv) Psychosocial development; and
- (v) Self-help skills.

2. One who has a diagnosed physical or mental condition which has a high probability of resulting in a development delays.

(f) Multi- need - An individual who has a combination of two or more handicapping conditions as described above. Each condition, if considered separately, might not be severe enough to warrant case management, but a combination of the conditions would be of such severity to adversely affect development.

(9) Individual Case Managers for Disabled Children - Professionals meeting the following qualifications:

- (a) At a minimum, a Bachelor of Arts or a Bachelor of Science degree, or
- (b) A registered nurse, and
- (c) Training in a case management curriculum approved by the Alabama Medicaid

Agency.

(10) Case Management Providers for Disabled Children - Providers must meet the following criteria:

- (a) Demonstrated capacity to provide all core elements of case management:
 - 1. Assessment,
 - 2. Care/services plan development,
 - 3. Linking/coordination of services, and
 - 4. Reassessment/follow-up.

(b) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.

(c) Demonstrated experience with the target population.

(d) An administrative capacity to ensure quality of services in accordance with state and federal requirements.

(e) A financial management system that provides documentation of services and costs.

(f) Capacity to document and maintain individual case records in accordance with state and federal requirements.

(g) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.

(h) Demonstrated capacity to meet the case management service needs of the target population.

(11) Case Management Target Group 4 - Foster Children (Children in the Care, Custody or Control of the State or Receiving State Agency) - The population to be served consists of children age 0-21 who are receiving 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); or children age 0-21 who are in the care, custody or control of the State of Alabama, or any of its agencies due to:

(a) The judicial or legally sanctioned determination that the child must be protected by the State as dependent, delinquent, or a child in need of supervision as those terms are defined by the Alabama Juvenile Code, Title 12, Chapter 15, Code of Alabama 1975; or

(b) The judicial determination or statutorily authorized action by the State to protect the child from actual or potential abuse under the Alabama Juvenile Code, Title 26, Chapter 14, Code of Alabama 1975, or other statute; or

(c) The voluntary placement agreement, voluntary boarding house agreement, or an agreement for foster care, between the State and the child's parent(s), custodian(s), or guardian.

(12) Individual Case Managers for Foster Children - Professionals meeting the following qualifications:

(a) At a minimum, a Bachelor of Arts or a Bachelor of Science degree, preferably in a human services field, or

(b) A registered nurse, and

(c) Training in a case management curriculum approved by the Alabama Medicaid Agency.

(13) Case Management Providers for Foster Children - Providers must meet the following qualifications:

(a) Demonstrated capacity to provide all core elements of case management:

1. Assessment,

2. Care/services plan development,

3. Linking/coordination of services, and

4. Reassessment/follow-up.

(b) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.

(c) Demonstrated experience with the target population.

(d) An administrative capacity to ensure quality of services in accordance with state and federal requirements.

(e) A financial management system that provides documentation of services and costs.

(f) Capacity to document and maintain individual case records in accordance with state and federal requirements.

(g) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.

(h) Demonstrated capacity to meet the case management service needs of the target population.

(14) Case Management Target Group 5 - Pregnant Women - The population to be served consists of Medicaid-eligible women of any age in need of maternity services.

(15) Individual Case Managers for Pregnant Women - Professionals meeting the following qualifications:

(a) At a minimum, a Bachelor of Arts or a Bachelor of Science degree in social work from a school accredited by the Council on Social Work Education, or

(b) A registered nurse, and

(c) Training in a case management curriculum approved by the Alabama Medicaid Agency.

(16) Case Management Providers for Pregnant Women - Providers must meet the following qualifications:

(a) Demonstrated capacity to provide all core elements of case management:

1. Assessment,

2. Care/services plan development,

3. Linking/coordination of services, and

4. Reassessment/follow-up.

(b) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.

(c) Demonstrated experience with the target population.

(d) An administrative capacity to ensure quality of services in accordance with state and federal requirements.

(e) A financial management system that provides documentation of services and costs.

(f) Capacity to document and maintain individual case records in accordance with state and federal requirements.

(g) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.

(h) Demonstrated capacity to meet the case management service needs of the target population.

(17) Case Management Target Group 6 - AIDS/HIV-Positive Individuals - The population to be served consists of Medicaid-eligible individuals of any age who have been diagnosed as having AIDS or being HIV-positive as evidenced by laboratory findings.

(18) Individual Case Managers for AIDS/HIV-Positive Individuals - Professionals meeting the following qualifications:

(a) At a minimum, a Bachelor of Arts or a Bachelor of Science degree in social work from a school accredited by the Council on Social Work Education, or
(b) A registered nurse, and
(c) Training in a case management curriculum approved by the Alabama Medicaid Agency.

