**Case Management, 004**

**Revision Date: July 9, 2019**

**CDDO Policy 004**

Policy:

Cowley County CDDO Department will ensure case management services are available to all consumers in the service area. Case management will assist the consumer and/or their family/guardian in identifying, selecting, obtaining, coordinating, and using both paid services and natural supports that may be available to enhance the consumer’s independence, integration, and productivity consistent with the consumer’s capabilities and preferences as outlined in the consumers Person-Centered Support Plan. (K.A.R. 30-63-32 , “Rules of Conduct for Case Managers Serving People with Developmental Disability”, and the current , Training & Resource Manual for Developmental Disabilities for Targeted Case Managers.” ) Each community service provider providing case management services shall develop and implement policies and procedures concerning their case management services, consistent with regulations and provide those services in a manner meeting all requirements of these regulations.

Procedures:

1. Each person receiving case management services may have only one case manager who bills for this service on the person’s behalf during any given period. That case manager must accept full responsibility of providing all of the components of case management in any and all environments.
2. A person may choose NOT to receive case management as long as the person or the person’s guardian does not insist case management functions are carried out on their behalf.
3. Case Management shall include the following:

a. Assessment, including an ongoing process for the identification of the person’s needs, the determination of the person’s preferred lifestyle, and the resources which are available to the individual through both formal and informal evaluation methods;

b. Support planning, with the participation of the consumer and their support network, including the development, updating, and reviewing of the consumer’s Person-Centered Support Plan, and any related service and support plan, based upon assessment information and assistance to the consumer in being knowledgeable about the types and availability of community services and support options, in receiving information regarding the rights of consumers pursuant to the Developmental Disability Reform Act and implementing regulations, the content of which shall be approved by the Commission, and in obtaining the community services and supports of the consumer’s choice;

c. Support coordination and referrals, including arranging for and securing supports outlined in the consumer’s Person-Centered Support Plan and the development of natural community support systems;

d. Advocacy, including pursuing means for gaining access to needed services and entitlement, and seeking modification of service systems when necessary to increase the accessibility to those systems by the consumer; and

e. Monitoring and follow up, including the ongoing activities needed to ensure the Person-Centered Support Plan and Plan of Care, along with all other related supports and services are effectively implemented and adequately addressing the needs of the person. The needs of the individual should be reviewed on a routine basis and any changes in need or service supports are identified in the individuals plan.

f. Assisting transition and portability, including the planning of and arranging for services to follow the person when the person moves between any of the following;

i. School to the adult world;

ii. An institution to community alternatives;

iii. One kind of service setting to another kind of service setting;

iv. One provider to another; or

v. One service area to another service area.

2. Each community service provider providing case management services shall:

a. Develop and implement policies and procedures concerning their case management services, consistent with regulation and provide those services in a manner meeting all requirements of the regulation;

b. They must also have a current and valid Affiliation Agreement with Cowley County CDDO Department;

c. They shall further ensure all case management services are provided by case managers meeting the following requirements:

i. Not provide any direct service except case management to any person receiving any other type of direct service from the same agency that employs the case manager;

ii. Not be supervised by anyone directly responsible for any other type of direct service, nor be responsible for the supervision of those services,

iii. Shall comply with the division’s “Rules of Conduct for Case Managers Serving People with Intellectual Disability”;

iv. Maintain documentation that within 90 calendar days of either the case manager’s initial employment or following an announcement by the division of revisions to case manager requirements (whichever came later), the case manager has completed and passed the required on-line assessment established by the division and is included, as the division’s case management training, and

v. Each case manager shall have the following documented qualifications:

1. A minimum of six months of full-time experience in the field of human services; and

2. Either a bachelor’s degree or additional full-time experience in the field of intellectual disability services, which may be substituted for the degree at a rate of six months full-time experience for each missing semester of college.

3. In addition to the requirements above, each case manager shall complete a training program that is developed by the provider providing the case management services, described to the Council of Community Members, approved by Cowley County CDDO Department, and specifies the following:

a. The content of the training;

b. The manner in which and frequency with which the training is developed;

c. The way in which competency will be determined and demonstrated to Cowley County CDDO Department;

d. Information regarding the various paid services and natural supports that enhance a consumer’s independence, integration, and productivity consistent with the consumer’s Person-Centered Support Plan; and

e. Information regarding health and safety, including behavior management practices, abuse, neglect, and exploitation prevention and response, individual rights and responsibilities, and any information specified by the Commissioner.

4 Individuals receiving case management may switch providers at any time, as long as, the new provider has the capacity to accept referrals. Transition planning must occur prior to any change. Current case manager will be responsible for scheduling a transition meeting and completing the CDDO form entitled Cowley County CDDO Department Transition of Services Form. The completed form will be provided to the new case management provider. The current case manager must also provide an accounting of the total number of hours billed year to date.

5 Reimbursement for targeted case management will be paid directly to the provider at the hourly rate set by Medicaid. Four (4) units equal one hour. Providers will be responsible for the following:

1. Billing the appropriate entity in a timely manner
2. Maintaining accurate documentation that meets all requirements as outlined in the HCBS I/DD TCM Provider Manual
3. Maintaining an accurate accounting of total hours billed in order to stay within the annual cap of 240 units or 60 hours per calendar year.
4. If the annual cap will be exceeded, the targeted case management provider is required to follow MCO protocol for getting prior authorization for additional units.

6 Providers will be responsible for creating a sliding fee scale for those individuals who wish to private pay for services that is based on the current Medicaid reimbursement rate. The sliding scale will take into consideration the person’s ability to pay. A copy of the provider’s sliding fee scale will be made available to the CDDO upon request.

7 When service quality concerns/complaints are made to, or detected by the CDDO, the following steps will be taken:

 a. The CDDO will talk with the case manager and individual involved to determine what the problem is.

 b. The CDDO will review documentation regarding the concern/complaint.

 c. A report of the findings will be sent to the affiliate involved.

 d. The affiliate will complete a Corrective Action Taken response, sign and date it and return it to the CDDO within 15 business days.

 e. After receipt of the affiliate’s response, the CDDO will reach out to the individual to see if the issue is resolved.

 f. The CDDO and affiliate will work together to determine if additional follow up is warranted and if so the process will be repeated until resolution is reached.

 g. The CDDO will work with the individual issuing the complaint to make sure he/she is aware of the option to switch case management providers and assist them in doing so if he/she chooses that option.