



Department of Human Resources
311 West Saratoga Street
Baltimore MD 21201

FIA ACTION TRANSMITTAL

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TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS AND ELIGIBILITY STAFF
LOCAL HEALTH DEPARTMENTS
LOCAL GOVERNMENTAL ADDICTIONS AGENCIES
ADDICTION SUPERVISORS AND ADDICTION SPECIALISTS

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RE: FIP SUBSTANCE ABUSE TREATMENT AND SERVICES

PROGRAMS AFFECTED: TEMPORARY CASH ASSISTANCE,
FOOD STAMPS AND MEDICAL ASSISTANCE

ORIGINATING OFFICE: OFFICE OF POLICY, RESEARCH AND SYSTEMS

SUMMARY: During its 2000 session, the Maryland General Assembly passed House Bill 1160, the Welfare Innovation Act of 2000. Provisions of this bill set forth a revised process for substance abuse screening, treatment referrals and reporting for customers receiving Temporary Cash Assistance (TCA). The bill requires certified addiction specialists to be on-site in all local departments of social services (LDSS) to conduct substance abuse screening; conduct or refer for assessment; refer drug felons for testing; refer for treatment; and, provide information case managers need to determine eligibility for benefits.

Managed Care Organizations (MCO) and their primary care providers are no longer required to report information to the LDSS. Keeping the initial health screen appointment at the MCO is no longer a condition of eligibility for TCA benefits. Substance abuse treatment providers are required to report information concerning TCA customers directly to addiction specialists.

The addiction specialist on-site in the LDSS office acts as liaison between the Family Investment Program (FIP) case manager and the substance abuse treatment provider for TCA customers referred to treatment. The addiction specialist maintains ongoing contact with treatment providers who are required to report certain information concerning the treatment status of TCA customers. The addiction specialist reports information needed to determine eligibility to the FIP case manager concerning the customer's compliance with substance abuse requirements and treatment protocols. The addiction specialist makes referrals for supportive services and to the Family Service unit on customers who screen positive or self identify for substance abuse. The addiction specialist also provides monthly reports to the Family Investment Administration (FIA) and the Alcohol and Drug Abuse Administration (ADAA) on TCA substance abuse treatment activity (See Attachment I - **Role of the Addiction Specialist**).

ACTION REQUIRED: The following procedures are effective for all TCA adults and minor parent applicants, and recipients at their first recertification after January 1, 2001, or when the addiction specialist has been hired by the Local Health Department and is on board in the Local Department of Social Services (LDSS).

The following forms have changed:

Consent For the Release of Confidential Alcohol and Drug Treatment Information (DHR/FIA 1176) Attachment II,

Substance Abuse Screening Referral (DHR/FIA 1177) Attachment III

Substance Abuse Identification and Treatment Notification (DHR/FIA 1178) Attachment IV.

Until the addiction specialist has been hired case managers continue to have customers sign the 1176 and when appropriate, complete an 1177. Refer customers who self disclose or who request treatment referrals through the existing LDSS process. However, do not forward the forms to MCOs. The current Substance Abuse Liaison in the LDSS retains the forms until the addiction specialist is on board. Case managers continue to take appropriate action on any 1178 received. Liaisons continue to send the Monthly TCA Substance Abuse Activity reports (DHR/FIA #1179, DHR/FIA #1180, DHR/FIA #1181, and DHR/FIA #1182) to FIA until the addiction specialist is on board at the LDSS.

REFERRAL TO ADDICTON SPECIALIST FOR SCREENING/SIGNATURE REQUIREMENT

When the addiction specialist is on board, at the face-to-face interview for the TCA application and the first TCA recertification* after January 1, 2001:

- The FIP case manager informs all TCA adults and minor parent applicants/recipients about the **FIP Substance Abuse Treatment and Services (SATS)** requirements and the sanctions imposed for failure to comply with screening and treatment.
- After the application interview, the case manager refers the applicant or recipient to the on-site addiction specialist for screening using the **Substance Abuse Screening Referral (DHR/FIA 1177)** form. Complete the top portion of form, providing as much demographic information as possible to the addiction specialist.

- The addiction specialist returns the 1177 to the FIP case manager within five working days of the referral date, indicating the individual's compliance with signature requirements, screening and/or assessment referral.
- The FIP case manager processes the TCA application or recertification within appropriate time frames ***taking into consideration the information on the 1177 returned by the addiction specialist***, using appropriate CARES coding (see CARES Procedures). Certify the case appropriately (12 months) and create an alert to review the case in four months.

****At subsequent recertification, only recipients who self identify or are identified by the case manager as needing substance abuse services are referred to the addiction specialist.***

Whenever an adult is added to the assistance unit or a minor in the unit becomes a parent, refer the individual to the addition specialist for signature requirements and screening.

SCREENING AND REFERRAL FOR ASSESSMENT

Upon receipt of the 1177, the addiction specialist interviews the individual, secures the individual's signature on the **Consent For the Release of Confidential Alcohol and Drug Treatment Information (DHR/FIA 1176)** and screens the TCA adult or minor parent applicant or recipient for substance abuse using instruments approved by the addictions agency.

- The addiction specialist notifies the FIP case manager using the middle section of the 1177 about the results of the substance abuse screening and referral for assessment, or if the TCA adult or minor parent fails to sign the 1176, or fails to complete the screening or assessment. As stated above, the addiction specialist must return this information within five working days of the referral.
- All adult and minor parent FIP applicants/recipients are required to sign a consent form (1176) authorizing the release of confidential information. ***This signature requirement remains unchanged (see AT #98-40 for more details on who must sign)***. The addiction specialist secures the TCA adult or minor parent's signature on the 1176. The addiction specialist gives the white copy (original signature) of the 1176 to the FIP case manager along with the 1177, to retain in the TCA case record. If necessary, the addiction specialist forwards a copy of the 1176 to an assessor and when appropriate, to treatment providers.
- If the customer signs the 1176 and the substance abuse screen is negative (#4 on 1177), no further action concerning substance abuse treatment is required by the addiction specialist or the FIP case manager. Process the TCA application or recertification using appropriate CARES coding (see CARES Procedures).

