

+-----+
| LOCAL COMMISSIONERS MEMORANDUM |
+-----+

DSS-4037EL (Rev. 9/89)

Transmittal No: 92 LCM-56

Date: April 2, 1992

Division: Medical Assistance

TO: Local District Commissioners

SUBJECT: Health Care Financing Administration Review
of the Teen Age Services Act Program

ATTACHMENTS: There are no attachments to this LCM.

The Health Care Financing Administration (HCFA) recently completed a review of the Teen Age Services Act (TASA) Program that provides case management services to pregnant, parenting and at-risk teens. This review focused on those programs in New York State that provide TASA services as Title XIX case management. Based on their review of State regulations and issuances, discussions with State and local district staff and visits to TASA case management providers, HCFA had several recommendations requiring action.

- o Recommendation #1 - Assurance that all social services districts provide an opportunity for all qualified case managers to furnish TASA services.

To assure that the selection of providers is based on objectively applied criteria, we are requesting all social services districts that currently provide TASA services as a targeted case management program to submit to this Department a statement that includes the provider participation criteria and solicitation process for participation as a CMCM provider. This will be attached to the Comprehensive Medicaid Case Management (CMCM) TASA Program Document on file. Social services districts have flexibility in establishing the criteria; however, it must be applied uniformly to all providers requesting participation as a TASA provider in your district. Any district that denies a provider's participation must demonstrate that the provider did not meet the established criteria. Please be advised that districts may not use the rationale that there are "too few eligible clients in the district" as a reason to deny a provider. Any provider that meets the criteria is eligible to participate. Districts may have multiple providers even though their eligible population is small. The addendum should be submitted by May 1, 1992.

Any social services district that considers changing their administration of TASA from direct provision of services to providing TASA as a Title XIX case management program must include this information when submitting the CMCM TASA Program Document to our Department.

- o Recommendation #2 - Assurance that after each semi-annual monitoring visit, social services districts prepare and follow-up on a plan of corrective action in a timely manner.

To assure that all client assessments, reassessments and care plans are completed in accordance with the goals of the TASA initiative and State mandates, social services districts must, following each semi-annual monitoring visit, prepare and submit with each monitoring report a corrective action plan, citing any significant deficiency(s) found during the review. The social services district must periodically follow-up with the provider to ensure program compliance. If the provider fails, after a reasonable period, to take corrective action, thereby failing to live up to the terms of their signed agreement, action must be taken by the agency to terminate them as a TASA case management provider.

- o Recommendation #3 - Assurance that all case management providers are aware of the procedures for verifying clients' Medicaid eligibility and resolving billing problems.

The Administrative Review Section of the revised CMCM Semi-Annual Provider Monitoring Form does address the issue of billing MMIS for CMCM services. However, to assure compliance, case management providers should be reminded, at each review, of the information available and the procedures in place to assist them in verifying eligibility and billing MMIS for CMCM services.

If you have any questions on the TASA program, please contact either Barbara McManaman or Karen Hogan at 1-800-342-3715, extension 3-6209 (OA USERID 89D436)

Jo-Ann A. Costantino
Deputy Commissioner
Division of Medical Assistance