DEPARTMENT OF HEALTH & HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES
REGION IX

75 Hawthorne Street
Suite 408
San Francisco, CA 94105

Refer to: MCD-SPB-SMC

MAR 14 2005

Stan Rosenstein, Deputy Director
Medical Care Services
Department of Health Services
MS 4000
PO Box 942732
Sacramento, CA 94234-7320

Dear Mr. Rosenstein:

On July 6, 2004, the Centers for Medicare & Medicaid Services (CMS) disapproved California Medicaid State Plan Amendment (SPA) No. 03-028B. CMS has decided to withdraw that decision and approve the SPA. This notice, therefore, supersedes and replaces the July 6, 2004 denial letter.

Enclosed is an approved copy of SPA No. 03-028B. The amendment is retroactively effective to July 1, 2003. This SPA amends Supplement 1d and 1f of Attachment 3.1A of the State plan to update the geographic areas in which the specified targeted case management (TCM) services are offered.

If you have any questions please call Sue Castleberry of my staff at

Sincerely,

Pat Daley

for Linda Minamoto
Associate Regional Administrator
Division of Medicaid & Children's Health

Enclosures

cc: Cindy Potter, CMS Center for Medicaid and State Operations
Leah Myers, DHS, California State Plan Coordinator
Brian Burdullis, CMS Region IX Division of Medicaid & Children's Health
Larry Cutler, CMS, CMSO DEHPG

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: California

CASE MANAGEMENT SERVICES

A. Target Group:

Title XIX eligible individuals:

Individuals, 18 years or older, who have exhibited an inability to handle personal, medical, or other affairs, who are under conservatorships of person and/or estate or a representative payee.

Payment for case management services will not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.

Case management services provided in accordance with Section 1915(g) of the Social Security Act will not duplicate case management services provided under any home and community-based services waiver.

There shall be a county-wide system to ensure coordination among providers of case management services provided to beneficiaries who are eligible to receive case management services from two or more programs.

B. Areas of State in which services will be provided:

__ Entire State.

X Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than Statewide): Amador, Butte, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Imperial, Inyo, Kern, Kings, Lake, Lassen, Los Angeles, Mendocino, Merced, Modoc, Monterey, Napa, Nevada, Orange, Placer, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Luis Obispo, San Mateo, Santa Barbara, Shasta, Solano, Stanislaus, Trinity, Tulare, Tuolumne, Yolo, and Yuba counties.

C. Comparability of Services

__ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

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

D. Definition of Services:

Targeted case management services include needs assessment, setting of objectives related to needs, individual service planning, service scheduling, and periodic evaluation of service effectiveness. Case management services ensure that the changing needs of the Medi-Cal eligible person are addressed on an ongoing basis and appropriate choices are provided among the widest array of options for meeting those needs. Case management includes the following:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: California

CASE MANAGEMENT SERVICES

A. Target Group:

Medi-Cal eligible persons who are 18 years of age and older who are on probation and have a medical and/or mental condition and are in need of assistance in accessing and coordination of medical, social and other services.

Payment for case management services will not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.

Case management services provided in accordance with Section 1915(g) of the Social Security Act will not duplicate case management services provided under any home and community-based services waiver.

There shall be a county-wide system to ensure coordination among providers of case management services provided to beneficiaries who are eligible to receive case management services from two or more programs.

B. Areas of State in which services will be provided:

__ Entire State.

X Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than Statewide): Alameda, Amador, Butte, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Imperial, Kings, Lake, Lassen, Los Angeles, Marin, Modoc, Monterey, Napa, Orange, Placer, Plumas, Riverside, San Bernardino, San Diego, San Luis Obispo, Santa Barbara, Santa Cruz, Shasta, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Trinity, Tulare, Ventura, and Yolo counties.

C. Comparability of Services

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

D. Definition of Services:

Targeted case management services include needs assessment, setting of objectives related to needs, individual service planning, service scheduling, and periodic evaluation of service effectiveness. Case management services ensure that the changing needs of the Medi-Cal eligible person are addressed on an ongoing basis and appropriate choices are provided among the widest array of options for meeting those needs. Case management includes the following:

1. Assessment

Analyzing each client's need for medical, social, educational and other services to determine appropriate resources and to develop a service plan.