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OMB No.: 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: WYOMING

#### CASE MANAGEMENT SERVICES

- A. Target Group: Persons with a chronic mental illness who are defined as persons age twenty one (21) and older who have a mental disorder that results in a long-term limitation of the person's capacity to function in activities of daily living and to remain in his/her home community without a range of treatment and other services. The need for case management services will be identified by a mental health professional in the recipient's treatment plan for mental health rehabilitative services. A case manager will then be assigned to carry out the plan as prescribed.
- 1. Targeted case management services are provided to Medicaid eligibles who have been diagnosed by a mental health professional with one of the following mental illnesses:
  - a. Schizophrenia and Other Psychotic Disorders (295.xx, 297.xx, 298.xx;
  - b. Major Depressive Disorders and Bipolar Disorders (296.XX: severe, recurrent, not in full remission;
  - c. Substance Dependence Disorders (303.90, 304.00, 304.10, 304.20, 304.30, 304.40, 304.50, 304.60, 304.80, 304.90)

#### AND

- 2. Exhibit impaired role functioning, resulting solely from the mental disorder, in at least one of the following areas, continuously or episodically for at least one year:
  - a. Inability to be self-supporting financially which includes unemployment, markedly limited job skills, poor work history, receiving welfare or disability based on mental illness, or employed in supported setting.
  - b. Inability to function independently in daily living activities which includes personal care, household management, financial management, use of community resources including treatment for physical and mental health problems.
  - c. Inability to exhibit appropriate social behavior which includes exhibiting inappropriate or dangerous social behavior which brings the person to the attention of mental health and/or law enforcement systems.

The following mental disorders are not included in the definition of chronic mental illness:

- a. A sole diagnosis of mental retardation or other developmental disability. (Services are provided through the Division of Developmental Disabilities).
- b. A sole diagnosis of a substance abuse disorder. (Services are provided through a substance abuse treatment program).
- c. Mental disorders, due to a medical condition, for which supervision and medication are the primary intervention needs. (Services are usually provided in nursing facilities or similar custodial settings).

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OMB No.: 0939-0193

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: WYOMING

#### CASE MANAGEMENT SERVICES

- B. Areas of State in Which Services Will Be Provided:
  - **■** Entire state.
  - Only in the following geographic areas (authority of section 1915(g)(l) of the Act is invoked to provider services less than Statewide:
- C. 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 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of 1902(a)(10)(B).

## D. Definition of Services:

Targeted Case Management for adults age twenty one (21) and over is an individual, non-clinical service which will be used to assist individuals under the plan in gaining access to needed medical, social, educational, and other services.

The purpose of targeted case management is to foster a client's rehabilitation from a diagnosed mental disorder by organizing needed services and supports into an integrated system of care until the client is able to assume this responsibility.

Targeted case management activities include the following:

- a. Linkage-Working with clients and/or service providers to secure access to services. Activities include making telephone calls to agencies to arrange for appointments or services following the initial referral process, and, preparing clients for these appointments.
- b. Monitoring/Follow-Up- Contacting the client or others to ensure that a client is following a prescribed service plan and monitoring the progress and impact of that plan.
- c. Referral-Arranging initial appointments for clients with service providers or informing clients of services available, addresses and telephone numbers of agencies providing services.
- d. Advocacy-Advocacy on behalf of a specific client for the purpose of accessing needed services.
- e. Crisis Intervention- Crisis intervention and stabilization are provided in situations requiring immediate attention/resolution for a specific client. The case manager may provide the initial intervention in a crisis situation and would assist the client in gaining access to other needed crisis services.

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#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: WYOMING

CASE MANAGEMENT SERVICES

#### E. Qualifications of Providers:

Qualified case managers have the following minimum qualifications:

- a. Master's level mental health professional; or
- b. Bachelor's degree with two years of clinical experience; or
- c Bachelor's degree and one year of experience working with seriously mentally ill adults; or
- d. Bachelor's degree in social work or psychology that included a field-based practicum with seriously mentally ill adults; and
- e. Knowledge of the community and ability to work with other agencies.

The client's primary therapist (employed or contracted by the community mental health center) will perform an assessment and determine what case management services are required. He/she will develop a case management plan and a case manager (employed by the community mental health center) will then be assigned the case and will be responsible for carrying out the plan as prescribed.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: WYOMING

### CASE MANAGEMENT SERVICES

- 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.
  - 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.

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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE/TERRITORY: WYOMING

## CASE MANAGEMENT SERVICES

## A. Target Group:

- Medicaid eligible individuals who are not receiving services from a home and community-based waiver; and
- Who have been determined eligible for services from the Developmental Disabilities Adult Waiver, the Developmental Disabilities Children's Waiver or the Acquired Brain Injury Waiver

## 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 1915 (g) (1) of the Act is invoked to provide services without regard to the requirements of 1902 (a) (10) (B).

### C. Definition of Services:

Targeted case management activities include the following:

- Gathering Information: Assisting the individual to get necessary documentation such as medical records, psychological/neuropsychological assessment, etc. to enable the Developmental Disabilities Division (DDD) to determine eligibility.
- Writing the Targeted Case Management (TCM) Plan of Care (POC):
   Filling out the one-page TCM POC to send to the DDD for approval. This form is attached.
- Linkage: Working with individuals and/or service providers to secure
  access to services. Activities include making telephone calls to agencies
  to arrange for appointments or services following the initial referral
  process, and counseling the individuals in preparation for the
  appointments.
- Monitoring/Follow-up: Contacting the individual or others to ensure that
  the individual is following a prescribed service plan and that the Targeted
  Case Manager is monitoring the progress and impact of that plan.
- Referral: Arranging initial appointments for individuals with service providers or informing individuals of services available, and addresses and telephone numbers of agencies providing services.

