



INTENSIVE CASE MANAGEMENT

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INTENSIVE CASE MANAGEMENT

7 AAC 139.200. Community-based care management services

(a) The following community-based care management services may be provided to any eligible recipient under this chapter:

(1) intensive case management services, that must be provided according to the criteria listed in **7 AAC 138.400(a)(3)**;

7 AAC 138.400(a)(3)

(a) The department will pay a provider who meets the requirements of 7 AAC 138.020 for one or more of the following substance use disorder 1115 waiver community-based support services provided to an eligible recipient under this chap

(3) intensive case management services that are used to establish, organize, integrate, and modify the treatment and social support services and resources required to meet recipient needs, and are provided in collaboration with the recipient to

(A) facilitate provision of community-based social, educational, vocational, legal, and financial resources;

(B) obtain medical, behavioral health, or other specialized treatment services and social support services;

(C) monitor the safety and stability of the recipient and connect the recipient with crisis intervention services;

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(D) coordinate the provision of services and exchange of information between treatment providers and social services agencies to help achieve the goals listed in the recipient's treatment plan;

(E) help the recipient engage in social relationships and natural community-based supports that enhance the recipient's quality of life; and

(F) help the recipient resolve conflicts and mediate solutions to problems with treatment providers, social support agencies, or natural community-based supports.

**ALASKA
BEHAVIORAL
HEALTH
PROVIDERS
SERVICES
STANDARDS &
ADMINISTRATIVE
PROCEDURES
FOR
BEHAVIORAL
HEALTH
PROVIDER
SERVICES**

- You will see the following statement a lot in regulations:
- “Alaska Behavioral Health Provider Standards and Administrative Procedures, adopted by reference in 7 AAC 160.900”
- Anything in regulations that states something is adopted by reference means that it too IS REGULATION.
- Hence, anything that is in the 1115 Alaska Behavioral Health Provider Standards and Administrative Procedures IS REGULATION.
- Both the Alaska Administrative Code (AAC) and the Standards Manual must be followed to be in compliance.

INTENSIVE CASE MANAGEMENT SERVICES DESCRIPTION

1115 BH Service Standards Manual Page 21-24

ICM services include evaluation, outreach, support services, advocacy with community agencies, arranging services and supports, teaching community living and problem-solving skills, modeling productive behaviors, and teaching individuals to become self-sufficient.

INTENSIVE CASE MANAGEMENT SERVICE DESCRIPTION

Case manager serves as the central point of contact for an individual brokering and/or linking individual with mental health, SUD, medical, social, educational, vocational, legal, and financial resources in the community, including:

- Intensive outreach services outside of clinic, including street outreach, visiting the client's home, work, and other community settings
- Referring for individual, group or family therapy, medical, or other specialized services; and
- Engaging natural supports (natural supports are family members/close kinship relationships and community members (e.g. friends, co-workers, etc.) that enhance the quality of life

INTENSIVE CASE MANAGEMENT SERVICE DESCRIPTION CON'T

- Assessment; and treatment plan with quarterly update assessments (reviews);
- Regular (biweekly, at a minimum) monitoring of behavioral health services, delivery, safety, and stability;
- Triaging for crisis intervention purposes (e.g., determining need for intervention and referral to appropriate service or authority); and
- Assisting individuals in being able to better perform activities of daily living— problem-solving skills, self-sufficiency, productive behaviors, conflict resolution.

SERVICE REQUIREMENTS EXPECTATIONS

ICM providers must also have the capacity to furnish the following:

- Multiple contacts with client per week with a frequency of at least 2-to-3 times a day based on recipient need
- At least one face-to-face contact every two weeks for all recipients • Services should be provided in the community as often as needed.

These are the outer limits of services. Questions to ask yourself:

If a client needs more than 2-3 ICM services a day, are they in the right level of care?

If a client is not needing ICM services in several weeks or in a month or two, are they in the right level of care?

SERVICE FREQUENCY/LIMITS

- 960 units per beneficiary per SFY, with a service authorization to extend limit is required.
- Unit value: 15 minutes