

**SENATE
FINANCE
COMMITTEE**

8 **CHAPTER 4—STATE FINANCING UNDER**
9 **MEDICAID**

10 **SEC. 6031. REFORMS OF TARGETED CASE MANAGEMENT.**

11 (a) IN GENERAL.—Section 1915(g) (42 U.S.C.
12 1396n(g)(2)) is amended by striking paragraph (2) and
13 inserting the following:

14 “(2) For purposes of this subsection:

15 “(A)(i) The term ‘case management services’
16 means services which will assist individuals eligible
17 under the plan in gaining access to needed medical,
18 social, educational, and other services.

19 “(ii) Such term includes the following:

20 “(I) Assessment of an eligible individual to
21 determine service needs, including activities
22 that focus on needs identification, to determine
23 the need for any medical, educational; social, or
24 other services. Such assessment activities in-
25 clude the following:

1 “(aa) Taking client history.

2 “(bb) Identifying the needs of the in-
3 dividual, and completing related docu-
4 mentation.

5 “(cc) Gathering information from
6 other sources such as family members,
7 medical providers, social workers, and edu-
8 cators, if necessary, to form a complete as-
9 sessment of the eligible individual.

10 “(II) Development of a specific care plan
11 based on the information collected through an
12 assessment, that specifies the goals and actions
13 to address the medical, social, educational, and
14 other services needed by the eligible individual,
15 including activities such as ensuring the active
16 participation of the eligible individual and work-
17 ing with the individual (or the individual’s au-
18 thorized health care decision maker) and others
19 to develop such goals and identify a course of
20 action to respond to the assessed needs of the
21 eligible individual.

22 “(III) Referral and related activities to
23 help an individual obtain needed services, in-
24 cluding activities that help link eligible individ-
25 uals with medical, social, educational providers

1 or other programs and services that are capable
2 of providing needed services, such as making re-
3 ferrals to providers for needed services and
4 scheduling appointments for the individual.

5 “(IV) Monitoring and followup activities,
6 including activities and contacts that are nec-
7 essary to ensure the care plan is effectively im-
8 plemented and adequately addressing the needs
9 of the eligible individual, and which may be
10 with the individual, family members, providers,
11 or other entities and conducted as frequently as
12 necessary to help determine such matters as—

13 “(aa) whether services are being fur-
14 nished in accordance with an individual’s
15 care plan;

16 “(bb) whether the services in the care
17 plan are adequate; and

18 “(cc) whether there are changes in the
19 needs or status of the eligible individual,
20 and if so, making necessary adjustments in
21 the care plan and service arrangements
22 with providers.

23 “(iii) Such term does not include the direct de-
24 livery of an underlying medical, educational, social,
25 or other service to which an eligible individual has

1 been referred, including, with respect to the direct
2 delivery of foster care services, services such as (but
3 not limited to) the following:

4 “(I) Research gathering and completion of
5 documentation required by the foster care pro-
6 gram.

7 “(II) Assessing adoption placements.

8 “(III) Recruiting or interviewing potential
9 foster care parents.

10 “(IV) Serving legal papers.

11 “(V) Home investigations.

12 “(VI) Providing transportation.

13 “(VII) Administering foster care subsidies.

14 “(VIII) Making placement arrangements.

15 “(B) The term ‘targeted case management serv-
16 ices’ are case management services that are fur-
17 nished without regard to the requirements of section
18 1902(a)(1) and section 1902(a)(10)(B) to specific
19 classes of individuals or to individuals who reside in
20 specified areas.

21 “(3) With respect to contacts with individuals who
22 are not eligible for medical assistance under the State plan
23 or, in the case of targeted case management services, indi-
24 viduals who are eligible for such assistance but are not

1 part of the target population specified in the State plan,
2 such contacts—

3 “(A) are considered an allowable case manage-
4 ment activity, when the purpose of the contact is di-
5 rectly related to the management of the eligible indi-
6 vidual’s care; and

7 “(B) are not considered an allowable case man-
8 agement activity if such contacts relate directly to
9 the identification and management of the noneligible
10 or nontargeted individual’s needs and care.

11 “(4)(A) In accordance with section 1902(a)(25), Fed-
12 eral financial participation only is available under this title
13 for case management services or targeted case manage-
14 ment services if there are no other third parties liable to
15 pay for such services, including as reimbursement under
16 a medical, social, educational, or other program.

17 “(B) A State shall allocate the costs of any part of
18 such services which are reimbursable under another feder-
19 ally funded program in accordance with OMB Circular A-
20 87 (or any related or successor guidance or regulations
21 regarding allocation of costs among federally funded pro-
22 grams) under an approved cost allocation program.”.

23 (b) EFFECTIVE DATE.—The amendment made by
24 subsection (a) shall take effect on January 1, 2006.