

Crosswalk of Service Coordination/Care Management Qualifications NHTD, TBI, MLTC/MMC & CFCO

NHTD (From 2010 CMS waiver application)	TBI (From 2009 Program Manual)	MLTC/MMC	CFCO
<p>Definition: Service Coordination is an individually designed service which supplements and enhances care management services. Service Coordinators provide assistance to the member in gaining access to needed services, including local, state and federally funded educational, vocational, social, medical, and any other services, not secured by the care manager. These services are expected to result in assuring the member's health and welfare in the community and increasing independence, integration and productivity. Activities are designed to help members achieve stability and functional improvement in daily living, finances, housing, education, employment, and interpersonal relationships.</p> <p>Provider Qualifications: Not-for-profit or for profit health and human services agencies may provide SC. The agency must be approved by DOH as a NHTD waiver provider.</p> <p>(A) 1. The following staff may provide SC without supervision:</p> <ul style="list-style-type: none"> • Licensed Master Social 	<p>Definition: Service Coordination is an individually designed service which supplements and enhances care management services. Service Coordinators provide assistance to the member in gaining access to needed services, including local, state and federally funded educational, vocational, social, medical, and any other services, not secured by the care manager. These services are expected to result in assuring the member's health and welfare in the community and increasing independence, integration and productivity. Activities are designed to help members achieve stability and functional improvement in daily living, finances, housing, education, employment, and interpersonal relationships.</p> <p>Provider Qualifications: Not-for-profit or proprietary health and human services agencies may provide SC. The agency must be approved by DOH as a waiver provider.</p> <p>Service Coordinators must be a:</p> <p>(A) 1. Master of Social Work; 2. Master or Doctorate in</p>	<p>MLTC Definition: Care Management is a process that assists Enrollees to access the necessary covered services as identified in their specific care plan. The process ensures that the care provided is adequate to meet the needs of the Enrollee and that it is appropriately coordinated to include referrals to services in support of the member's needs. Care management assists Enrollees to obtain such necessary services as; medical, social, home and/or personal care services, environmental supports and durable medical equipment, educational, psychosocial, and financial supports, physical, occupational and speech therapies, as well as other supports, irrespective of whether the needed services are covered under the capitation payment agreement.</p> <p>MMC Definition: Care Management is defined as a comprehensive assessment of a member's needs with an individualized care plan carried out through specific interventions designed to provide</p>	<p>Provider Qualifications: Service Coordinators have a masters of social work or psychology, are a registered professional nurse, or a licensed or certified teacher, rehabilitation counselor and/or therapist with a minimum of one year of experience providing SC and information, linkages and referrals to the elderly and/or disabled regarding community based services or an individual with a bachelor's degree and two years of related experience or someone with none of the educational requirements with three years of related experience. Individuals who do not meet the requirements may be supervised by those who meet both experience and educational requirements.</p> <p>Care Managers typically have a background in nursing, social work and/or human services. Case Managers have similar backgrounds and the title is used interchangeably.</p>

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<p>Worker (Licensed by the NYS Education Department pursuant to Article 154 of the NYS Education Law);</p> <ul style="list-style-type: none"> • Licensed Clinical Social Worker (Licensed by the NYS Education Department pursuant to Article 154 of the NYS Education Law); • Master of Social Work; • Master of Psychology; • Master of Counseling Psychology; • Master of School Psychology; • Master of Counseling; • Master of Gerontology; • Physical Therapist (Licensed by the NYS Education Department pursuant to Article 136 of the NYS Education Law); • Registered Professional Nurse (Licensed by the NYS Education Department pursuant to Article 139 of the NYS Education Law); • Certified Special Education Teacher (Certified by the NYS Education Department); • Certified Rehabilitation Counselor (Certified by the 	<p>Psychology;</p> <p>3. Registered Physical Therapist;</p> <p>4. Professional Registered Nurse;</p> <p>5. Certified Special Education Teacher;</p> <p>6. Certified Rehabilitation Counselor;</p> <p>7. Licensed Speech-Language Pathologist; or</p> <p>8. Registered Occupational Therapist.</p> <p>The provider shall have, at a minimum, one (1) year of experience providing SC and information, linkages and referrals regarding community-based services for individuals with disabilities; OR</p> <p>(B) Be an individual with a Bachelor's degree and two (2) years' experience providing SC and information, linkages and referrals regarding community-based services for individuals with disabilities; OR</p> <p>(C) Be an individual with an Associate's degree and three (3) years' experience providing SC and information, linkages and referrals regarding community-based services for individuals with</p>	<p>coordinated, efficient, quality care to achieve the care plan goals and optimize health outcomes for people with complex health issues.</p> <p>Health plans are required to provide case management and disease management services for individuals (adults and children) with chronic health conditions or complex health issues or situations. Plan care managers collaborate with the member and the health care providers to conduct interventions to address the member's individual needs and promote optimal outcomes.</p> <p>Provider Qualifications:</p> <p>42 CFR 438.214 – Provider Selection</p> <p>(a) General rules. The State must ensure, through its contracts, that each MCO, PIHP, or PAHP implements written policies and procedures for selection and retention of providers and that those policies and procedures include, at a minimum, the requirements of this section.</p> <p>(b) Credentialing and recredentialing requirements.</p> <p>(1) Each State must establish a uniform credentialing and</p>	

