

STATE PLAN UNDER TITLE XIX OF SOCIAL SECURITY ACT
STATE/TERRITORY: GEORGIA
CASE MANAGEMENT SERVICES

A. Target Group

All Medicaid eligible recipients age 18 and over who meet one of the following conditions are eligible for services in the Adult Protective Services Case Management Program:

- 1.) Recipients must be at imminent risk of or experiencing abuse, neglect or exploitation due to their inability to protect themselves or their caretaker's willful or otherwise failure to meet their basic needs for physical or emotional care and protection; or
- 2.) Recipients must be at significant or imminent risk of institutionalization due to their inability or their caretaker's inability to provide the minimum sufficient level of care in their own home; or
- 3.) Recipients must be wards of Directors of County Departments of Family and Children Services because they have been adjudicated by Probate Court as being in need of a guardian of person.

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

Entire State

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

C. Comparability of Services:

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:

Case Management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible recipients. The purpose of case management services is to assist the targeted population in gaining access to needed medical, nutritional, social, educational, transportation, housing and other service; and to encourage the use of various community resources through referral to appropriate providers.

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Case Management is performed through a set of interrelated activities which include the following:

1. Establishing the comprehensive case file including development and implementation of an individualized service plan to meet the assessed service needs of the client;
2. Assisting the client in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan;
3. Monitoring the client and service provider to determine that the services received are adequate in meeting the client's needs; or
4. Reassessment of the client to determine services needed to resolve any crisis situation resulting from neglect, maltreatment, exploitation, divorce, death, separation, changes in family structure or living conditions, or other events.

E. Qualifications of Providers:

All providers must:

1. Comply with the mandates of 42 CFR 431.300 subpart (F) regarding confidentiality.
2. Demonstrate the capacity to provide all core elements of case management services.
3. Provide accurate documentation of costs and agree to participate in an annual cost study to determine reimbursement rates for services;
4. Develop a billing system to appropriately identify and bill all liable third parties;
5. Document and maintain case records in accordance with state and federal requirements;
6. All providers must complete a practicum designed and supervised by the Department of Family and Children Services.

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E. Qualifications of Providers: (Continued)

7. Maintain such records as are necessary to fully disclose the extent of services provided and to furnish the Department with information as it may periodically request. All service records, which must be maintained for three (3) years after the delivery of service, must meet the requirements in Section 4302 of the State Medicaid manual.
8. Be skilled in the process of coordinating services for a wide range of disabled adults' needs;
9. Be knowledgeable about local community resources and how to use those resources for the benefit of the client;
10. Be graduates of a college of university with an undergraduate degree in Psychology, Sociology, Social Work or a related field, or have one year of experience providing counseling, guidance services, referral services, or public assistance; and
11. Be knowledgeable about the state's standards and policies related to community services for recipients who are wards of Directors of County Departments of Family and Children Services.

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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 in violation 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 service.

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