
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

CASE MANAGEMENT SERVICES

A. Target Group:

Children 0 - 21 and their Medicaid eligible siblings who are "at risk" of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen (such as Denver, Vineland Adaptive Behavior Scale, Carolina Developmental Scale, First Step) indicates that the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening or inadequate health care.
3. Free or reduced price lunch.
4. One or more retentions.
5. Children with Iowa Test of Basic Skills (ITBS)/Test of Achievement and Proficiency (TAP) reading scores below the 50th percentile and not receiving special education services.
6. Frequent absences, tardiness or school transfers. .
7. Two or more suspensions during the most recent school year or frequent disciplinary referrals.
8. Has been referred to the Student Support Team.
9. Single parent family.
10. School alienation or few friends or little or no extracurricular involvement.
11. Residing in home situation with guardian or caretaker other than natural parent(s).
12. Born to a teen mother.
13. Low self-esteem or expresses feelings of lack of control.
14. History of exposure to direct or indirect violence.
15. History of sexual or physical abuse or neglect.
16. Lack of appropriate physical necessities (clothing, personal hygiene, etc.)

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

Entire State

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

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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)(1) 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 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 following-up with 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 units 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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APPROVED 3-11-94
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SUPERSEDES (NEW)

E. Qualification of Providers:

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

1. Must have the capacity to provide the full range of at-risk case management services.
2. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
3. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, social services, counseling services, psychological services, student assistance, special education, and nutritional services).
4. Must have demonstrated the ability to obtain collaboration between public and private service providers.
5. In order to avoid duplication of services and to promote effective community level networking, case management providers must have a signed collaborative agreement with the DeKalb County Board of Health, DeKalb County Department of Family and Children Services, DeKalb County Juvenile Court, Georgia Department of Children and Youth Services, City of Decatur, City Schools of Decatur, and Community Service Board.
6. Case management supervisors must hold a Bachelor's Degree in a human services field: i.e., psychology, sociology, social work, humanities, counseling, career services; and have two years of supervisory experience working with at-risk children and their families.
7. Case managers must have two (2) years of college and have two (2) years experience working with at-risk children and their families.
8. Both the case management supervisor(s) and the case managers must complete a pre-service training program and a Family Connection designed and supervised practicum experience.

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

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