



CFP TECHNICAL ASSISTANCE BULLETIN

CFP SERVICES IN INSTITUTIONAL SETTINGS



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Background

Skilled nursing and intermediate care facilities are particularly important for enabling timely hospital discharge through short-term rehabilitation, sub-acute care, and crisis management. However, short-term stays often become long term residence when complicated planning is required for a return home, special housing or housing modification needs to be arranged, or exceptional one-time expenses must be paid.

Recently, revisions to policy were made by HCFA regarding the provision of *Targeted Case Management (TCM)* services to people with disabilities who are transitioning to the community from institutional settings. Previously such services were allowed only for the 30 days prior to discharge. This policy revision extends the timeframes during which CFP services may be rendered.

Targeted Case Management (TCM), defined in section 1915(g) of the Social Security Act, *may be furnished as a service to institutionalized persons who are about to leave the institution, to facilitate the process of transition to community services and to enable the person to gain access to needed medical, social, educational and other services in the community.*

HCFA has revised the guidelines to indicate that intensive case management or TCM may be furnished during the last 180 consecutive days of a Medicaid eligible person's institutional stay, *if provided for the purpose of community transition.*

Program Standards and Guidance

PLWA's who are living in an acute care setting, nursing home or residing in a long-term rehabilitation setting, including residential substance abuse setting, may be enrolled in the Community Follow-up Program when there is a need to assist them in obtaining housing, entitlements, etc. to live in the community provided that:

- Discharge is pending (within 60-180 days) if services are put into place.
- Case conferences and a joint service plan (see attached form) is developed with the agency social worker/discharge planner. This must be in the case record.
- A clear need for intensive case management services must be documented.

This change in policy will allow CFP's to keep a client who has been discharged to a long-term care facility for rehabilitation, and/or extend the time a client may be in the hospital during which services may be provided to family members when discharge is expected within 6 months.

(Note: This does not affect those who are incarcerated since they lose their Medicaid eligibility during that time.)