- If the screen is positive or the individual acknowledges a substance abuse problem, the addiction specialist conducts or refers the individual for a comprehensive assessment.
- Individuals who are not enrolled in an MCO are referred to local county assessors (Attachment V).
- Individuals enrolled in an MCO are referred to the MCO or to the Behavioral Health Organization designated by the MCO (Attachment VI).
- The addiction specialist completes the top part of the **Substance Abuse Identification and Treatment Notification (DHR/FIA 1178)**, to refer the customer whose screening was positive or who acknowledges a substance abuse problem to assessment and/or treatment. The addiction specialist makes a photocopy of the 1178 form for control purposes and sends the intact 1178 form to the assessor or treatment provider with a copy of the signed 1178.

ASSESSMENT AND TREATMENT REFERRALS

The addiction specialist maintains ongoing contact with the assessor or the treatment provider concerning the status of individuals referred to assessment or treatment. The addiction specialist gives information needed to determine eligibility to the case manager.

- The assessor or treatment provider notifies the addiction specialist in the local department about the results of the comprehensive assessment by returning the white and pink copy of the 1178 with Part I completed within 30 days of the date they receive the consent form.
- Treatment providers notify the addiction specialist about the ongoing treatment status of the adult or minor parent by completing Part II of an 1178 and forwarding the white and pink copy to the addiction specialist within 30 days whenever a reportable event occurs (Part II - 1 through 8 are considered reportable events).
- When an 1178 is received from an assessor or a treatment provider, the addiction specialist forwards the white copy of the 1178 to the case manager, to take appropriate action if needed, and to be maintained in the FIP case record. On all cases identified as subject to FIP substance abuse treatment requirements, the addiction specialist notifies the FIP case manager whenever one of the reportable events occurs, or at a minimum, every four months.

COMPLIANCE

When the case manager receives an 1177 or 1178 from the addiction specialist, the case manager must review the information to determine if the customer is in compliance with FIP substance abuse treatment requirements.

The 1177 indicates whether or not the individual has complied with the 1176 **signature requirements** and substance abuse **screening requirements**.

- An individual is in compliance if he or she signs the 1176 and completes the substance abuse screen, regardless of the results of the screen (#4, 5, 6, 7, and 9).
- The individual is not in compliance if the 1177 indicates he or she:
 - ❑ failed or refused to sign 1176 (#2), or
 - ❑ failed or refused to appear for screening or assessment (#1, 3, and 8).

The 1178 indicates that the individual was **screened positive** for substance abuse, referred for a comprehensive assessment and/or treatment services, and provides ongoing information concerning the individual's **compliance with the recommended treatment protocol**. If the individual is in compliance, eligibility for TCA is continued as long as the individual meets other TCA eligibility requirements.

- The individual is considered in compliance if the 1178 indicates that:
 - ❑ the results of the comprehensive assessment indicates no need for treatment,
 - ❑ the individual is awaiting availability of a treatment vacancy
 - ❑ the individual is enrolled in a treatment program
 - ❑ the individual has successfully completed the treatment program, or
 - ❑ the individual was referred to a new program
- The individual is considered not in compliance if the 1178 indicates that he or she:
 - ❑ failed to keep appointment for comprehensive assessment, treatment referral or enrollment
 - ❑ is not maintaining active attendance/participation
 - ❑ was discharged from a treatment program for non-compliance.

WORK REQUIREMENTS

The addiction specialist and the FIP case manager work together with the customer to ensure that the individual's Independence Plan is consistent with the recommended substance abuse treatment plan. Participating in substance abuse treatment is a countable activity, as Job Search/Job Readiness for both the federal work participation rate (if the required hours are met) and without regards to hours the 24-Month work requirement. It should be recorded in WOMIS using the JBT, Job Readiness Treatment, activity code.

- The addiction specialist, in consultation with the treatment provider, notifies the case manager when the customer is able to work or participate in job readiness/training/education. When the 1177 indicates the individual screened positive, acknowledged a substance abuse problem, or is currently in treatment at application, do not refer the individual for up-front job search until an 1178 is received concerning work readiness.
- If the customer's substance abuse screen is positive or the customer acknowledges a substance abuse problem, the addiction specialist also requests a copy of the customer's Independence Plan from the case manager. This becomes a permanent part of the addiction specialist's record.
- When a treatment provider indicates an individual is not able to work or has not assessed the individual's job readiness, and the individual fails to comply with substance abuse treatment requirements, follow the established substance abuse conciliation and sanction procedures. If conciliation is not successful, sanction the customer by removing the individual's needs from the grant. Pay the remainder to a third party. Do not refer the individual for work activities at this time, even though work participation requirement still apply since the individual is part of the TCA assistance unit. Refer the individual to Family Services and record the activity in WOMIS using the OTF activity code. Remember, all 24-Month customers must be engaged in an activity consistent with their Independence Plan, be in conciliation or have their case closed.

PURCHASE OF CARE

Only TCA adults and minor parents who are enrolled and actively participating in a treatment program may be considered as participating in an approved work activity and provided POC. Procedures remain the same as in Action Transmittal #99-01.

SUPPORTIVE SERVICES

When the assessment is positive for substance abuse the addiction specialist makes referrals for supportive services needed to enter treatment. This could include Family Services, transportation, childcare, or other wraparound services.

