

## TCM Plus – Questions and Answers #1

- 1) *Can a youth enrolled in TCM Plus also be enrolled in a Health Home?*
  - A. No. Youth are prohibited from being enrolled in a Health Home and Targeted Case Management at the same time. Youth must be enrolled in Targeted Case Management in order to be eligible for TCM Plus.
  
- 2) *Does TCM Plus allow a CCO to provide services to youth outside of their jurisdiction? For example, Harford County is providing the reimbursement; does that mean that a CCO can provide services in Harford County?*
  - A. No. Harford County is acting as a fiduciary to provide reimbursement for the costs of Care Coordination for youth without Medical Assistance for all CCOs in all jurisdictions. Targeted Case Management is still only to be provided by CCOs that have been designated by CSA to provide services in their jurisdiction. This also applies to TCM Plus which shall only be delivered by CCOs in jurisdictions where they have been designated as a CCO by a CSA.
  
- 3) *What regulations must be followed and are there levels of intensity similar to Targeted Case Management regarding non-MA youth enrolled in TCM Plus and how do CCOs bill for the services provided?*
  - A. There are not specific levels or tiers of care coordination for youth enrolled in TCM Plus without Medical Assistance. Youth shall be provided care coordination at a level of intensity that meets their needs. The care coordination shall be delivered utilizing the principles of a wraparound service delivery model.
  
- 4) *Can you clarify the role of the Maryland Coalition of Families (MCF)? Are they simply a fiduciary in addition to their role as the family/peer support provider or do they have a quality assurance or oversight role with regards to CCOs?*
  - A. MCF will serve as a fiduciary for customized goods and services. BHA will have the responsibility of quality assurance and oversight of CCOs regarding customized goods and services. Authorizations for goods and services will be made solely by BHA. However, family/peer support partners, as part of the Child and Family Team, will be an important part of the Teams decision to request goods or services. Requests for goods and services from care coordinators will be considered to be on behalf of the Child and Family Team.
  
- 5) *How will it be determined which provider serves youth in TCM Plus in jurisdictions that have more than one provider?*

- A. The family or youth will decide which provider they wish to enroll.
- 6) *Are there specific timelines associated with the requirements of TCM Plus? For example, does a youth have to have been in contact with DJS within a certain period of time from referral or does the youth meet eligibility if they have ever been in contact with DJS?*
- A. No. BHA is not using specific timelines. Referral sources are encouraged to use their best judgement to ensure that the needs of the youth would be met through the use of care coordination and additional services.
- 7) *If a youth is eligible for the 1915(i) but has not yet been authorized for the 1915(i), are they allowed to forgo 1915(i) authorization to instead seek an authorization of TCM Plus to take advantage of the customized goods and services available via TCM Plus?*
- A. BHA will be clarifying this with Medicaid. Until further clarification is provided, this will be decided on a case-by-case basis, at BHA's discretion.
- 8) *Will there be a standard referral form for requesting customized goods and services?*
- A. Yes. BHA will disseminate.
- 9) *Will there be a standard referral form for requested family/peer support?*
- A. Yes. MCF will provide a form.
- 10) *Are youth required to be under the age of 18 to enroll in TCM Plus?*
- A. Yes. The same restriction that applies to youth in TCM will exist for TCM Plus. Youth must be under the age of 18 at entry but can remain in service until their 22 birthday.
- 11) *How will Discretionary Funds be provided for 1915(i) youth who are not eligible for TCM Plus?*
- A. A separate process will be established in order to open customized goods and services as a 1915(i) service.