

State Plan under Title XIX of the Social Security Act
State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES
Targeted Group 1 Mentally Ill Adults

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):
Mentally Ill Adults

The population to be served consists of functionally limited individuals 18 years of age or older with multiple needs who have been assessed by a qualified professional and have been found to require mental health case management. Such persons have a diagnosis included in the ICD-10 as appropriate to date of service (other than developmental/intellectual disabilities, autism spectrum disorder, organic mental disorder, traumatic brain injury, or substance abuse), impaired role functioning, and a documented lack of capacity for independently accessing, and sustaining involvement with needed services.

Medicaid recipients may receive TCM services in more than one target group, or case management services from another program if the Agency determines this would not present a duplication of services.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions. (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):
X Entire State
___ Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))
___ Services are provided in accordance with §1902(a)(10)(B) of the Act.
X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:
 - taking the individual’s history;

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- identifying the individual's needs and completing related documentation; and
- gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and
- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and

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- changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.
(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

1. Target Group 1: Mentally Ill Adults

The case management provider will be either Regional Boards incorporated under Act 310 of the 1967 Alabama Act who have demonstrated ability to provide targeted case management services directly, or the Alabama Department of Mental Health (AMDH). Providers. Providers must be certified by the Alabama Department of Mental Health and provide services through a contract with ADMH. Act 310 provides for the formation of public corporation to contract with the Alabama Department of Mental Health in constructing facilities and operating programs for mental health services. A 310 Board has the authority to directly provide: planning, studies and services for mental illness.

Individual case managers must meet the following qualifications:

- (A) At a minimum, a 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 a case management curriculum provided or approved by the Department of Mental Health and the Alabama Medicaid Agency.

Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

- 1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.

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2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

X Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services:

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

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Targeted Group 1 Mentally Ill Adults

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 2 Intellectually Disabled Adults

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):
Intellectually Disabled Adults

The population to be served consists of individuals 18 years of age or older with a diagnosis of mental retardation, as defined by the American Association of Mental Retardation (formerly AAMD).

The individual's diagnosis must be determined by a Qualified Mental Retardation Professional (QMRP) and must include a primary determination of both intellectual and adaptive behaviors indicating the individual's primary problems are due to an intellectual disability. Such persons may have other or secondary disabling conditions.

A person in this target group may reside in his/her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, ICFs/MR, ICFs/MR 15 bed or less, hospitals, and residential programs. Targeted case management services will not be provided to clients receiving case management through a waiver.

X Target group includes individuals transitioning to a community setting. Case management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions. (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
 Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

- Services are provided in accordance with §1902(a)(10)(B) of the Act.
X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

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- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:

- taking client history;
- identifying the individual's needs and completing related documentation; and
- gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and
- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals

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Targeted Group 2 Intellectually Disabled Adults

and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:

- services are being furnished in accordance with the individual's care plan;
- services in the care plan are adequate; and
- changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs. (42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

1. Target Group 2: Intellectually Disabled Adults

The Alabama Department of Mental Health (ADMH) case management provider will be Regional Boards incorporated under Act 310 of the 1967 Alabama Acts who have demonstrated ability to provide targeted case management services directly, by ADMH employees, or other contractors of ADMH. Act 310 provides for the formation of public corporation to contract with the Alabama Department of Mental Health in constructing facilities and operating programs for mental health services. A 310 Board has the authority to directly provide: planning, studies and services for mental illness, mental retardation, and substance abuse populations.

Individual case managers must meet 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 provided or approved by the Department of Mental Health and the Alabama Medicaid Agency.

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 2 Intellectually Disabled Adults

Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

X Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

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Targeted Group 2 Intellectually Disabled Adults

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other

services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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Targeted Group 3 Disabled Children