- When the assessment is positive for substance abuse, the addiction specialist makes a referral to the Family Services unit. The addiction specialist indicates on the referral that the customer has a substance abuse problem and may need preventive services and interventions for the difficulties intrinsic to families of substance abusers.
- The addiction specialist or the case manager notifies the Family Services unit when the customer fails to comply with treatment.

Family Investment and Family Services are working together to develop the process for the essential communication that needs to be maintained between Family Investment, Family Services and the addiction specialist. Once the process is developed an Action Transmittal will be distributed with detailed instructions on how that communication will be maintained.

SANCTIONS FOR NON-COMPLIANCE

The following obsoletes Substance Abuse Sanction Procedures in AT# 99-28

- When the case manager receives an 1177 or 1178 indicating that a TCA adult or minor parent **applicant** is not in compliance with FIP substance abuse treatment regulations, the case manager sends notification to the individual of their need to comply with program requirements. If the individual does not comply, **deny** the TCA application giving appropriate notice. Determine eligibility for Medical Assistance and Food Stamps separately (See CARES procedures).
- When the case manager receives an 1177 or 1178 on a TCA adult or minor parent **recipient** that indicates the individual is not in compliance with FIP substance abuse treatment requirements, the case manager sends notification to the individual that he or she is not in compliance and begins the conciliation process. If the addiction specialist does not verify that the individual is in compliance after 30 days, **close the case for non-compliance with signature requirements or remove the individual's needs from the TCA benefit for non-compliance with other treatment requirements**. For Food Stamps, phantom income rules apply. Medical Assistance eligibility for the individual continues (See CARES procedures). If the individual is also the head of household, pay the remainder of the TCA benefit to a third party.
- When the case manager begins conciliation procedures and sanctions an individual as the result of information received from the addiction specialist, complete an 1178, (top portion and Part IV) to inform the addiction specialist.

Applications:

If an individual fails to comply with substance abuse provisions at application, i.e. failed to sign consent form (1176) or failed/refused to complete screening/assessment, take the following actions:

- If the individual is an adult or minor parent who is head of household, **deny** the TCA application.
- If two parents are in the household and one or both parents fails to comply, **deny** the TCA application.
- If the individual is a minor parent who is not the head of household, process the application but **do not include the minor parent's needs** in the TCA assistance unit. Include the minor parent's child.

EXAMPLE:

Carrie is a 17-year-old, applying for TCA for herself and her one-year-old son. She lives with a non-relative friend since her parents moved out of town and left her. Carrie attends the screening with the addiction specialist but when asked to sign the 1176 consent form, she refuses. Carrie says that she is not signing the form, she does not have an alcohol or drug problem, and does not see why signing that form is part of what she has to do to get benefits. The addiction specialist notifies the case manager via the 1177 that Carrie failed to sign the 1176. If Carrie does not comply by the end of the 30th day of the application, deny the TCA application. Her applications for food stamps and Medical Assistance must be processed.

EXAMPLE:

Mr. and Mrs. Carson are applying for TCA for themselves and two children. After the interview with the case manager, both adults are referred to the addiction specialist using 1177s. Mr. Carson completes the screening with the addiction specialist and signs the 1176-consent form. However, Mrs. Carson leaves after the interview with the case manager and tells her husband she is "not going to any screening for substance abuse." After five days, the addiction specialist returns both 1177s to the case manager. Although Mr. Carson signed the 1176 and his screen was negative, Mrs. Carson's 1177 indicates that she failed to appear for screening. (Mrs. Carson has until the end of the 30th day of the application to comply). If Mrs. Carson fails to comply by the end of the 30th day, deny the TCA application. The food stamps and Medical Assistance applications must be processed.

Recipients - Active Ongoing Cases:

Two types of sanctions are imposed for failure to comply with substance abuse treatment provisions:

- Full family sanction (close the TCA case) for refusal to sign the substance abuse consent form (DHR/FIA 1176 Revised 9/00).
- Individual sanction for failing to comply with other FIP substance abuse treatment requirements. Remove the non-compliant individual's needs from the TCA grant and pay benefits to a third-party representative (identified by the customer or local department).

During the conciliation and sanctioning process the addiction specialist attempts to get the non compliant individual to comply.

Full-Family Sanctions (at recertification or interim change):

If a TCA adult or minor parent, who is the head of household, refuses to sign the CONSENT FOR THE RELEASE OF CONFIDENTIAL ALCOHOL AND DRUG TREATMENT INFORMATION DHR/FIA 1176 (Revised 9/00) form at recertification, the entire household is ineligible and a full family sanction is imposed for failure to comply with a FIP requirement.

EXAMPLE:

Ms. Klump receives assistance for herself and one child.

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| January 5 | As part of her recertification, she is referred to the addiction specialist for screening and asked to sign the new 1176 consent form. Ms. Klump refuses to sign the form and leaves. The addiction specialist gives an 1177 to the case manager indicating that Ms. Klump failed to sign the 1176. |
| January 10 | The case manager sends a conciliation letter to the customer, scheduling a conciliation conference. |
| January 17 | Ms. Klump has not responded to the conciliation letter, the case manager places a telephone call to Ms. Klump's home and is unable to contact her. |
| January 24 | There is still no response from Ms. Klump concerning the conciliation letter. The case manager makes another attempt to reach Ms. Klump by telephone and is unable to contact her. |
| February 2 | Ms. Klump is mailed a NOAA to close her TCA case for March if she does not respond to the notice sent. |
| March 1 | Effective date of closing for TCA case. |
| March 6 | Ms. Klump comes back in and must now complete a new application for TCA, see the addiction specialist and sign the 1176 consent form. The addiction specialist notifies the case manager via an 1177 that Ms. Klump has signed the 1176 and that results of the screening are negative. The addiction specialist also gives the original of the 1176 to the case manager. Ms. Klump is issued a full grant for March. |

In a two-parent household, if one or both parents refuse to sign CONSENT FOR THE RELEASE OF CONFIDENTIAL ALCOHOL AND DRUG TREATMENT INFORMATION DHR/FIA 1176 (Revised 9/00) form, the entire household is ineligible and a full-family sanction is imposed for failure to comply with a FIP requirement.

