STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE/TERRITORY: Georgia
CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A.   Target Group:

Medicaid eligible children, ages 0-21 years, who are "at-risk" of not completing a secondary education program because they exhibit one or more of the following characteristics:

1.   Developmental screen indicates the child is not meeting developmental milestones.
2.   No EPSDT initial screen or no periodic screening.
3.   Free or reduced price lunch.
4.   One or more retentions.
5.   Iowa Test of Basic Skills (ITBS)/Test of Achievement and Proficiency (TAP) reading scores below the 35th percentile.
6.   Five or more unexcused absences in any one twenty (20) day attendance period.
7.   Two or more suspensions during the most recent school year.
8.   Limited English proficiency.
9.   Transferred two or more times during the most recent school year.
10.   One or more years below grade placement in the reading basal.
11.   Few friends or school alienation.
12.   Little or no extracurricular involvement.
13.   Frequent disciplinary referrals.
14.   Dysfunctional home situation.
15.   Disabled without mental impairment.
16.   School-aged parents.
17.   Economically or socially deprived.
18.   Pregnancy.

B.   Areas of State in which services will be provided:

[ ]   Entire State.

[X]   Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide):

Jeff Davis County

C.   Comparability of Services

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

[X]   Services are not comparable in amount, duration, and scope. Authority of
Section 1915(g)(2) of the Act is invoked to provide services without regard to
the requirements of Section 1902(a)(10)(B) of the Act.

D.   Definition of Services:

Children at-risk case management is a set of interrelated activities for identifying,
coordinating, and reviewing the delivery of appropriate services for eligible at-risk children.
The purpose of case management services is to assist those targeted at-risk children in
gaining access to needed medical, nutritional, social, educational, transportation, housing,
and other services; and to encourage the use of various community resources through
referral to appropriate providers. Case management services will provide necessary
coordination with the providers of health, family support, employment, justice, housing,
counseling, nutrition, social, educational, transportation, and other services when needed.

The set of interrelated activities are as follows:

1.   Establishing the comprehensive case file for development and implementation of an
      individualized service plan to meet the assessed service needs of the eligible child.
      Establishing priorities for initial linkages with providers. This unit of service may
      be billed only once for each eligible child.

2.   Assistance to the eligible child in locating needed service providers and making the
      necessary linkages to assure the receipt of services identified in the service plan.

3.   Monitoring and follow-up with the eligible child and service providers to determine
      that the services received are adequate in meeting the child's assessed needs. Case
      management follow-up services are limited to 12 visits annually.

4.   Reassessment of eligible children to determine the services needed to resolve any
      crisis situation resulting from divorce, death, separation, family structure changes,
      changes in living conditions, or other events.

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E.   Qualification of Providers:

1.   Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet with following requirements:

a.   Must have the capacity to provide the full range of at-risk case management services.

b.   Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.

c.   Must have demonstrated direct experience in the coordination of educational support services (e.g., Social Services, Counseling Services, Psychological Services, Student Assistance, Special Education, and Nutritional Services).

d.   Must have demonstrated the ability to obtain collaboration between public and private service providers.

e.   In order to avoid duplication of services and to promote effective community level networking, case management providers must have signed a collaborative agreement with the Jeff Davis County Schools; Jeff Davis Health Department; Jeff Davis County Department of Family and Children Services; Jeff Davis County Juveile Court; and Jeff Davis County Division of Youth Services.

f.   Case managers must have a high school diploma or equivalent and a demonstrated ability to work effectively with at-risk children and their families and have two years experience working with at-risk children and their families.

g.   Case managers must complete a pre-service training program and a Family Connection designated and supervised practice experience.

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F.   The state assures that the provision of case management services will not restrict an individual's free choice of providers of Section 1902(a)(23) of the Act.

     1.   Eligible recipients will have free choice of the providers of case management services.

     2.   Eligible recipients will have free choice of the providers of other medical care under the plan.

G.   Payment for 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. Reimbursement methodology is found in Attachment 4.19-B, pages 5d and 5e.