(19) Case Management Providers for AIDS/HIV-Positive Individuals - Providers must meet the following qualifications:

- (a) Demonstrated capacity to provide all core elements of case management:
1. Assessment,
 2. Care/services plan development,
 3. Linking/coordination of services, and
 4. Reassessment/follow-up.
- (b) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.
- (c) Demonstrated experience with the target population.
- (d) An administrative capacity to ensure quality of services in accordance with state and federal requirements.
- (e) A financial management system that provides documentation of services and costs.
- (f) Capacity to document and maintain individual case records in accordance with state and federal requirements.
- (g) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.
- (h) Demonstrated capacity to meet the case management service needs of the target population.

(20) Case Management Target Group 7 - Adult Protective Service Individuals - The population to be served consists of individuals 18 years of age or older who are:

- (a) At risk of abuse, neglect, or exploitation as defined in Section 38-9-2 Code of Alabama, 1975; or
(b) At risk of institutionalization due to his/her inability or his/her caretaker's inability to provide the minimum sufficient level of care in his/her own home.

(21) Individual Case Managers for Adult Protective Service Individuals - Professionals meeting the following qualifications:

- (a) At a minimum, a Bachelor of Science degree, preferably in a human services field, or
(b) Eligible for state social work licensure or exempt from licensure, and
(c) Training in a case management curriculum approved by the Alabama Medicaid Agency.

(22) Case Management Providers for Adult Protective Service Individuals - Providers must meet the following qualifications:

- (a) Demonstrated capacity to provide all core elements of case management:
1. Assessment,

2. Care/services plan development,
3. Linking/coordination of services, and
4. Reassessment/follow-up.

(b) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.

(c) Demonstrated experience of at least ten years with the target population in investigating abuse, neglect, and/or exploitation in domestic settings and follow-up services to victims of abuse, neglect, and/or exploitation.

(d) Authorized pursuant to Code of Alabama, 1975, Section 38-9-1 et seq to arrange for protective services for adults.

(e) An administrative capacity to ensure quality of services in accordance with state and federal requirements.

(f) A financial management system that provides documentation of services and costs.

(g) Capacity to document and maintain individual case records in accordance with state and federal requirements.

(h) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.

(i) Demonstrated capacity to meet the case management service needs of the target population.

(23) Case Management Services Target Group 8 – Individuals who meet the eligibility criteria for the HCBS Technology Assisted Waiver for Adults.

(24) Individual Case Managers for individuals who meet the eligibility criteria for the HCBS Technology Assisted Waiver for Adults – professionals meeting the following qualifications:

(a) At a minimum, Bachelor of Arts or Bachelor of Science degree, or

(b) A registered nurse, and

(c) Training in case management curriculum approved by the Alabama Medicaid Agency.

(25) Case Management Providers for individuals who meet the eligibility criteria for the HCBS Technology Assisted Waiver for Adults – Providers must meet the following criteria:

(a) Demonstrated capacity to provide all core elements of case management:

1. Assessment,

2. Care/services plan development,

3. Linking/coordination of services, and

4. Reassessment/follow up.

(b) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.

(c) Demonstrated experience with the target population.

(d) An administrative capacity to ensure quality of services in accordance with state and federal requirements.

(e) A financial management system that provides documentation of services and costs.

(f) Capacity to document and maintain individual case records in accordance with state and federal requirements.

(g) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.

(h) Demonstrated capacity to meet the case management service needs of the target population.

(26) Discriminatory Practices - Any practice prohibited by Title VI of the Civil Rights Act of 1964 (Federal law that prohibits discrimination in supplying services to recipients on the basis of race, color, creed, national origin, age, or sex) or Section 504 of the Rehabilitation Act of 1973 (the Federal law that prohibits discrimination in the supplying of services to recipients on the basis of a handicap). All providers must comply with these requirements to prevent discriminatory practices.

(27) Third Party - any individual, entity or program other than the recipient or his/her responsible party that is, or may be, liable to pay all or part of the cost of injury, disease, or disability of an applicant or recipient of Medicaid.

(28) Fiscal Agent - an agent under contract with Medicaid to receive and adjudicate Medicaid claims.

(29) Medicaid - The Alabama Medicaid Agency.

(30) DMH- The Alabama Department of Mental Health.

(31) CMSP - Case management service provider.

(32) Noninstitutional Provider Agreement - the contract between a CMSP and Medicaid that specifies conditions of participation, funding arrangements, and operating mechanisms.

(33) Individual Plan of Care for All Target Groups - a document developed by the case manager listing the client's needs for service and assistance consistent with Rule No. 560-X-40-.03.

(34) Collateral - the case manager working with the Medicaid-eligible client, immediate family and/or guardians; Federal, State, or local service agencies (or agency representatives); and local businesses.

(35) Medicaid-eligible - persons eligible for Medicaid services under the Alabama State Plan as evidenced by a current, valid, Medicaid card.

(36) Regional 310 Boards - mental health boards established pursuant to Sections 22-55-1 through 22-51-14, Alabama Code, 1975 (Act 310,1967).

(37) Total Care Environments - ICF/MR facilities, ICF/MR 15-bed or less nursing facilities, residential programs, and hospitals.

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