EXAMPLE:

Mrs. Mack receives assistance for herself and two children.

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| December 5 | Mrs. Mack reports to her case manager that her husband, Jimmy, has returned to the home. He is not able to work and requesting to be added to the TCA benefit. The case manager interviews the Macks to discuss Jimmy's request to be added to the TCA benefit and after the interview, sends Jimmy to the addiction specialist for screening. Mr. |
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Mack refuses to sign the consent form and leaves. The addiction specialist gives the 1177 to the case manager indicating that Mr. Mack failed to sign the 1176.

- December 10 Mrs. Mack received one 30-day conciliation period for substance abuse requirement some months ago. Therefore Mrs. Mack is mailed a NOAA to close her TCA case for January. She does not respond to the case manager.
- January 1 Effective date of closing for TCA case.
- January 25 The Macks come in to reapply for TCA. This time both Macks are referred to the addiction specialist for screening and signing of the new 1176. The addiction specialist notifies the case manager via 1177s that both Mr. and Mrs. Mack signed the 1176 and the results of the screening. Mrs. Mack's screening is negative but Mr. Mack is referred for a comprehensive assessment scheduled for February 1. The addiction specialist also gives the original of both 1176s to the case manager along with the 1177s. The addiction specialist makes a referral to the Family Service Unit since Mr. Mack's screen was positive. The Macks are issued a full grant for January.

Individual Sanctions

When an individual refuses to participate or fails to comply with the FIP substance abuse treatment requirements, the case manager must send appropriate notice and follow the conciliation procedures. If the individual fails to comply after 30 days, the individual's needs (difference between the grant amount with the customer included and without the customer) are removed from the grant.

Once an individual is identified as needing substance abuse treatment, the case manager must take into account Part III of the 1178 concerning work readiness. Even though the sanctioned individual remains part of the TCA assistance unit, if the 1178 indicates "not able to work," or the treatment provider has not yet had a chance to assess the individual's work readiness, do not refer the sanctioned individual to work activities. The substance abuse sanction remains until the individual complies with the substance abuse requirement.

However, if the 1178 indicates "able to work" or ready to participate in work activities, the sanctioned individual is subject to TCA work requirements. This means that if the individual does not meet the local department's work requirements, the case manager must follow the work requirement conciliation and sanction procedures.

EXAMPLE:

The Macks are receiving TCA for themselves and 2 children. Mr. Mack kept his appointment for a comprehensive assessment in February and was referred to a methadone maintenance program. The addiction specialist provided an 1178 to the case manager in February confirming that Mr. Mack was enrolled in the treatment program but was not able to work.

- April 18 The addiction specialist gives the case manager an 1178 indicating that Mr. Mack was discharged from his treatment program for not maintaining active participation. The addiction specialist notifies the Family Service Unit that Mr. Mack has failed to comply with substance abuse treatment.
- April 20 The case manager sends a conciliation letter.
- April 27 The case manager calls to get Mr. Mack to return to the program. The case manager talks with Mrs. Mack who says she has tried but cannot get her husband to return to the program. She says Jimmy has been taking her money, making it difficult to pay rent and purchase needed items for the children. In addition, since her husband returned to the home, her son has been having problems in school and is currently on disciplinary removal for fighting. Mrs. Mack says she is trying her best to complete her work-training program and needs help with holding her family together, especially in dealing with her son, until she completes the training and gets employment.
- May 9 The Family Service case manager contacts the Macks. Mr. Mack agrees to work with the Family Service case manager in resolving family issues and his non-compliance with the substance abuse requirement.
- May 12 Even though Mr. Mack is working with the Family Service case manager he remains in non-compliance with the substance abuse requirement. A NOAA is sent to Mrs. Mack notifying her that her TCA grant will be reduced. Mr. Mack is meeting the work requirement because he is working with the Family Service Unit.
- June 1 Mr. Mack's needs are removed from the grant ($\$530 - \$439 = \$91$). The TCA benefit is reduced to \$399. The case manager completes an 1178 to notify the addiction specialist of the sanction and also informs the Family Service unit of Mrs. Mack's request for help with family support. Mrs. Mack remains payee of the benefit.

Individual's Needs Removed from the Grant (with a third-party payee):

The needs of an individual who is the head of household who fails to comply with FIP substance abuse treatment regulations, are removed from the grant and the TCA benefit is paid to a third-party representative.

EXAMPLE:

Mrs. Lee is receiving TCA for herself and 3 children.

December 10	The case manager receives an 1178 from the addiction specialist that as a result of the comprehensive assessment, Mrs. Lee was referred for treatment to an intensive outpatient program.
December 19	The case manager receives another 1178 from the addiction specialist that Mrs. Lee did not appear for her enrollment appointment at the drug treatment program as directed. The addiction specialist notifies the Family Service Unit that Mrs. Lee has failed to comply.
December 21	The case manager sends a conciliation letter but gets no response.
December 28	The case manager calls Mrs. Lee's home and is unable to contact her.
January 12	A NOAA is sent to Mrs. Lee notifying her that her needs will be removed from the TCA benefit for February and she needs to identify a third party to receive the TCA benefits.
January 25	Mrs. Lee calls the case manager and names a third party representative. She says she will go into treatment and will come in to see the addiction specialist in a day or so. She does not come in.
February 1	Mrs. Lee's needs are removed ($\$530 - \$91 = \$439$) and the reduced TCA benefit of \$439 for the children is paid to the third-party representative payee. The case manager notifies the addiction specialist about the sanction.

