

From: Kester, Tony
To: 'Shawn Keith' <skeith@slcog.org>
Date: 10/15/2013 7:50:38 AM
Subject: RE: Tony please help

Shawn,

We do not do true case management. The providers were including assessment and selection as a part of the unit cost. Since the provider no longer performs all services, there should be a reduction in the unit cost. If you are doing part of the work, then add that to each unit as the provider did. At the end, we need to see what the total cost of providing a meal, transportation, home care actually is per unit.

Hope this helps.

Tony

From: Shawn Keith [mailto:skeith@slcog.org]
Sent: Monday, October 14, 2013 5:03 PM
To: Kester, Tony
Cc: Kathy Powell
Subject: Tony please help
Importance: High

Tony

As you are aware Santee-Lynches performed case management/care management in Clarendon County prior to this fiscal year and was paid for those services from III-B funds. This year we have elected, as have several of the other AAAs, to do the client selection piece of the assessment process. We continue to seek LGOA's direction as it relates to being paid for the client selection costs as we also train providers and perform technical assistance in the care management process. In essence we are the right hand to selecting and approving the client for services. I've sent two requests to AIMhelp as it relates to placing units into AIM for client selection/care management but am confused about the responses. The most current response is as follows:

*From: AIMHelp [mailto:aimhelp@aging.sc.gov]
Sent: Friday, October 11, 2013 10:17 AM
To: 'Shawn Keith (skeith@slcog.org)'; 'mmikota@slcog.org'
Cc: AIMHelp
Subject: FW: [response] RE: AIM Help Ticket Follow-Up*

Dear Dr. Mikota and Mr. Keith:

The LGOA is unable to set up the described activity because we do not reimburse for Care Management out of State or Federal funds. If you would like to change the funding source to Local Pay or another private source, let us know and we will create an activity with that funding source for you.

Kathy interprets the response to mean the State is not going to pay for the cost of care management. I am interpreting it to mean we don't need to input units to AIM for the service but believe the intent is to pay us for the costs of our client selection services.

We've incurred approximately \$15,000 in costs for this process through the end of September. We need to know whether or not care management/client selection is going to be a reimbursable service from III-B funds, and if so, how we bill for it. If the State truly isn't going to pay for care management out of III-B funds, then from where are we to recover these costs?

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