



**Medical Services**  
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Jack Dairymple, Governor  
Carol K. Olson, Executive Director

October 13, 2011

Mr. Scott Davis  
ND Indian Affairs Commission  
600 E. Blvd. Ave.  
Bismarck, ND 58505

Dear Mr. Davis:

This letter is regarding the Tribal Consultation between the North Dakota Department of Human Services and the North Dakota Indian Tribes. This consultation process was established to ensure Tribal governments are included in the decision making processes when changes in the Medicaid or Children's Health Insurance Program (s) will affect items such as cost or reductions and additions to the program. The North Dakota Department of Human Services engages Tribal consultation when a State Plan Amendment, waiver proposal or amendment, or demonstration project proposal directly impacts the North Dakota Tribes and/or their Tribal members.

This letter is specific to:

1. Submission of a State Plan Amendment defining targeted case management for Individuals in need of Long Term Care.

The Department of Human Services, Medical Services expects that this State Plan Amendment may directly impact the North Dakota Tribes or Tribal Programs and we seek your input on the amendment.

The proposed changes are intended to expand targeted case management services to be provided by Community Health Representatives for eligible Medicaid recipients as noted in the following language.

Definition of Services:

Case Management services are services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, education and other services. Case Management includes the following assistance:

- Assessment of an individual to determine the need for any medical, education, 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 individual.

Development (and periodic revision) of a Specific Care Plan that:

- Is based on the information collected through the assessment;
- 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:

- To help an eligible individual obtain needed services including activities that help link an individual with:
  - Medical, social, educational providers; or other programs and services that are capable of providing needed services, such as making referrals to providers for needed services and scheduling appointments for the individual.

Monitoring and Follow-up Activities:

- Activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the individual's needs, and which may be with the individual, family members, 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:
  - Services are being furnished in accordance with the individual's care plan;
  - Services in the care plan are adequate; and
  - If there are changes in the needs or status of the individual, and if so, making necessary adjustments in the care plan and service arrangements with providers.

Case management may include contacts with non-eligible individuals that are directly related to identifying the needs and supports for helping the eligible individual to access services.

### Qualifications of Providers:

In order to ensure that care is properly coordinated, TCM services must be delivered by agencies that have sufficient knowledge and experience relating to the availability of alternative long term care services for elderly and disabled persons. Individual case managers must at a minimum must hold a ND social work license and must have at least one year experience in providing case management related services to elderly and disabled persons or must be supervised by a licensed social worker with at least three years experience in providing services to elderly and disabled persons or must be Developmental Disabilities case manager.

Qualifications for staff of federally recognized Indian Tribes or Indian Tribal Organizations performing case management must be able to deliver needed services in a culturally appropriate and relevant manner. Staff must have successfully completed either:

- a) The 120 hour basic Community Health Representative (CHR) Certification Training (provided through Indian Health Service), supplemented by 20 hours of training in Case Management Process *and* 20 hours of training in Gerontology topics; or
- b) An approved Tribal College community Health Curriculum, which includes coursework in Case Management principles and Gerontology. The Case Management Implementer must provide services under the supervision of a licensed health professional (Licensed Practical Nurse, Social Worker, Registered Nurse, Physical Therapist, occupational Therapist, Registered Dietician, or Medical Doctor).

Medicaid will reimburse a CHR Program for case management services provided by CHR Program staff that have not yet completed the necessary certification requirements so long as case management services are provided under the supervision of a licensed professional and the CHR Program staff are actively in the process of completing the necessary certification requirements within one year.

### Freedom of Choice:

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services within the specified geographic area identified in this plan.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

### Freedom of Choice Exception:

Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

Access to Services:

The State assures that:

- Case management services will be provided in a manner consistent with the best interest of recipients and will not be used to restrict an individual's access to other services under the plan; [section 1902 (a)(19)]
- Individuals will not be compelled to receive case management services, condition receipt of case management services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management services; [section 1902 (a)(19)]
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan. [42CFR 431.10(e)]

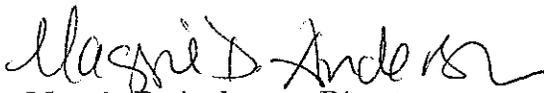
Limitations: Case Management does not include the following:

- Activities not consistent with the definition of case management services under section 6052 of the Deficit Reduction Act; [DRA]The direct delivery of an underlying medical, educational, social, or other service to which an eligible individual has been referred.(2001 SMD)
- Activities integral to the administration of foster care programs; or (2001 SMD) and
- Activities for which third parties are liable to pay. (2001 SMD)

If you have any comments, questions or concerns about the proposed State Plan Amendments, please contact me at [manderson@nd.gov](mailto:manderson@nd.gov) or by mailing a written response to 600 East Boulevard Avenue, Dept 325, Bismarck, ND 58505 or by calling 701-328-1603.

The Department appreciates the continuing opportunity to work collaboratively with you to achieve the Department's mission, which is: "To provide quality, efficient, and effective human services, which improve the lives of people."

Sincerely,



Maggie D. Anderson, Director  
Medical Services Division

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