Since Mrs. Lee did not keep her enrollment appointment with the treatment program, no assessment of her work readiness was done. Do not refer her to work activities. Make a referral to Family Services.

A substance abuse sanction is cured by compliance with the substance abuse provision for which the sanction was imposed. The addiction specialist will notify the case manager via the 1178 if the individual is in compliance with the provision for which the sanction was imposed. Following the LDSS procedures the addiction specialist will notify the Family Service Unit that the customer has complied.

The conciliation process is unchanged

FOOD STAMPS (for substance abuse sanction cases)

If the TCA application is **denied** and the family has also applied for food stamps, process food stamp application and pay benefits to all eligible household members based on any income received (TCA is not counted as phantom income at application).

If the TCA case is **closed** because of a substance abuse sanction, base food stamps on the TCA income (phantom income) and any other income received by members of the assistance unit prior to the sanction.

If the TCA benefit amount is **reduced** because of a substance abuse sanction, base food stamps on the TCA income (phantom income) and any other income received by members of the assistance unit prior to the sanction.

Customers are still subject to and must meet the Food Stamp Employment and Training (FSET) requirements.

MEDICAL ASSISTANCE (for substance abuse sanction cases)

If the TCA application is **denied**, process the MA application for all members of the assistance unit.

If the TCA application is **processed but the substance abuse sanctioned individual's needs are not included** in the TCA benefit assistance unit, the sanctioned individual is included in the Medical Assistance with the TCA unit members. (see CARES procedures for Individual Sanctions)

If a TCA case is sanctioned (**closed**), the MA will trickle to the appropriate coverage group.

If a TCA case has a substance abuse **individual sanction imposed**, the FO1 MA coverage will continue. (see CARES procedures for Individual Sanctions)

CARES PROCEDURES

To identify a case with an individual affected by the substance abuse treatment provisions, enter on the individual's **DEM1** screen in the **HOSPITAL** field:

- **SA1** - enrolled in a substance abuse treatment program
- **SA2** - awaiting available vacancy
- **SA3** - successfully completed treatment program
- **SA4** - failed to enroll in appropriate and available substance abuse treatment.
- **SA5** - failed to maintain active enrollment in appropriate and available substance abuse treatment.
- **SA6** - failed/refused to complete the screening or comprehensive assessment
- **SA7** - results of screening/assessment indicate individual not in need of substance abuse treatment
- **SA8** - failed/refused to sign consent form
- **SA9** - discharged for non-compliance
- **SA10** - referred to a new program

Individual Sanctions

TCA and MA Benefits:

When the customer has been determined non-compliant with substance abuse requirements and the customer's needs are removed from the grant, complete the following procedures:

- Enter on the non-compliant individual's **UINC** screen the amount of the sanction (the difference between the amount of the grant for the household size with the sanctioned individual and without the sanctioned individual) as:
 - **OA** (Other Countable, Cash Only) - The grant will then be in the correct amount for the sanctioning and still allow medical coverage.
 - Enter **OT** for the verification amount and **AC** for the frequency.
- On the **CAFI** screen, press **PF13** and enter the additional lines of text and COMAR citation:

According to Code of Maryland Regulations 07.03.03.04.

When a minor parent who is not the head of household does not sign the consent form, we cannot pay TCA for that person.

Individual's Name failed to sign the substance abuse consent form so your grant was reduced by \$ _____. You may contact the Family Services Unit for help.

OR

According to Code of Maryland Regulations 07.03.03.15.

When an adult or minor parent does not have a substance abuse screening or an assessment, we cannot pay TCA for that person.

Individual's Name failed to have a Screening and/or Assessment so your TCA grant was reduced by \$____. You may contact the Family Services Unit.

OR

According to Code of Maryland Regulations 07.03.03.15.

When an adult or minor parent does not enroll in appropriate and available substance abuse treatment, we cannot pay TCA for that person.

Individual's Name failed to enroll in treatment so your TCA grant was reduced by \$____. You may contact the Family Services Unit.

OR

According to Code of Maryland Regulations 07.03.03.15.

When an adult or minor parent does not stay enrolled in appropriate and available treatment, we cannot pay TCA for that person.

Individual's Name failed to stay enrolled in treatment so your TCA grant was reduced by \$____. You may contact the Family Services Unit.

OR

According to Code of Maryland Regulations 07.03.03.15.

When an adult or minor parent does not stay enrolled in a substance abuse treatment program, we cannot pay TCA for that person.

Individual's Name was discharged from a treatment program for not keeping program rules so your TCA grant was reduced by \$____. You may contact the Family Services Unit.

- If the non-compliant individual is also the head of household, add a third party payee to the **AREP** screen for TCA with **Rep Type P1** and issue an EBT card to that person
- The sanctioned customer remains active on the **TCA STAT** screen and therefore will continue to receive F01 medical coverage provided the customer continues to meet eligibility for the program.

REMINDER: Use the appropriate recertification end date but create an alert to review every four months **ALL** TCA assistance units with an individual affected by the substance abuse treatment provisions (including those who are in compliance).

FOOD STAMP BENEFIT CALCULATIONS

To issue the correct Food Stamp benefit to a household that has an individual being sanctioned use the following procedure:

- On the UINC screen of the Head of Household enter the TCA benefit amount (this is the difference between the grant amount for the household with the sanctioned individual and the amount without the individual) as “phantom” income using the code “OF” (other unearned income, Food Stamp countable only).
- **This will maintain the FS allotment at the level prior to the sanction.**

Full-Family Sanctions

TCA and MA Benefits (At Recertification):

When the customer refuses to sign the consent form and the case must be closed:

- Enter code 566 “NON-COOPERATION WITH ELIGIBILITY PROCESS” on the TCA STAT screen in the AU Status Reasons field.
- When the TCA AU is closed this will cause an MA AU to trickle and or sprout to the appropriate track for the entire family.
- On the CAFI screen, press PF13 and enter the following additional lines of text and COMAR citation:

Your household is not entitled to TCA benefits because Individual's Name failed to sign the substance abuse consent form. According to Code of Maryland Regulations 07.03.03.04C(5).