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

Disabled Children

The population to be served consists of individuals age 0-20 or until the individual reaches age 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 mental retardation.
- (2) Related conditions - individuals who have a severe chronic disability that meets all of the following conditions:
- (a) 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.
 - (b) It is manifested before the person reaches age 22.
 - (c) It is likely to continue indefinitely.
 - (d) 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:
- I. In order to meet the definition of seriously emotionally disturbed, the recipient must meet the following criteria for (I & II) *or* (I & III): Diagnosis:
 - a. Must have a DSM/ICD diagnosis. A primary diagnosis of a "Z" code, substance use, autism spectrum disorder, developmental/intellectual disability, organic mental disorder, or traumatic brain injury does not meet the criteria.
 - II. Jeopardy of being Separated from Family (Out-of-Home Placement):
 - a. Still residing in the community but in jeopardy of being separated from family as the result of a serious emotional disturbance.
 - III. Functional Impairments/Symptoms/Risk of Separation – Must have a. **or** b. **or** c. as the result of a serious emotional disturbance:
 - a. Functional Impairment – Must have substantial impairment in one of the following capacities to function (corresponding to expected developmental level):
 - i. Autonomous Functioning: Performance of the age appropriate activities of daily living, e.g., personal hygiene, grooming, mobility;
 - ii. Functioning in the community – e.g., relationships with neighbors, involvement in recreational activities;
 - iii. Functioning in the Family or Family Equivalent – e.g., relationships with parents/parent surrogates, siblings, relatives;
 - iv. Functioning in School/work – e.g., relationships with peers/teachers/co-workers, adequate completion of school work.
 - b. Symptoms – Must have one of the following:
 - i. Features associated with Psychotic Disorders
 - ii. Suicidal or Homicidal Gesture or Ideation
 - c. Risk of Separation:

Without treatment, there is imminent risk of separation from the family/family equivalent or placement in a more restrictive treatment setting.

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Targeted Group 3 Disabled Children

- (b) Has experienced structured, supportive residential treatment, other than hospitalization, for a total of at least two months in their lifetime;
- (c) Has been assigned to a program of psychotropic medication; or
- (d) 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:
 - (a) Family history of alcohol or drug abuse,
 - (b) Family history of mental health treatment,
 - (c) Failure to thrive in infancy or early development indicated in medical records,
 - (d) Victim of child abuse, neglect or sexual abuse,
 - (e) Pervasive or extreme acts of aggression against self, others, or property (homicidal or suicidal gestures, fire setting, vandalism, theft, etc.), or
 - (f) 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.
 - (a) Is not attending school (and has not graduated), is enrolled in a special education curriculum, or has poor grades;
 - (b) Dysfunctional relationship with family and/or peers;
 - (c) Requires help in basic, age-appropriate living skills;
 - (d) Exhibits inappropriate social behavior; or
 - (e) 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

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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 disabling condition.

(5) Deaf multi-need - One who has a hearing impairment (as defined in (C)(3) above) and a concomitant disabling 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 Hirschprung's Disease, omphalocele, gastroschisis);

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- (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).
 - (14) Autism Spectrum Disorder for a child or youth ages 0 to 21.
- (E) Developmentally delayed -
- (1) A child age birth to three years who is experiencing developmental delays equal to greater than 25 percent as measured by appropriate diagnostic instruments and procedures in one or more of the following areas:
 - (a) Cognitive development;
 - (b) Physical development (including vision and hearing);
 - (c) Language and speech development;
 - (d) Psychosocial development; and
 - (e) Self-help skills.
 - (2) One who has a diagnosed physical or mental condition which has a high probability of resulting in a developmental delay.
- (F) Multi-need - An individual who has a combination of two or more disabling conditions. 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.

A person in this target group may reside in his/her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities and, hospitals. Medicaid recipients may receive TCM services in more than one target group, or case management services from another program if the Agency determines this would not present a duplication of services.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000). Also excluded are individuals receiving services in an Institution for Mental Disease (IMD).

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
- ___ Only in the following geographic areas:

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TARGETED CASE MANAGEMENT SERVICES

Targeted Group 3 Disabled Children

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

 Services are provided in accordance with §1902(a)(10)(B) of the Act.

 X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:
 - taking client history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including

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activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and

❖ Monitoring and follow-up activities:

- activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan.
 Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

___ Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 3: Disabled Children

Case management providers must be certified as a Medicaid provider meeting 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.

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- (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 insure 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.

Individual case managers must meet the following minimum qualifications:

- (A) 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.

The Alabama Department of Mental Health (ADMH) case management provider for Disabled Children (Target 3, Subgroup B - SED) must be Regional Boards incorporated under Act 310 of Comprehensive Community Health Centers who have demonstrated the ability to provide targeted case management directly, or the ADMH. TCM providers for Disabled Children through ADMH must be certified and provide services through a contract with "ADMH". Act 310 provides for the formation of for the formation of public corporation to contract with ADMH in constructing facilities and operating programs for mental health services. A 310 Board has the authority to directly provide: planning, studies and services for mental illness.

