

**SURVEY OF LOCAL GOVERNMENTAL AGENCIES (LGAs)
PARTICIPATING IN TARGETED CASE MANAGEMENT (TCM)
IN FISCAL YEAR (FY) 2003/2004**

The results of this survey will identify the LGAs who will be participating in the TCM program during FY 2003/2004 and will be used to update the State Plan. Only select target groups in which you strongly feel your LGA will participate. Defined below are six TCM programs. This survey form should be completed and signed by the TCM Coordinator then mailed to the Department of Health Services by June 30, 2003. LGAs who do not return this signed survey by June 30, 2003 will be ineligible to claim reimbursements for FY 2003/2004.

Name of LGA:			
Target Group	Description	Will Participate	Will Not Participate
Public Health (6)	<p>Medi-Cal eligible high-risk persons identified as having a need for public health case management services including the following individuals:</p> <ul style="list-style-type: none"> • Women, infants, children, and young adults to age 21 • Persons with HIV/AIDS • Persons with reportable communicable diseases • Pregnant women • Persons who are technology dependent • Persons who are medically fragile • Persons with multiple diagnoses 	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Clinics (7)	<p>Medi-Cal eligible persons who are in need of outpatient clinic medical services and who need case management services in connection with their treatment because they are unable to access or appropriately utilize services themselves, including the following:</p> <ul style="list-style-type: none"> • Persons who have demonstrated non-compliance with their medical regimen • Person who are unable to understand medical directions because of language or other comprehension barriers • Persons with no community support system to assist in follow-up care at home • Persons who require services from multiple health/social service providers in order to maximize health outcomes 	<input type="checkbox"/>	<input type="checkbox"/>
Public Guardian (9)	<p>Medi-Cal eligible individuals, 18 years or older, who have exhibited an inability to handle person, medical, or other affairs, who are under conservatorships of person and/or estate or a representative payee</p>	<input type="checkbox"/>	<input type="checkbox"/>
Aging and Adult Services/Linkages (10)	<p>Medi-Cal eligible individuals, 18 years and older, in frail health and in need of assistance to access services in order to prevent institutionalization.</p>	<input type="checkbox"/>	<input type="checkbox"/>
Adult Probation/Conservatorship (11)	<p>Medi-Cal eligible persons, 18 years or older, on probation who have a medical and/or mental condition and are in need of assistance in accessing and coordination of medical, social and other services.</p>	<input type="checkbox"/>	<input type="checkbox"/>
Community (13)	<p>Medi-Cal eligible adults and children at risk of abuse and unfavorable developmental, behavioral, psychological, or social outcomes including the following individuals:</p> <ul style="list-style-type: none"> ▪ Persons abusing alcohol or drugs, or both ▪ Persons at risk of physical, sexual, or emotional abuse ▪ Persons at risk of neglect 	<input type="checkbox"/>	<input type="checkbox"/>

TCM Coordinator (Printed Name)

Telephone Number

TCM Coordinator (Signature)

Date

Please mail or fax to:

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