Food Stamp Benefit Calculation

To issue the correct Food Stamp benefit to a household that is sanctioned the following procedure must be used:

- On the UINC screen of the Head of Household enter the TCA benefit amount as “phantom” income using the code “OF” (Other unearned income, Food Stamp countable only).
- **This will maintain the FS allotment at the level prior to the sanction.**

FOOD STAMPS (for substance abuse sanction cases)

If the TCA application is **denied** and the family has also applied for food stamps, process food stamp application and pay benefits to all eligible household members based on any income received (TCA is not counted as phantom income at application).

If the TCA case is **closed or benefits are reduced** because of an individual or full family sanction, the food stamp benefits are calculated using the TCA benefits as "phantom income."

Customers are still subject to and must meet the Food Stamp Employment and Training (FSET) requirements.

WORK REQUIREMENTS

For individuals receiving Substance Abuse treatment enter the following information on the WORK screen:

If the individual is receiving TCA and Food Stamps, or TCA alone:

- Under TCA in the **"Requirement"** field enter **"YE"** and in the **"Status"** field enter **"AT"** (Substance Abuse Treatment).

If the individual is receiving Food Stamps alone:

- Under Food Stamps in the **"Registration Status"** field enter **"EX"** and in the **"Exempt Reason"** field enter **"DA"** (Drug/Alcohol Treatment).

CASES ESTABLISHED PRIOR TO THE REVISED SUBSTANCE ABUSE PROCESS

Once the addiction specialist is on board, case managers will forward copies of the 1176, 1177, and 1178's to the addiction specialist on all current recipients enrolled in substance abuse treatment, awaiting available treatment, and individuals sanctioned for failure to comply with substance abuse assessment/treatment. Those customers will become part of the new procedures.

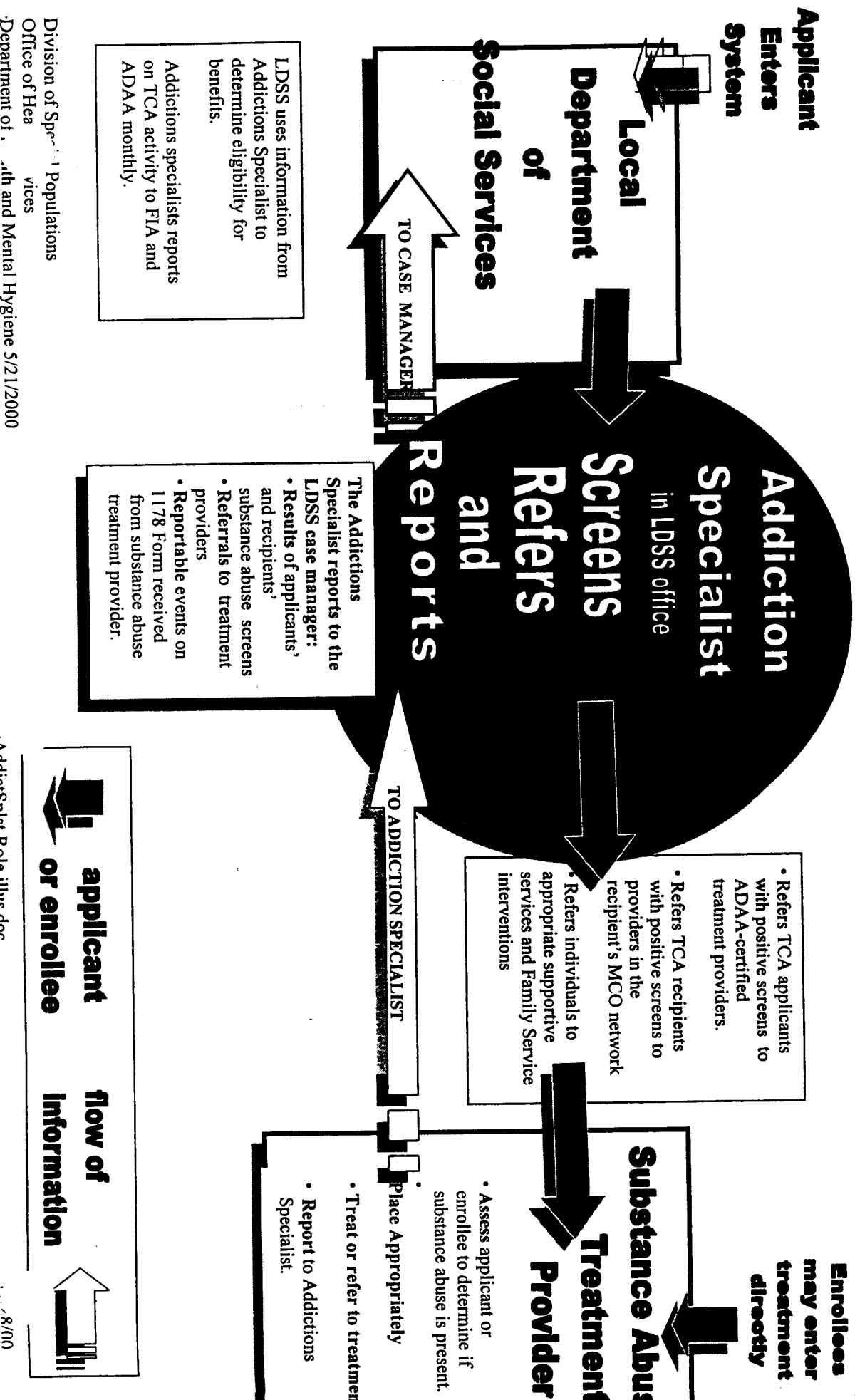
INQUIRIES: Please calls Cynthia Davis at (410) 767-7495 with policy questions and Gina Roberts at (410) 238-1297 with CARES questions. Addiction specialists may direct inquiries concerning TCA reports to Anthony Stepney at (410) 767-7069 and clinical questions to Robyn Webster (410) 767-6396.