The ADMH case management provider for Disabled Children (Target Group 3, Subgroup A- Intellectually Disabled and Target 3, Subgroup D14- Children with Autism Spectrum Disorder) must be Regional Boards incorporated under Act 310 of the 1967 Alabama Act who have demonstrated ability provide targeted case management services directly, be ADMH employees, or other contractors of ADMH. Act 310 provides for the formation of public corporation to contract with ADMH in constructing facilities and operating programs for mental health services. A 310 Board has the authority to directly provide: planning, studies and services for mental illness.

Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

_____ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.

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- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

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Targeted Group 3 Disabled Children

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 4 Foster Children

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):
Foster Children (Children in the Care, Custody, or Control of the State or Receiving State Agencies). The population to be served consists of children age 0-20 or until the individual reaches age 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 0-20 or until the individual reaches age 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 home agreement, or an agreement for foster care, between the State and the child's parent(s), custodian(s), or guardian.

A person in this target group may reside in his/her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, hospitals, and residential programs. Targeted case management services will not be provided to clients receiving case management through a waiver.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
- Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

- Services are provided in accordance with §1902(a)(10)(B) of the Act.
- X Services are not comparable in amount duration and scope (§1915(g)(1)).

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 4 Foster Children

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking client history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and

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- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 4: Foster Children

Case management providers must be certified as a Medicaid provider meeting 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 insure quality of services in accordance with state and federal requirements.

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- (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.

Individual case managers must meet the following minimum qualifications:

- (A) 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.

Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

_____ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 4 Foster Children

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 5 Pregnant Women

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

The population to be served consists of Medicaid-eligible women in need of maternity and perinatal services.

A person in this target group may reside in her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, hospitals, and residential programs. Targeted case management services will not be provided to clients receiving case management through a waiver.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
 Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

- Services are provided in accordance with §1902(a)(10)(B) of the Act.
X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Case management services are those services which will assist Medicaid-eligible pregnant women of any age in need of maternity services in gaining access to needed medical, social, educational, and other services.

Case management services are those services which will assist program eligible perinatal women in gaining access to needed medical, social, educational and other services. Perinatal is defined as the period inclusive of pregnancy through two years postpartum, to the child's second birthday. Services to the parent (primary caregiver) could be available during this same two year period following the birth of the child.

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking client history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 5 Pregnant Women

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of three months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and
- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

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Targeted Group 5 Pregnant Women

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

___Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Case management providers must be certified as a Medicaid provider meeting 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.
- (I) Credentialed by appropriate certifying agency(ies).

Individual case managers must meet the following minimum qualifications:

- (A) 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 and/or nurse home visiting curriculum approved by the Alabama Medicaid Agency.

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 5 Pregnant Women

Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

_____ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The

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need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 6 AIDS/HIV-Positive Individuals

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):
AIDS/HIV-Positive Individuals

The population to be served consists of Medicaid-eligible individuals who have been diagnosed as having AIDS or being HIV-positive as evidenced by laboratory findings.

A person in this target group may reside in his/her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, hospitals, or residential programs. Targeted case management services will not be provided to clients receiving case management through a waiver.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
- Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

- Services are provided in accordance with §1902(a)(10)(B) of the Act.
- X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Case management services are those services which will assist Medicaid-eligible individuals of any age who have been diagnosed as having AIDS or being HIV-positive as evidenced by laboratory findings in gaining access to needed medical, social, educational, and other services.

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking client history;
 - identifying the individual’s needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

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Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and
- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

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State Plan under Title XIX of the Social Security ActState/Territory: Alabama**TARGETED CASE MANAGEMENT SERVICES****Targeted Group 6 AIDS/HIV-Positive Individuals**

Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 6: AIDS/HIV-positive individuals

Case management providers must be certified as a Medicaid provider meeting 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 insure 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.

Individual case managers must meet the following minimum qualifications:

- (A) 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.

