SCIOTO COUNTY BOARD OF DEVELOPMENTAL DISABILITIES

POLICY 5.09 TARGETED CASE MANAGEMENT SERVICES

- A. The Scioto County Board of Developmental Disabilities shall provide Targeted Case Management Services (TCM) in accordance with Ohio Revised Code (ORC) Section 5126.15, Ohio Administrative Code Rules (OAC) 5123:2-1-11 and 5160-48-01 to eligible individuals with developmental disabilities (DD).
- B. Targeted Case Management is services which assist individuals in gaining access to needed medical, social, educational and other services described in OAC 5160-48-01.
- C. The Board shall request Medicaid payment of TCM Services provided to Medicaid eligible individuals in accordance with all Medicaid rules and regulations. Individuals eligible for Medicaid TCM Services are:
 - 1. Medicaid eligible individuals regardless of age who are enrolled on home and community-based service (HCBS) waivers administered by the Ohio Department of Developmental Disabilities, and
 - 2. All other Medicaid eligible individuals, age three and above, who are determined to have DD according to ORC 5126.01.
- D. The following activities are reimbursable only if provided to, or on behalf of, a Medicaid eligible individual and only if provided by a Board employee certified in Service and Support Administration.
 - 1. Assessment
 - 2. Care Planning
 - 3. Referral and Linkage
 - 4. Monitoring and Follow-up
 - 5. State Hearing
- E. Payment for TCM services may not duplicate payments made to the Board under other program authorities for this same purpose.
- F. Per Ohio Administrative Code Section 5160-1-08 and the county board's Policy 2.22 Fee for Services to Eligible Individuals, the county board must maintain sufficient documentation to substantiate collection activities and any payments received. Sufficient documentation includes a written confirmation every twelve months from

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any known possible third party, if applicable, which states that the TCM service is not covered under that program or policy.

- G. The following activities are not reimbursable:
 - 1. Activities performed on behalf of an individual residing in a nursing facility, ICF/DD or medical institution except for the last 180 consecutive days of residence when the activities are related to moving the individual from the institution to a community setting
 - 2. Emergency intervention services
 - 3. Conducting investigations of abuse, neglect, unusual incidents, major unusual incidents
 - 4. The provision of direct services
 - 5. Services to individuals who are determined not to have DD
 - 6. Establishing budgets for services outside the scope of individual assessment and care planning
 - 7. Development, monitoring and/or implementation of an individual education plan
 - 8. Services to groups of individuals
 - 9. Habilitation management
 - 10. Eligibility determinations for Board services
- H. Due process shall be afforded to each individual receiving TCM services
- I. The administration shall establish procedures which address TCM documentation requirements, reimbursement, claims submission, cost reports, fiscal reviews, record retention, due process and designation of local matching funds.