C:	DHR Executive Staff	FIA Management Staff
	DHMH Executive Staff	ADAA Management Staff
	Constituent Services	OHS Management Staff
	DHR Help Desk	

SUBSTANCE ABUSE TREATMENT AND SERVICES PROGRAM

Role of the Addictions Specialist

•Screens •Refers •Reports



**CONSENT FOR THE RELEASE OF
CONFIDENTIAL ALCOHOL AND DRUG TREATMENT INFORMATION
by Substance Abuse Assessment and Treatment Providers to Departments of Social Services**

Head of Household _____ **DSS Office** _____

MA# _____ **AU ID#** _____ **SS#** _____

I, _____, authorize the substance abuse assessment or
Print name

treatment provider that I am referred to for assessment or treatment, or that is treating me, to report to the Department of Social Services (DSS) office named above the information listed below, if it has this information about me:

- That the substance abuse treatment provider has received my consent form and referral for treatment from the Addictions Specialist;
- That I did not keep an appointment for a comprehensive substance abuse assessment ordered by the Addictions Specialist in the DSS office;
- That a comprehensive substance abuse assessment indicates that I am not in need of substance abuse treatment;
- That I have been referred for substance abuse treatment;
- That I did not schedule and appear for my first appointment for substance abuse treatment within 30 days of referral or as soon as I could get an appointment;
- That I am waiting for room for me in the kind of substance abuse treatment program I was referred to;
- That I am enrolled in a substance abuse treatment program;
- That I am not maintaining active attendance or participation in the treatment program;
- That I have been discharged from a treatment program for noncompliance;
- That I successfully completed the substance abuse treatment that I was referred to;
- That I was referred to another substance abuse treatment program, and the name of that program.
- That I have been tested for drug use and results of the test. (FOR PERSONS CONVICTED OF A DRUG FELONY)

This release is necessary to comply with State law which requires that this information has to be reported to your local DSS office if you are going to receive Temporary Cash Assistance (TCA) benefits, and to receive TCA and Food Stamps if you have been convicted of a drug felony.

I understand that my records are protected under the federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR Part 2, and cannot be reported to anyone without my written consent unless those regulations provide otherwise. I also understand that I can cancel this consent at any time, but the cancellation will not apply to the past acts someone who was covered by this consent at the time and relied on it; if I do cancel this consent, I could lose my TCA or Food Stamp benefits. In any case, this consent will automatically be canceled when my TCA and Food Stamp benefits end.

Signature

Date

PROHIBITION OF REDISCLOSURE

This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR part 2). The federal rules prohibit any further disclosure of this information unless expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse treatment patient.

SUBSTANCE ABUSE SCREENING REFERRAL FORM

Date _____

DSS Office _____ **MA No.** _____

Head of Household _____ **AU No.** _____

Applicant/Recipient Name _____ **SS No.** _____

Address _____ **Telephone No.** () -

_____ **Zip** _____

DOB _____ **MCO (if applicable)** _____

LDSS Case Manager _____ **Telephone No.** () -

Addiction Specialist Completes

1. ☐ Customer failed to appear for screening.
 2. ☐ Customer failed to sign 1176
 3. ☐ Customer refused to be screened and/or assessed.
 4. ☐ Customer's screen was negative.
 5. ☐ Customer's screen was positive. (Forward Independence Plan to Addiction Specialist)
 6. ☐ Customer acknowledged a substance abuse problem. (Forward Independence Plan to AS)
 7. ☐ Customer referred for assessment/treatment to: _____ on _____
(Name of Provider) (Date)
 8. ☐ Customer failed to appear for referred assessment/treatment by _____
(Date)
 9. ☐ Customer currently in treatment at _____
- Verified by _____ () - _____
(Contact person at provider) (Telephone No.) (Date)
10. ☐ Service Referral made on _____
(Date)
 11. ☐ Comments: _____

For persons convicted of a drug felony

12. ☐ Referred for drug testing/assessment to _____ on _____
(Name of Provider) (Date)
13. ☐ Results ☐ Positive ☐ Negative _____
(Date)

Addiction Specialist _____ **Telephone No.** () -

SUBSTANCE ABUSE IDENTIFICATION AND TREATMENT NOTIFICATION

Enrollee Name _____ AU No. _____
 Address _____ Zip _____ MA No. _____
 DOB _____ Telephone No. () - _____ SS No. _____
 MCO _____

Addiction Specialist/DSS Office _____
 Address _____ Telephone No. () - _____
 Treatment Provider _____
 Address _____ Telephone No. () - _____
 SAMIS Identification No. _____ Provider No. _____

Part I. Comprehensive Substance Abuse Assessment ☐ or Drug Test ☐ (Check one)

1. Date provider received consent form and referral ____/____/____
2. Date of appointment ____/____/____
3. Results of drug test: Positive ☐ Negative ☐
4. ☐ Patient failed to keep appointment for comprehensive substance abuse assessment or drug test.
5. ☐ Comprehensive assessment indicates patient not in need of substance abuse treatment.
6. ☐ Patient referred for treatment to: _____ on ____/____/____.