State Plan under Title XIX of the Social Security ActState/Territory: Alabama**TARGETED CASE MANAGEMENT SERVICES****Targeted Group 6 AIDS/HIV-Positive Individuals**Freedom of choice (42 CFR 441.18(a)(1):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b):

_____ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

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State Plan under Title XIX of the Social Security Act

State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES

Targeted Group 6 AIDS/HIV-Positive Individuals

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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State Plan under Title XIX of the Social Security Act
State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES
Targeted Group 7 Adult Protective Service

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):
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 mentally incapable of adequately caring for himself or herself and his or her interests without serious consequences to himself or herself or others, or who, because of physical or mental impairment, is unable to protect himself or herself from abuse, neglect, exploitation, sexual abuse, or emotional abuse by others, and who has no guardian, relative, or other appropriate personable, willing, and available to assume the kind and degree of protection and supervision required under the circumstances

(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.

A person in one of these targeted groups may reside in his/her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, hospitals, residential programs. Targeted case management services may be provided to clients receiving case management through a waiver so long as both case managers are performing different types of activities and functions based upon the case managers' distinct focus. The case manager's documentation must provide a clear distinction between waiver case management and targeted case management activities.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
- Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

- Services are provided in accordance with §1902(a)(10)(B) of the Act.
- X Services are not comparable in amount duration and scope (§1915(g)(1)).

**State Plan under Title XIX of the Social Security Act
State/Territory: Alabama**

**TARGETED CASE MANAGEMENT SERVICES
Targeted Group 7 Adult Protective Service**

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking client history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 7 Adult Protective Service

- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

___Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 7: Adult Protective Service Individuals

Individual case managers must meet the following minimum qualifications:

- (A) A Bachelor of Arts or a Bachelor of Science Degree, preferably in a human services field, and
- (B) Eligible for state social work licensure or exempt from licensure.
- (C) Training in a case management curriculum approved by the Alabama Medicaid Agency.

Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

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**TARGETED CASE MANAGEMENT SERVICES
Targeted Group 7 Adult Protective Service**

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

____ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management

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activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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TARGETED CASE MANAGEMENT SERVICES

Targeted Group 8 Individuals who meet the eligibility criteria for the HCBS Technology Assisted (TA) Waiver for Adults

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

Individuals who meet the eligibility criteria for the HCBS Technology Assisted (TA) Waiver for Adults.

The target group for the TA waiver is individuals who are 21 years of age or older with complex medical conditions. These individuals are ventilator-dependent or have a tracheostomy.

A person in this target group may reside in his/her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, hospitals, and residential programs. Targeted case management services will not be provided to clients receiving case management through a waiver.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- X Entire State
- Only in the following geographic areas

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

- Services are provided in accordance with §1902(a)(10)(B) of the Act.
- X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking client history;
 - identifying the individual’s needs and completing related documentation; and

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TARGETED CASE MANAGEMENT SERVICES

**Targeted Group 8 Individuals who meet the eligibility criteria for the HCBS Technology Assisted
(TA) Waiver for Adults**

- gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up – The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contracts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and
- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and

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TARGETED CASE MANAGEMENT SERVICES

**Targeted Group 8 Individuals who meet the eligibility criteria for the HCBS Technology Assisted
(TA) Waiver for Adults**

- changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 8: Individuals who meet the eligibility criteria for the HCBS Technology Assisted Waiver for Adults.

Targeted case management providers for the individuals who meet the eligibility criteria for the HCBS Technology Assisted Waiver for Adults, must demonstrate experience with the target population in completing medical psychosocial assessments and case plans, coordination of services, provision of referral and follow-up services and be employed in a non-institutional health care setting and must be certified as a Medicaid provider meeting 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 case management 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.

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TARGETED CASE MANAGEMENT SERVICES

**Targeted Group 8 Individuals who meet the eligibility criteria for the HCBS Technology Assisted
(TA) Waiver for Adults**

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

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

Individual case managers must meet the following minimum qualifications:

(A) A Bachelor of Arts or Bachelor of Science, or

(B) A Registered Nurse, and

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

Freedom of choice (42 CFR 441.18(a)(1):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b):

___ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services:

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

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State/Territory: Alabama**

TARGETED CASE MANAGEMENT SERVICES

**Targeted Group 8 Individuals who meet the eligibility criteria for the HCBS Technology Assisted
(TA) Waiver for Adults**

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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State Plan under Title XIX of the Social Security Act
State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES
Targeted Group 9 Individuals who meet the eligibility criteria for
Substance Use Disorders

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

The target group to be served consists of Medicaid-eligible individuals who have a diagnosed substance use disorder or substance induced disorder, in accordance with criteria set forth by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association, and who meet the following additional criteria.

