

Seattle TGA Ryan White Program Standards

Case Management (Non-Medical)

Approved by Council on 1/11/2021

HRSA Definition

Non-Medical Case Management Services (NMCM) is the provision of a range of client-centered activities focused on improving access to and retention in needed core medical and support services. NMCM provides coordination, guidance, and assistance in accessing medical, social, community, legal, financial, employment, vocational, and/or other needed services. NMCM Services may also include assisting eligible clients to obtain access to other public and private programs for which they may be eligible, such as Medicaid, Children's Health Insurance Program, Medicare Part D, State Pharmacy Assistance Programs, Pharmaceutical Manufacturer's Patient Assistance Programs, Department of Labor or Education-funded services, other state or local health care and supportive services, or private health care coverage plans. NMCM Services includes all types of case management encounters (e.g., face-to-face, telehealth, phone contact, and any other forms of communication). Key activities include:

- Initial assessment of service needs
- Development of a comprehensive, individualized care plan
- Timely and coordinated access to medically appropriate levels of health and support services and continuity of care
- Client-specific advocacy and/or review of utilization of services
- Continuous client monitoring to assess the efficacy of the care plan
- Re-evaluation of the care plan at least every 6 months with adaptations as necessary
- Ongoing assessment of the client's and other key family members' needs and personal support systems

Program Guidance

NMCM Services have as their objective providing coordination, guidance and assistance in improving access to and retention in needed medical and support services to mitigate and eliminate barriers to HIV care services, whereas Medical Case Management Services have as their objective improving health care outcomes.

Seattle TGA Definition, including sub-priorities:

The Seattle definition follows the HRSA definition in addition to information on the sub-priorities listed below.

Sub-priorities:

- Housing NMCM, including search and referral
- Dental NMCM
- Chemical Dependency NMCM
- Engagement and Retention in Care NMCM
 - Supports NMCM work that is not housed within an existing MCM program.

1.0 General Standards

	STANDARD	MEASURE
1.1	Program adheres to Seattle TGA Ryan White Program General Standards	Part A site visit documents adherence

2.0 Staff & Volunteer Qualifications and Training

	STANDARD	MEASURE
2.1	Please refer to the General Standards, specific sub-priority standards are listed below in the sub-priorities.	Part A site visit documents adherence

3.0 Non-Medical Case Management (NMCM) Practice Standards (applies to all sub-priorities)

	STANDARD	MEASURE
3.1	Following a referral or request for NMCM, each referral is screened within 5 working days to determine: <ul style="list-style-type: none"> • Client needs for NMCM services • Whether the client has a Medical Case Manager • Client-identified immediate need(s) -- triage and refer to available services 	Documentation in client record
3.2	Within 30 days, NMCM will receive a completed assessment and/or complete their own and this will be used to create a mutually agreed upon care plan with the client. The plan is reviewed, discussed, and updated every six months and a copy is offered to the client. Please see sub-priorities for specific areas to be assessed.	Documentation in client record
3.3	Re-evaluation of the care plan at least every 6 months with adaptations as necessary.	Updated assessment in client record
3.4	NMCM staff are expected to coordinate with MCM agencies, health care providers and other relevant service providers about the client and the client's current needs as appropriate and as allowed under HIPAA	Documentation in client record

4.0 Sub-Priority 1: Housing Non-Medical Case Management, including Search and Referral

	STANDARD	MEASURE
4.1	Each client has an initial assessment completed within 30 days, which will include the following areas: <ul style="list-style-type: none"> • Housing – housing history, strengths, barriers, and current housing needs 	Documentation in client record

	<ul style="list-style-type: none"> • Access to & engagement in health care/supportive services • Current medical and case management providers • Language in which the client needs to receive service 	
4.2	Based on the assessment, each client has a mutually agreed upon housing plan that includes next steps. The housing plan is reviewed, discussed, and updated every six months and a copy is offered to the client.	Documentation in client record

5.0 Sub-Priority 2: Dental Non-Medical Case Management

	STANDARD	MEASURE
5.1	<p>Within 30 days, client has an initial assessment completed, which will include the following areas:</p> <ul style="list-style-type: none"> • Current oral health needs • Finances/benefits • Transportation • Access to & engagement in health care/supportive services • Current medical providers and case management providers • CD4 and viral load, which can be client self-reported • Language in which the client needs to receive service • Other barriers (such as mental health, substance use, etc.) 	Documentation in client record
5.2	Based on the assessment, each client has a mutually agreed upon plan that includes next steps. The plan is reviewed, discussed, and updated every six months and a copy is offered to the client.	Documentation in client record
5.3	Attempts to appoint new clients will be made within 30 days of enrollment in the program.	Documentation in client record
5.4	Once client is enrolled in the dental program, NMCM provides appropriate follow up, as needed, to ensure client is accessing oral health services.	Documentation in client record

6.0 Sub-Priority 3: Chemical Dependency Non-Medical Case Management

	STANDARD	MEASURE
6.1	Staff providing direct service must have a current and active Substance Use Disorder Professional Certification and must adhere to all requirements outlined in the Revised Code of Washington (RCW) Chapter 18.205 and Washington Administrative Code (WAC) 246-811.	Documentation in personnel records

6.2	<p>Within 30 days, NMCM should complete an individualized care plan with the client, in order to determine NMCM service needs. The housing plan is reviewed, discussed, and updated every six months and a copy is offered to the client. This mutually agreed upon plan should include assessment of need in the following areas:</p> <ul style="list-style-type: none"> • Finances/benefits • Housing • Mental Health • Domestic violence • Support system • Access to and engagement in health care, supportive, and treatment services • Current medical and case management providers • History of substance use/prior treatment • Language in which the client needs to receive service 	Documentation in client record
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7.0 Sub-Priority 4: Engagement and Retention in Care Non-Medical Case Management

	STANDARD	MEASURE
7.1	<p>Within 30 days, NMCM should complete a comprehensive, individualized care plan with the client, in order to determine NMCM service needs. The housing plan is reviewed, discussed, and updated every six months and a copy is offered to the client. This mutually agreed upon plan should include assessment of need in the following areas:</p> <ul style="list-style-type: none"> • Finances/benefits • Housing • Transportation • Legal Services • Substance Use • Mental Health • Domestic violence • Basic needs, such as food, clothing • Support system • Access to & engagement in health care/supportive services • Current medical providers and case management providers • Language in which the client needs to receive service 	Documentation in client record

8.0 Case Closure

	STANDARD	MEASURE
8.1	Please refer to the General Standards wherein the agency follows its case closure policies.	Documentation in client record

Dates Revised:

9/8/14 (Created)

8/29/16

1/11/17

1/13/17

1/20/17

2/27/17

3/27/17

5/21/18

1/11/21