

	STATE OFFICE for SERVICES to CHILDREN and FAMILIES CLIENT SERVICES MANUAL I ISSUED BY: Field Operations EFFECTIVE DATE: January 2, 1996	NUMBER: I-E.6.3
		SECTION: E. Substitute Care
		SUBSECTION: 6. Funding Eligibility
SUBJECT: 3. Targeted Case Management		

TARGETED CASE MANAGEMENT SERVICES

413-100-720 Targeted case management services in the Oregon Plan for children in substitute care include:

(1) Assessment. After a client has been placed in substitute care and is determined in need of targeted case management services, the case manager assesses the specific areas of concern, family strengths and resources, community resources and extended family resources available to resolve those identified issues. At assessment, the case manager makes preliminary decisions about needed medical, social, educational or other services and the level of agency intervention;

(2) Case Planning. The case manager develops a case plan, in conjunction with the client and family, to identify the goals and objectives which are designed to resolve the issues of concern identified through the assessment process. Case planning includes setting of activities to be completed by the case manager, the family and the clients. This activity will include accessing medical, social, educational and other services to meet the client's needs;

(3) Case Plan Implementation. The case manager will link the client and the family with appropriate agencies and medical, social, educational and other services through calling or visiting these resources. The case manager will facilitate implementation of agreed-upon services through assisting the client and family to access them and through assuring that clients and providers fully understand how these services support the agreed-upon case plan;

(4) Case Plan Coordination. After these linkages have been completed, the case manager will ascertain, on an ongoing basis, whether or not the medical, social, educational or other services have been accessed as agreed, and the level of involvement of the client and family. Coordination activities include, but are not limited to, personal, mail, and telephone contacts with providers, as well as meetings with the client and family to assure that the services are being provided and used as agreed;

(5) Case Plan Reassessment. The case manager will determine whether or not medical, social, educational, or other services continue to be adequate to meet the goals and objectives identified in the case plan. Reassessment decisions include those to continue, change or terminate services. This may include assisting clients to access different medical, social, educational, or other services beyond those already provided. Reassessment activities include, but are not limited to, staffings and mail, personal and telephone contacts with involved parties.

Statutory Authority: HB2004

Stats. Implemented: HB2004

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TARGETED CASE MANAGEMENT PROVIDERS

413-100-730 Targeted case management providers are organizations or individuals who are certified as meeting the following criteria:

(1) A minimum of three years experience of successful work with children and families, involving a demonstrated capacity to provide all core elements of case management including assessment, case planning, case plan implementation, case plan coordination and case plan reassessment;

(2) A minimum of three years case management experience in coordinating and linking community medical, social, educational and other resources as required by the target population;

(3) A minimum of three years experience working with the target population;

(4) Administrative capacity to ensure quality of services in accordance with state and federal requirements;

(5) Financial management system which provides documentation of services and costs;

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

(7) Demonstrated commitment to assure referral consistent with section 1902a(23) of the Social Security Act, Freedom of Choice of Providers; and

(8) A minimum of three years experience demonstrating capacity to meet the case management service needs of the target population.

Statutory Authority: HB2004

Stats. Implemented: HB2004

CASE MANAGER QUALIFICATIONS

413-100-740 (1) Completion of training in case management curriculum approved by the Oregon Medical Assistance Program (OMAP);

(2) Basic knowledge of behavior management techniques, family dynamics, child development, family counseling techniques, emotional and behavioral disorders;

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(3) Skill in interviewing to gather data and complete needs assessments in preparation of narratives/reports, development of service plans, and in individual and group communications; and

(4) Ability to work in court systems, to learn state and federal rules, laws and guidelines relating to child welfare, and to gain knowledge about community resources.

Statutory Authority: HB2004

Stats. Implemented: HB2004

TARGETED CASE MANAGEMENT PROVIDER DESIGNATION

413-100-750 All potential targeted case management providers must comply with applicable licensing and/or regulatory requirements set forth by federal and state statutes and regulations. Additionally, potential providers must comply with the requirements set forth in the OMAP publication **General Rules and General Information**, "Conditions of Provider Participation" referencing OAR 410-120-020, Provider Enrollment; OAR 410-120-040, The Provider Agreement; and OAR 410-120-060, Enrollment of Billing Providers.

Statutory Authority: HB2004

Stats. Implemented: HB2004

TCM CASE MANAGER

413-100-760 The TCM case manager:

- (1) Is a private individual or works for a provider organization;
- (2) Possesses case manager qualifications identified in 421-70-240;
- (3) Maintains case records which document the following information:
 - (a) Name of the recipient of the service (client);
 - (b) Date of service;
 - (c) Name of the provider agency and/or the person providing the service;
 - (d) Nature, extent or units of service; and
 - (e) Place of service delivery.

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TARGETED CASE MANAGEMENT BILLING

413-100-770 The targeted case management provider will:

- (1) Verify that the client receiving the TCM service is in the target group;
- (2) Bill third-party resources, including the child's trust account;
- (3) Establish a rate (fee) in conjunction with the State Office for Services to Children and Families for services billed to Medicaid;
- (4) Comply with all OMAP billing requirements, using either a Medicaid form 1500 or an electronic billing process through the MMIS system.

Statutory Authority: HB2004

Stats. Implemented: HB2004

SOSCF PROCEDURE

<u>Responsibility</u>	<u>Step</u>	<u>Action</u>
TCM Unit/Branch Supervisor	1	Provide approved case manager training.
Service Worker	2	Complete case manager training.
	3	Use CF 1020 to document one targeted case management service provided to each child in substitute care each month.
	4	Continue to document all services to children in substitute care per existing policy and principles of good social work practice; this material will be used as back-up documentation for Title XIX TCM audits.
	5	Assure retention of all case notes and other written documentation which is not filed in the case record for a minimum of three years.
Federal Revenue Specialist	6	Establish Title XIX eligibility for children in the target group. Review eligibility for all children who receive targeted case management services and are not Title XIX eligible.

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Federal Revenue Specialist/
IIS Clerk

7

Enter data from the CF 1020 into the SOSCF IIS system using the IKMG screen prior to the final Friday of the month following provision of the TCM service. The IIS system will electronically transfer these data to the MMIS system. MMIS will verify the accuracy of each billing and the eligibility status of each client, and then generate the Title XIX billing document.

Federal Revenue Specialist

8

Assure that all case management services are provided and documented in accordance with federal requirements and existing SOSCF policy and that they are input into the SOSCF IIS system within required timelines.

Refer to the **Targeted Case Management Manual** for detailed information on program implementation.