- (1) Individuals who:
 - (a) Have been unable to independently maintain a sustained period of recovery after repeated treatment episodes; or
 - (b) Have little or no access to community resources necessary to support sustained recovery efforts; or
 - (c) Have co-morbid conditions, as mental illness, emotional disorders, intellectual disabilities, medical conditions, sensory impairments, or mobility impairments; or
 - (d) Have significant responsibility for the care of dependents, as well as themselves.

- (2) Individuals who are residing in a supervised residential setting, transitioning to an approved community setting following an institutional stay, residing in his/her own home, or the household of another are eligible for Target Group 9.

The target group does not include individuals who are inmates of public institutions. Also excluded are individuals receiving services in an Institution for Mental Disease (IMD).

Medicaid recipients may receive TCM services in more than one target group or case management services from another program if the Agency determines this would not present a duplication of services.

Areas of State in which services will be provided (§1915(g)(1) of the Act):

- Entire State
- Only in the following geographic areas

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State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES
Targeted Group 9 Individuals who meet the eligibility criteria for
Substance Use Disorders

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

 Services are provided in accordance with §1902(a)(10)(B) of the Act.

 X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking individuals history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;
- Reassessment/follow-up – The case manager shall evaluate through interviews and observations the progress of the individuals toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the individuals will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.
- ❖ Development (and periodic revision) of a specific case plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;

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State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES
Targeted Group 9 Individuals who meet the eligibility criteria for
Substance Use Disorders

- includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the case plan; and
- ❖ Monitoring and follow-up activities:
 - Ongoing activities and contacts that are necessary to ensure the case plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's case plan;
 - services in the case plan are adequate; and
 - changes in the needs or status of the individual are reflected in the case plan. Monitoring and follow-up activities include making necessary adjustments in the case plan and service arrangements with providers.

___ Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.
(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 9: Individuals who meet the eligibility criteria for Substance Use Disorders.

Case management providers for the target group must be certified by and provide services through a contract with the Alabama Department of Mental Health and have the following qualifications:

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**TARGETED CASE MANAGEMENT SERVICES
Targeted Group 9 Individuals who meet the eligibility criteria for
Substance Use Disorders**

- (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) Documented work experience with the target population.
- (D) An administrative capacity to insure quality of services in accordance with state and federal requirements.
- (E) A functional 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) of the Social Security Act, freedom of choice of provider.
- (H) Demonstrated capacity to meet the case management service needs of the target population.

Individual case managers must meet the following minimum qualifications:

- (A) A Bachelor of Arts or Bachelor of Science, or
- (B) A Registered Nurse, and
- (C) Training in a case management curriculum approved by the Alabama Medicaid Agency and the Alabama Department of Mental Health.

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TARGETED CASE MANAGEMENT SERVICES
Targeted Group 9 Individuals who meet the eligibility criteria for
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Freedom of Choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

3. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
4. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

X Target group consists of eligible individuals with substance use disorders. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with substance use disorders receive needed services:

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the case plan have been achieved; (v) Whether the individual has declined services in the case plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

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**TARGETED CASE MANAGEMENT SERVICES
Targeted Group 9 Individuals who meet the eligibility criteria for
Substance Use Disorders**

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

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**State Plan under Title XIX of the Social Security Act
State/Territory: Alabama**

TARGETED CASE MANAGEMENT SERVICES

Targeted Group 10 Disabled Children and Severely Mentally Ill Adults High Intensity Care Coordination

