

**441—90.4(249A) Case management services.** This rule applies to all categories of case management and all populations covered by case management.

**90.4(1) Covered services.** The following shall be included in FFS case management services provided to members.

*a. Assessment.* Initial assessments and regular reassessments must be completed for each member to determine the need for medical, social, educational, housing, transportation, vocational, or other services, as specified in the Medicaid manual for TCM found on the department's website and as amended through July 1, 2026.

*b. Person-centered service plan.* The case manager shall develop and revise a comprehensive, person-centered service plan at least every 365 days in accordance with the Medicaid manual for TCM found on the department's website and as amended to July 1, 2026.

*c. Monitoring and follow-up.* The case manager shall perform monitoring activities and make contacts that are necessary to ensure the health, safety, and welfare of the member and to ensure that the person-centered service plan is effectively implemented and adequately addresses the needs of the member.

*d. Contacts.* The case manager shall have at least one face-to-face contact with the member in the member's residence at least quarterly. The case manager shall have at least one contact per month with the member or the member's guardians or representatives. This contact may be face-to-face or by telephone.

**90.4(2) Exclusions.** Payment will not be made for activities otherwise within the definition of case management services when any of the following conditions exist:

*a.* The activities are an integral component of another covered Medicaid service.

*b.* The activities constitute the direct delivery of underlying medical, social, educational, housing, transportation, vocational or other services to which a member has been referred.

*c.* The activities are components of the administration of foster care programs.

*d.* The activities for which a member may be eligible are a component of the administration of another nonmedical program, such as a guardianship, child welfare or child protective services, parole, probation, or special education program, except for case management that is included in an individualized education program or individualized family service plan consistent with Section 1903(c) of the Social Security Act as amended to August 1, 2025.

*e.* The activities duplicate institutional discharge planning.

[ARC 0319D, IAB 5/27/26, effective 7/1/26]