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## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE/TERRITORY: WYOMING

### CASE MANAGEMENT SERVICES

- Advocacy: Advocacy on behalf of a specific individual for the purpose of accessing needed services.
- Crisis Intervention: Coordinate assistance in crisis intervention. The case manager may provide the initial consultation in a crisis situation by assisting the client in gaining access to other needed clinical crisis intervention services.
- These activities listed above can be with the eligible client, family members, medical providers, social workers, educators, and other entities to manage the eligible individual's care.
- Direct services including transportation are NOT covered.

### D. Qualifications of Providers:

- TCM services are payable to the Developmental Disabilities Division's (DDD)
   Individually-selected Service Coordinators (ISC). There is a list of qualified providers that have been approved by the Division due to the fact that they meet the standards for these services.
- The ISC must have completed the certification process through the DDD and have an EqualityCare/HCBS Waiver case management provider number to be reimbursed for these services.
  - Each ISC is required to meet current qualifications identified in federal standards for Qualified Mental Retardation Professional (QMRP), or,
  - Meet qualifications identified in Medicaid DD Adult/Child HCB Waivers, including Bachelor Associate Degree, Master Associate Degree or PhD and one (1) year mental retardation experience or two (2) years of college and two (2) years mental retardation experience. For Medicaid Acquired Brain Injury (ABI) HCB Waiver, the minimum qualifications are a Bachelor's degree and ½ year of ABI experience or an Associate Degree and two (2) years of ABI experience or equivalent training and experience in ABI.
  - Maintain current CPF/First Aid certification
  - Complete a background check of all self employed providers and employees who provide this service shall successfully complete a Federal Bureau of Investigation (FBI) fingerprint background check and

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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE/TERRITORY: WYOMING

### CASE MANAGEMENT SERVICES

State of Wyoming Division of Criminal Investigation (DCI) fingerprint background check.

- o Complete training (general and specific) with specified time frames according to the type of training and staff member.
- o Individuals may apply to the Division to be included on the ISC roster by written application to the Division including supporting documents to demonstrate educational and professional experience and compliance with all requirements.
- E. 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.
  - Eligible recipients will have free choice of the providers of case management services.
- F. 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.

All public and private providers that are Medicaid providers and are billing the same codes are reimbursed with the same rates.

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE/TERRITORY: WYOMING

# NURSING FACILITY TRANSITION/DIVERSION TARGETED CASE MANAGEMENT SERVICES

## A. Target Group:

Medicaid eligible individuals (consumers) who are:

- a. residing or waiting to be placed, in a Medicaid certified acute care facility or nursing facility; and
- b. express an interest in returning to the community rather than reside in a facility; and
- c. qualify based on the targeted case manager's assessment as a good candidate for community living.
- B. Areas of State in Which Services Will Be Provided:

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

## C. Comparability of Services:

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

#### D. Definition of Services:

Targeted Case Management services include planning and preparing for the transition of individuals qualified under Section A Target Group, to facilitate the process of transition to community services and to enable the person to gain access to needed medical, social, personal and other services in the community. Nursing facility transition/diversion Targeted Case Management activities include the following:

a. Assessment Activities: Required services include screening and referral as well as comprehensive assessment of individual needs. Case managers must obtain and document information from all appropriate sources related to the consumer's need for services, type of services including amount and duration. The assessment will serve to assist the consumer, their family and their current facility in determining the appropriate services for the client. The assessment is comprehensive enough to determine a consumer's needs and preferences for case management and other services in order to

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remain in the community. The assessment includes health, housing, daily living, financial matters, social, and transportation needs.

- b. Services Plan Development. Case managers must:
  - i. develop a detailed individual plan of service and related activities based on the assessment and with the consumer, ensuring informed choice,
  - ii. consult with service providers and professionals to utilize their expertise on the consumer's behalf.
  - iii. identify community partners who have resources to assist the consumer in living independently, and
  - iv. counsel consumer to encourage cooperation in implementing the plan.
- c. Service Plan Implementation: Case managers will implement the service plan obtaining services and facilitating the requirements outlined in the plan. Activities may include phone calls to service agencies to arrange appointments or services and ensuring services are planned and available for the consumer.
- d. Service Plan Review: Monitoring and follow-up with the consumer once they are living in the community to determine the adequacy of services and whether there are changes needed in the types of services being provided.
- e. Advocacy: Advocacy on behalf of a specific consumer for the purpose of accessing needed services.
- E. Qualifications of Providers of Targeted Case Management Services:
  - a. Providers of Targeted Case Management services may be
    - i. Individual, self-employed case managers, or
    - ii. Employers of case managers.
  - b. Providers must be certified by the state Medicaid agency to have:
    - i. Demonstrated capacity to provide all core elements of case management services described in D above; and
    - ii. One year demonstrated experience in transitioning the consumers to the community and locating and engaging services related to transition or diversion; and
    - iii. Sufficient resources to meet the case management service needs of the consumer(s) including travel to meet consumers where they reside; and
    - iv. An administrative capacity to insure quality of services in accordance with state and federal requirements; and
    - v. An administrative capacity to provide documentation of services and costs; and
    - vi. An administrative capacity to document and maintain individual case records in accordance with state and federal requirements.

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- c. Case Managers must have:
  - i. a Bachelor degree in social services or related field or equivalent education and/or work experience providing services to consumers in a social service program; and
  - ii. knowledge of available community resources, skills necessary to work with and engage other agencies, and the ability to arrange appropriate services specific to each consumer.
- F. The State assures that the provision of nursing facility transition/diversion targeted 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 consumers will have free choice of the providers of nursing facility transition/diversion case management services.
  - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for nursing facility transition/diversion targeted 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.

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