

TARGETED CASE MANAGEMENT

(TCM)

I. Title XIX of the Social Security Act Section 1915(g)(2)

(2) For purposes of this subsection, the term “case management services” means services which will assist individuals eligible under the plan in gaining access to needed medical, social, educational, and other services.

II. Deficit Reduction Act (DRA) of 2005 SEC. 6052. Reforms Of Case Management And Targeted Case Management.

The DRA Placed the definition in (2) above into (2)(i) and added further clarification in (2) (ii) as well as adding paragraphs 2, 3, and 4.

“(ii) Such term includes the following:

- (I) Assessment of an eligible individual to determine service needs.....
- (II) Development of a specific care plan based on the information collected through an assessment...
- (III) Referral and related activities to help an individual obtain needed services....
- (IV) Monitoring and follow-up activities....

Paragraph 4 covers other third parties liable to pay for TCM

“(4)(A) In accordance with section 1902(a)(25), Federal financial participation only is available under this title for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program.

(B) A State shall allocate the costs of any part of such services which are reimbursable under another federally funded program in accordance with OMB Circular A-87 (or any related or successor guidance or regulations regarding allocation of costs among federally funded programs) under an approved cost allocation program.”

III. Claiming TCM as an Alternative to MAC

IV. Advantages and Disadvantages of Claiming TCM

V. Open Discussion