

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State/Territory: Georgia

Special Education Service Coordination Case Management Services
(Known as Targeted Case Management [TCM])

A. Target Group:

Children ages 3-20 years old who are Medicaid eligible and whom have disabilities under the Individuals with Disabilities Education Act (IDEA) with coverable conditions as documented in their Individual Education Program (IEP) or IFSP (Individual Family Services Plan). A child is eligible to receive comprehensive Special Education Service Coordination case management services (TCM) under the Georgia Medical Assistance Program when all of the following conditions are met:

- The child has an active IEP with special education service coordination listed as a necessary service; and
- The IEP contains Medicaid coverable medical (health-related) services.

B. Comparability of Services:

- Services are provided in accordance with Section 1902(a)(10)(B) of the Act.
- Services are not comparable in amount, duration and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to requirements of Section 1902(a)(10)(B) of the Act.

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

- Entire State (180 schools or local education agencies)
- Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide): All 180 school districts in GA.

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D. Definition of Services:

Special Education Service Coordination case management means ongoing service coordination activities, carried out to assist children receiving special education, as indicated by the child's IEP or IFSP to assist the recipient in gaining access to the appropriate and needed services. It also involves monitoring the recipients to assure needed medical services are received as listed in the IEP. The special education service coordinator is responsible for:

- 1) Coordinating the process of the IEP development,
- 2) Coordinating the implementation of the IEP, and
- 3) Monitoring and follow up on the targeted recipients to assure that required medical services are received and are adequate in meeting each child's needs.

Special education service coordination focuses on medical services detailed in the child's IEP. However, the clearly defined nature of special education service coordination eliminates duplication of service coordination activities and any overlap of responsibilities.

A single Service Coordinator (case manager) should be named in the child's IEP.

Special Education Service Coordination Case Management activities include, but are not limited to:

1. Coordinating the performance of medical evaluations and assessments that the child needs;
2. Facilitating and participating in the development, review, and evaluation of the IEP;
3. Linking and coordinating medical services across private and public agency lines; and
4. Reassessing and follow-up, as required, to ensure medical needs of the student are met.

The department will only pay for case management activities that are over and above the provider's usual assigned duties and responsibilities.

The Service Coordination case management records for special education must be maintained in the child's record. All contacts with or on behalf of a child must be documented in the same manner as other covered services. (This mean that the health-related services, outlined in the child's IEP, are coverable under the school-based Children's Intervention School Services [CISS] program and must be documented according to the CISS program policies and procedures and as defined in the State Plan.)

Services ~~which~~ exceed the limitations must be approved prior to service delivery.

Required Documentation

Service coordination case management services for special education children with an IEP must be documented with each encounter. The following information must be maintained for each encounter: date of service, name of the student, the name of the individual providing the service, the specialty, discipline or title of the individual providing the service, the nature of the billable activity, the method of service delivery (examples: telephone contact, correspondence, face to face, etc.), the group or individual with whom engaged, and the time span of the activity. Documentation materials, including IEPs, should be maintained for at least five years after service delivery.

E. Qualifications of Providers:

Provider Qualifications

The individual must possess the following qualifications:

- An individual who possesses a baccalaureate degree with a major in special education, social services, psychology, or a related field (behavioral health, or social sciences); or
- Registered Nurse.

In addition to meeting at least one of the above criteria, the service coordinator must also possess demonstrated knowledge and understanding of all of the following:

- Medicaid regulations related to the provision of IEP services;
- The nature and scope of services covered under IDEA;
- Provision of direct care services to individuals with special needs; and
- Provision of culturally competent services within the culture of the community being served.

Exclusions

- Medicaid will not reimburse case management services, which duplicate other case management services and are provided to eligible recipients through other Targeted Case Management programs.
 - Service coordination case management services (TCM) as defined in the State Plan will not be eligible for FFP at the administrative rate, for the same types of services furnished to the same recipients.
 - Recipients cannot receive another direct billable services at the same date and time they are receiving TCM.
 - The Service Coordinator (case manager) cannot be the direct therapy provider.
- F. The State assures that the provision of case management services will not restrict the children and their family freedom of choice of providers in violations of Section 1902 (a) (23) of the Act.
1. Eligible recipients will have the free choice of the providers of special education service coordination case management services.
 2. Eligible recipients will have the free choice of providers for other Medicaid services or 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.