

<b>GEORGIA DEPARTMENT OF JUVENILE JUSTICE</b>	Transmittal # 12-15	Policy # 20.5
Applicability: <input type="checkbox"/> All DJJ Staff <input checked="" type="checkbox"/> Administration <input checked="" type="checkbox"/> Community Services <input type="checkbox"/> Secure Facilities	Related Standards & References: Department of Medical Assistance, Policies and Procedures Manual for At Risk of Incarceration Case Management Services Program	
Chapter 20: CASE MANAGEMENT	Effective Date: 9/15/12 Scheduled Review Date: 9/15/14 APPROVED:	
Subject: AT-RISK OF INCARCERATION TARGETED CASE MANAGEMENT		
Attachments: None.	<hr/> L. Gale Buckner, Commissioner	

## I. POLICY:

The Department of Juvenile Justice shall provide Targeted Case Management for Youth at Risk of Incarceration.

## II. DEFINITIONS:

**At-Risk of Incarceration Targeted Case Management Services:** Services that will assist Medicaid eligible individuals to gain access to needed medical, social, educational and other services. Such services include but are not limited to the following:

- Assessment of eligible individuals to determine service needs, including activities that focus on needs identification, to determine the need for any medical educational, social or other services;
- Development of a specific service plan based on the information collected through assessment, that specifies the goals and actions to address the medical, social, educational and other services needed by eligible individuals;
- Referral and related activities to help an individual obtain needed services; and
- Monitoring and follow-up activities, including activities and contacts that are necessary to ensure the service plan is effectively implemented and adequately addresses the needs of the individual.

**Special Eligibility Conditions:** All Medicaid eligible emotionally disturbed (including behaviorally disfunctioning) or substance abusing members under the age of 21 who are at risk of incarceration and who are placed in or have been referred to a Foster Home or non-residential supervision program as an alternative to a secure confinement facility are eligible for the services described in this policy.

**Qualifying Case Managers:** Community service employees that are, or are supervised by graduates of a college or university with an undergraduate degree in Psychology, Sociology, Social Work, Criminal Justice or a related field, or have four years work experience in the juvenile justice system.

<b>Chapter</b>	<b>Subject</b>	<b>Policy #</b>	<b>Page</b>
CASE MANAGEMENT	MEDICAID TARGETED CASE MANAGEMENT	20.5	2 of 3

### **III. PROCEDURE:**

#### **A. Medicaid Eligibility Verification:**

1. Upon initial receipt of a case, the community case manager will ascertain if the youth is currently Medicaid eligible and, if so, will obtain a copy of the Medicaid card.
2. For probated and committed youth, the community case manager will contact the Regional Medicaid Eligibility Specialist to verify the youth's Medicaid eligibility.
3. If the Medicaid number is not already in JTS, the community case manager will enter the Medicaid number in the JTS case record.

#### **B. Covered Services:**

1. The community case manager will perform At-Risk of Incarceration Case Management through the delivery of a set of interrelated activities, which include the following:
  - Establishing the comprehensive case record for development and implementation of an individualized service plan to meet the assessed service needs of the youth;
  - Assisting the youth in locating needed service providers and making the necessary linkages to ensure the receipt of services identified in the service plan;
  - Monitoring the youth and service providers to determine that the services received are adequate in meeting the child's need; and
  - Reassessing the youth to determine services needed to resolve any crisis resulting from divorce, death, separation, changes in family structure or living conditions, or other events.

#### **C. Non-Covered Services:**

1. The following services are not reimbursable through the At-Risk-of Incarceration program:
  - Services provided while a child is incarcerated in a Youth Development Campus (YDC), a secure DJJ Short-Term Program (STP), or while a youth designated for placement in a YDC or secure STP as a result of a completed adjudication or screening resides in a Regional Youth Development Center (RYDC);
  - Services for which another payer is liable;

Chapter	Subject	Policy #	Page
CASE MANAGEMENT	MEDICAID TARGETED CASE MANAGEMENT	20.5	3 of 3

- More than one type of targeted case management within one calendar month for a member;
- Case finding;
- Legislative advocacy;
- Training services for members;
- Transportation services for members; and
- Services provided in a manner that is in violation of the provisions contained in the Georgia Department of Community Health's Part II, Policy and Procedures for At-Risk of Incarceration Case Management Services Program Manual.

D. Documenting Covered Services for At-Risk of Incarceration Case Management:

1. Documentation will address at least one of the four covered services:

- Assessment;
- Service Plan (Plan of Care);
- Referral and follow-up; and
- Re-Assessment.

{Updated by Directive #12-18 on 10/15/12}

2. The qualifying case manager will document in the youth's JTS case notes and will include:

- All telephone or face-to-face contacts with members, their families, significant others and care providers;
- Member's name ~~and Medicaid number~~;
- Date of service;
- Nature of the service; and
- Place of service.

The community case manager will ensure that the youth's Medicaid number, if available, is entered into the Juvenile Tracking System.

E. Supervisory Responsibility:

Juvenile Program Managers are responsible for overall monitoring of the At-Risk of Incarceration Case Management Services in their respective offices.

1. **LOCAL OPERATING PROCEDURES REQUIRED: NO**