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<p>Commission of Rehabilitation Counselor Certification);</p> <ul style="list-style-type: none"> • Licensed Speech Pathologist (Licensed by the NYS Education Department pursuant to Article 159 of the NYS Education Law); or • Occupational Therapist (Licensed by the NYS Education Department pursuant to Article 156 of the NYS Education Law). <p>The individual shall have, at a minimum, one (1) year of experience providing SC and information, linkages and referrals regarding community-based services for individuals with disabilities and/or seniors; OR</p> <ol style="list-style-type: none"> 1. Have a Bachelor's degree or higher, in social work, psychology, gerontology, or other related field and two (2) years of experience providing SC to individuals with disabilities and/or seniors and knowledge about community resources; OR 2. Be an individual who has successfully served as a RRDS for one (1) year; OR 3. Any individual who met the 	<p>disabilities; OR</p> <p>(D) Be an individual with a High School Diploma or equivalent (GED) with four (4) years' experience providing SC and information, linkages and referrals regarding community-based services for individuals with disabilities; OR</p> <p>(E) Be an individual who has successfully served as a RRDS for one (1) year in the HCBS/TBI Waiver Program.</p> <p>Individuals identified in section (A) may supervise the following individuals to perform SC Services:</p> <ul style="list-style-type: none"> • Individuals with educational experience listed in (A) but who do not meet the experience qualification; • Individuals with a Bachelor's degree in health or human services with one (1) year of experience providing SC for individuals with disabilities and knowledge about community resources; and • Individuals with an Associate's degree or a High School Diploma or equivalent (GED) and two (2) years 	<p>recredentialing policy that each MCO, PIHP, and PAHP must follow.</p> <p>(2) Each MCO, PIHP, and PAHP must follow a documented process for credentialing and recredentialing of providers who have signed contracts or participation agreements with the MCO, PIHP, or PAHP.</p> <p>(c) Nondiscrimination. MCO, PIHP, and PAHP provider selection policies and procedures, consistent with § 438.12, must not discriminate against particular providers that serve high-risk populations or specialize in conditions that require costly treatment.</p> <p>(d) Excluded providers. MCOs, PIHPs, and PAHPs may not employ or contract with providers excluded from participation in Federal health care programs under either section 1128 or section 1128A of the Act.</p> <p>(e) State requirements. Each MCO, PIHP, and PAHP must comply with any additional requirements established by the State.</p>	

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<p>qualifications for and was providing SC without supervision under the NHTD waiver in effect through August 31, 2010.</p> <p>(B) The following staff may provide SC with supervision by those listed in Group (A) (1) until they meet the minimum years of required work experience:</p> <ol style="list-style-type: none"> 1. An individual with the educational experience listed in Group (A) but who have less than one (1) year of experience providing SC for individuals with disabilities and/or seniors and knowledge about community resources; OR 2. An individual with a Bachelor's degree, or higher, in social work, psychology, gerontology, or other related field with less than two (2) years of experience providing SC for individuals with disabilities and/or seniors and knowledge about community resources. <p>(C) The following staff may provide SC with supervision by those listed in Group (A) (1):</p>	<p>of experience providing SC to individuals with disabilities and knowledge about community resources.</p> <p>The supervisor is expected to:</p> <ol style="list-style-type: none"> 1. Meet any potential participants prior to the completion of the Initial Service Plan developed by a SC under their supervision; 2. Have supervisory meetings with staff on at least a bi-weekly basis; and 3. Review and sign-off on all Service Plans. <p>A supervisor may maintain an active caseload of waiver participants in accordance with ratio guidelines.</p> <p>Self-Employment:</p> <p>Professionals listed in (A) and (E) of this section who are self-employed may be SC. In addition to the educational requirement, individuals eligible under part (A) must have three (3) years' experience providing SC involving multiple community resources to individuals with traumatic brain injury and have an understanding</p>		

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<ol style="list-style-type: none"> 1. An individual with a Bachelor's degree and two (2) years of experience providing SC to individuals with disabilities and/or seniors and knowledge about community resources; OR 2. An individual with an Associate's degree with three (3) years of experience providing SC for individuals with disabilities and/or seniors and knowledge about community resources; OR 3. An individual with a High School Diploma or equivalent and five (5) years of experience providing SC to individuals with disabilities and/or seniors and knowledge about community resources. <p>For purposes of supervision, the supervisor is required to:</p> <ol style="list-style-type: none"> 1. Meet any potential participants prior to the completion of the ISP developed by a SC under his/her supervision; 2. Have supervisory meetings with staff on at least a bi-weekly basis and maintain notes on these meetings; 	<p>of the philosophy and content of this waiver. For individuals eligible under part (E), there are no additional education or experience requirements.</p>		

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<p>3. Document progress of staff and conduct regular performance evaluations; and</p> <p>4. Review and sign-off on all Service Plans.</p> <p>A supervisor may maintain an active caseload of waiver participants in accordance with ratio guidelines.</p> <p>The SC agency must have available a communication system for twenty-four (24) hours/seven (7) days per week coverage to assure any issues regarding a participant's services can be addressed.</p>			