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

- A. The population to be served consists of individuals age 0-20 or until the individual reaches age 21 considered to be disabled as defined in the following two subgroups and who require a multi-disciplinary service team from more than one child-serving agency or who have one or more co-occurring diagnoses:
- (1) Autism Spectrum Disorder (ASD)
 - a. children/youth requiring a multi-disciplinary service team from more than one child-serving agency or who have one or more co-occurring diagnoses.
 - (2) Seriously Emotionally Disturbed (SED); and
- In order to meet the definition of seriously emotionally disturbed, the recipient must meet the following criteria for (I & II) *or* (I & III):
- I. Diagnosis:
 - a. Must have a DSM/ICD diagnosis. A primary diagnosis of a “Z” code, substance use, autism spectrum disorder, developmental/intellectual disability, organic mental disorder, or traumatic brain injury does not meet the criteria.
 - II. Jeopardy of being Separated from Family (Out-of-Home Placement):
 - a. Still residing in the community but in jeopardy of being separated from family as the result of a serious emotional disturbance.
 - III. Functional Impairments/Symptoms/Risk of Separation – Must have a. or b. or c. as the result of a serious emotional disturbance:
 - a. Functional Impairment – Must have substantial impairment in one of the following capacities to function (corresponding to expected developmental level):
 - i. Autonomous Functioning: Performance of the age appropriate activities of daily living, e.g., personal hygiene, grooming, mobility;
 - ii. Functioning in the community – e.g., relationships with neighbors, involvement in recreational activities;
 - iii. Functioning in the Family or Family Equivalent – e.g., relationships with parents/parent surrogates, siblings, relatives;
 - iv. Functioning in School/work – e.g., relationships with peers/teachers/co-workers, adequate completion of school work.
 - b. Symptoms – Must have one of the following:
 - i. Features associated with Psychotic Disorders
 - ii. Suicidal or Homicidal Gesture or Ideation
 - c. Risk of Separation:
 - i. Without treatment, there is imminent risk of separation from the family/family equivalent or placement in a more restrictive treatment setting.
- B. The population to be served consists of individuals age 18 and older considered to be disabled as defined in the following subgroup and who require a multi-disciplinary service team from more than one agency or who have one or more co-occurring diagnosis:
- a. Severely Mentally Ill (SMI):

The population to be served consists of functionally limited individuals 18 years of age or older with multiple needs who have been assessed by a qualified professional and have been found to require mental health case management. Such persons have a diagnosis included in the ICD-10 as appropriate to date of service (other than primary developmental/intellectual disabilities, autism spectrum disorder, organic mental disorder, traumatic brain injury, or substance abuse), impaired role functioning, and a documented lack of capacity for independently accessing, and sustaining involvement with needed services.

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Medicaid recipients may receive TCM services in more than one target group, or case management services from another program if the Agency determines this would not present a duplication of services.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000). Also excluded are individuals receiving services in an Institution for Mental Disease (IMD).

Areas of State in which services will be provided (§1915(g)(1) of the Act):

X Entire State
___ Only in the following geographic areas:

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

___ Services are provided in accordance with §1902(a)(10)(B) of the Act.
X Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169): Targeted Case Management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:
 - taking client history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of six months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;

Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including

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activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and

- ❖ Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

X Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs. (42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Target Group 10: Autism Spectrum Disorder (ASD) Children, Serious Emotional Disturbance (SED) Children, and Severely Mentally Ill (SMI) Adults.

Case management providers must be certified as a Medicaid provider meeting 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 insure 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.

Individual case managers must meet the following minimum qualifications:

- (A) 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.

The Alabama Department of Mental Health (ADMH) case management provider (for Target 10, ASD) must be Regional Boards incorporated under Act 310 of the 1967 Alabama Act who have demonstrated ability to provide targeted case management services directly, be ADMH employees, or other contractors of ADMH. Providers must be certified by the Alabama Department of Mental Health and provide services through a contract with ADMH. Act 310 provides for the formation of public corporation to contract with the Alabama Department of Mental Health in constructing facilities and operating programs for mental health services. A 310 Board has the authority to directly provide: planning, studies and services for mental illness.

The ADMH case management provider (for Target 10, SED and SMI) must be either Regional Boards incorporated under Act 310 of the 1967 Alabama Act who have demonstrated ability to provide targeted case management services directly, or the Alabama Department of Mental Health. Providers must be certified by the Alabama Department of Mental Health and provide services through a contract with ADMH. Act 310 provides for the formation of public corporation to contract with the Alabama Department of Mental Health in constructing facilities and operating programs for mental health services. A 310 Board has the authority to directly provide: planning, studies and services for mental illness.

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Freedom of choice (42 CFR 441.18(a)(1)):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
 - Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c)).

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