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State/Territory Name: Alabama

State Plan Amendment (SPA) #: 21-0010

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medic aid and CHIP Operations Group

March 17, 2022

Ms. Stephanie McGee Azar, Commissioner Alabama Medicaid Agency 501 Dexter Avenue Post Office Box 5624 Montgomery, AL 36103-5624

Re: Alabama State Plan Amendment (SPA) 21-0010

Dear Commissioner Azar:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) AL 21-0010. This amendment will allow for case management services to assist Medicaid-eligible pregnant women of any age in need of maternity services in gaining access to needed medical, social, educational, and other services. Perinatal is defined as the period inclusive of pregnancy through two years postpartum, to the child's second birthday. Services to the parent (primary caregiver) could be available during this same two-year period following the birth of the child.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that AL 21-0010 was approved on March 15, 2022, with an effective date of January 1, 2022.

If you have any questions, please contact Rita Nimmons at 404-562-7415 or via email at Rita. Nimmons@cms.hhs.gov.

Sincerely,

Ruth A. Hughes, Acting Director Division of Program Operations

cc: Stephanie Lindsay

DEPARTMENT OF HEALTH ANDHUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES	FORM APPROVE OMB No 0938-019
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 2 1 — 0 0 1 0 A L 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT • XIX XXI
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE January 1, 2022
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 441.18	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2022 \$ 0 b. FFY 2023 \$ 0
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Supplement 1 to Attachment 3.1-A Pg 25-29	Supplement 1 to Attachment 3.1-A Pg 25-29

9. SUBJECT OF AMENDMENT

10. GOVERNOR'S REVIEW (Check One)

This amendment will allow for case management services to be provided by NSO certified Nurse Family Partnership (NFP) nurses for Intensive Nurse Case Management to eligible recipients electing to participate in the NFP program during their pregnancy, and extending to the infant's second birthday.

O GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMIT	OTHER, AS SPECIFIED: Governor's designee on file via letter with CMS
FFICIAL 12. TYPED NAME	15. RETURN TO Stephanie McGee Azar Commissioner
Stephanie McGee Azar	Alabama Medicaid Agency 501 Dexter Avenue
13. TITLE Commissioner	Post Office Box 5624 Montgomery, Alabama 36103-5624
14. DATE SUBMITTED	montgonisty, rudbania correc coz i
FOR	CMS USE ONLY
16. DATE RECEIVED 12/29/21	17. DATE APPROVED 3/15/22
PLAN APPROV	ED - ONE COPY ATTACHED
18. EFFECTIVE DATE OF APPROVED MATERIAL 01/01/2022	
20. TYPED NAME OF APPROVING OFFICIAL	21 TITLE OF APPROVING OFFICIAL

22. REMARKS

Ruth A. Hughes

Alabama requested via email on March 1, 2022 1:44 PM a pen and ink change to remove Pages 28-29 in items 7 & 8 as there are no longer changes being made to those original pages.

Acting Director, Division oF Program Operations

FORM CMS-179 (09/24)

Instructions on Back

State Plan under Title XIX of the Social Security Act State/Territory: <u>Alabama</u>

TARGETED CASE MANAGEMENT SERVICES Targeted Group 5 Pregnant Women

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

The population to be served consists of Medicaid-eligible women in need of maternity and perinatal services.

A person in this target group may reside in her own home, the household of another, or a supervised residential setting and in total care environments, such as nursing facilities, hospitals, and residential programs. Targeted case management services will not be provided to clients receiving case management through a waiver.

X Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 180 consecutive days of a covered stay in a medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions). (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas	of State in which services will be provided (§1915(g)(1) of the Act):
X	Entire State
	Only in the following geographic areas:
Compa	arability of services (§§1902(a)(10)(B) and 1915(g)(1))
	Services are provided in accordance with §1902(a)(10)(B) of the Act.
X	Services are not comparable in amount duration and scope (§1915(g)(1)).

<u>Definition of services (42 CFR 440.169)</u>: Case management services are those services which will assist Medicaid-eligible pregnant women of any age in need of maternity services in gaining access to needed medical, social, educational, and other services.

Case management services are those services which will assist program eligible perinatal women in gaining access to needed medical, social, educational and other services. Perinatal is defined as the period inclusive of pregnancy through two years postpartum, to the child's second birthday. Services to the parent (primary caregiver) could be available during this same two year period following the birth of the child.

- * Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include
 - taking client history;
 - identifying the individual's needs and completing related documentation; and
 - gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual;

TN AL-21-0010

Supersedes
TN AL-11-012

Approval Date: 03/15/22 Effective Date: 01/01/22

State Plan under Title XIX of the Social Security Act State/Territory: <u>Alabama</u>

TARGETED CASE MANAGEMENT SERVICES Targeted Group 5 Pregnant Women

Reassessment/follow-up - The case manager shall evaluate through interviews and observations the progress of the client toward accomplishing the goals listed in the case plan at intervals of three months or less. In addition, the persons and/or agencies providing services to the client will be contacted and the results of these contacts, together with the changes in need shown in the reassessments, will be utilized to accomplish any needed revisions to the case plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual;
- Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and
- Monitoring and follow-up activities:
 - activities and contacts that are necessary to ensure the care plan is implemented and
 adequately addresses the eligible individual's needs, and which may be with the individual,
 family members, service providers, or other entities or individuals and conducted as
 frequently as necessary, and including at least one annual monitoring, to determine whether
 the following conditions are met:
 - o services are being furnished in accordance with the individual's care plan;
 - o services in the care plan are adequate; and
 - o changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

TN <u>AL-21-0010</u> Supersedes TN AL-11-012

Approval Date: <u>03/15/22</u> Effective Date: <u>01/01/22</u>

State Plan under Title XIX of the Social Security Act State/Territory: Alabama

TARGETED CASE MANAGEMENT SERVICES Targeted Group 5 Pregnant Women

Monitoring - The case manager will ascertain on an ongoing basis what services have been delivered and whether they are adequate to meet the needs of the client. Adjustments in the plan of care may be required as a result of monitoring.

___Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Case management providers must be certified as a Medicaid provider meeting the following criteria:

- (A) Demonstrated capacity to provide all core elements of case management:
 - (1) assessment,
 - (2) care/services plan development,
 - (3) linking/coordination of services, and
 - (4) reassessment/follow-up.
- (B) Demonstrated case management experience in coordinating and linking such community resources as required by the target population.
 - (C) Demonstrated experience with the target population.
- (D) An administrative capacity to ensure quality of services in accordance with state and federal requirements.
 - (E) A financial management system that provides documentation of services and costs.
- (F) Capacity to document and maintain individual case records in accordance with state and federal requirements.
- (G) Demonstrated ability to assure a referral process consistent with Section 1902a(23), freedom of choice of provider.
- (H) Demonstrated capacity to meet the case management service needs of the target population.
 - (I) Credentialed by appropriate certifying agency(ies).

Individual case managers must meet the following minimum qualifications:

- (A) A Bachelor of Arts or a Bachelor of Science degree in social work from a school accredited by the Council on Social Work Education, or
 - (B) A registered nurse, and
- (C) Training in a case management and/or nurse home visiting curriculum approved by the Alabama Medicaid Agency.

TN AL-21-0010

Supersedes TN AL-11-012 Approval Date: <u>03/15/22</u> Effective Date: <u>01/01/22</u>