Signature of provider _____ Telephone No. () - _____

Print or type name _____ Date _____

Part II. Treatment Compliance Notification

Level of Care Provided _____

1. Date provider received consent form and referral ____/____/____
2. ☐ Patient failed to appear for initial appointment within 30 days of referral or if no appointment available within 30 days of referral, patient failed to schedule and appear for first available appointment.
3. ☐ Awaiting available vacancy.
4. ☐ Enrolled in treatment program
5. ☐ Not maintaining active attendance/participation.
6. ☐ Discharged for noncompliance.
7. ☐ Successfully completed program.
8. ☐ Referred to _____ on ____/____/____.

New Program _____ Date _____

Admission date: ____/____/____ Discharge date: ____/____/____

Discharged to (provider) _____ Level of Care _____

New Provider's Address _____ Zip _____ Telephone No. () - _____

Signature of treatment provider or designee _____ Date ____/____/____

Print or type name _____ Telephone No. () - _____

Part III. Work Readiness

1. ☐ Not able to work
2. ☐ Not ready to work but could participate in job readiness/training/education
3. ☐ Able to work.
4. ☐ Other _____

Signature of treatment provider or designee _____ Date ____/____/____

Part IV. Case Manager Action Taken

Case Manager Name _____

1. ☐ Conciliation ____/____/____ date began.
2. ☐ Sanction ____/____/____ effective date.
3. Active Service case ☐ YES ☐ NO

Comments: _____

DHR/FIA 1178 (Revised 9/00) Previous editions obsolete

WHITE-DSS Case Record Copy YELLOW-Assessor/Treatment Provider PINK-Addictions Specialist Copy

LOCAL ALCOHOL AND DRUG ABUSE ASSESSORS

ALLEGANY COUNTY

Allegany County Health Department
Outpatient Treatment Department
P.O. Box 1745, Willowbrook Road
Cumberland, MD 21502
(301) 777-5680 FAX (301) 777-5674

ANNE ARUNDEL COUNTY

Anne Arundel County Mental Health
Addictions Referral Line
2200 Somerville Road
Annapolis, MD 21401
(410) 222-7265 FAX (410) 222-7294

BALTIMORE CITY

Baltimore Substance Abuse Systems, Inc
1 North Charles Street
Baltimore, Maryland 21201
(410) 637-1900 Fax (410) 637-1911

BALTIMORE COUNTY

Baltimore County Substance Abuse
See attached for assessment office
Based on clients residence (zip code)

*Changed anticipated

CALVERT COUNTY

Calvert County Health Department
Calvert County Substance Abuse Services
P.O. Box 1158
Prince Frederick, MD 20678
(410) 535-3079 FAX (410) 535-5285

CAROLINE COUNTY

Caroline County Health Department
Caroline County Addictions programs
P.O. Box 10
104 Franklin Street
Denton, MD 21629
(410) 470-1882 FAX (410) 479-4918

CARROLL COUNTY

Carroll County Health Department
Bureau of Addictions Treatment Services
P.O. Box 845
Westminster, MD 21158
(410) 876-4800 FAX (410) 876-4832

CECIL COUNTY

Cecil County Health Department
Alcohol and Drug Center
401 Bow Street
Elkton, MD 21921
(410) 996-5106 FAX (410) 996-5179

CHARLES COUNTY

Charles County Health Department
Substance Abuse Services
2670 Crain Highway, Suite 300
Waldorf, MD 20604
(301) 843-8324 FAX (301) 645-3826

HARFORD COUNTY

Outpatient Alcohol & Drug Services
P.O. Box 797
5 N. Main Street
Bel Air, MD 21014
(410) 638-3076 FAX (410) 879-2199

DORCHESTER COUNTY

Dorchester County Health Department
Drug and Alcohol Health Services
310 Gay Street, Lower Level
Cambridge, MD 21613
(410) 228-7714 FAX (410) 228-8049

HOWARD COUNTY

Howard County Health Department
Addictions Services
7101 Riverwood Drive
Columbia, MD 21046
(410) 313-6202 FAX (410) 313-6212

FREDERICK COUNTY

Frederick County Health Department
Project 103
300- B Scholls's Lane
Frederick, MD 21702
(301) 694-1775 FAX (301) 698-9161

KENT COUNTY

Kent County Health Department
Publick House
114 South Lynchburg Street
Chestertown, MD 21620
(410) 778-2616 FAX (410) 778-7052

GARRETT COUNTY

Garrett County Health Department
Garrett County Addictions Services
221 South Third Street
Oakland, MD 21550
(301) 334-8115 FAX (301) 334-8856

MONTGOMERY COUNTY

Addictions Services Coordinator
105 Fleet Street
Rockville, MD 20877
Walk In Only 9-11am & 1-3 pm
(301) 279-1332 Fax (301) 279-1036

PRINCE GEORGE'S COUNTY

See attached program locations or
Addictions Specialist on Site

QUEEN ANNE'S COUNTY

Queen Anne's County Health Department
Alcohol and Drug Abuse Services
206 North Commerce Street
Centreville, MD 21617
(410) 758-1306 FAX (410) 758-2133

ST. MARY'S COUNTY

Walden Sieria
St. Andrew's Church Road
P.O. Box 1238
California, MD 20619
(301) 863-6661 FAX (301) 862-4880

SOMERSET COUNTY

Somerset County Health Department
Addictions Specialist on Site at DSS
Specialist will handle referrals
(410) 651-5660 FAX (410) 651-5680

TALBOT COUNTY

Talbot County Health Department
Addictions Programs
301 Bay Street
Suite 307
Easton, MD 21601
(410) 819-5900 FAX (410) 819-0591

WASHINGTON COUNTY

Washington County Health Department
Division of Addictions
1302 Pennsylvania Avenue
Hagerstown, MD 21742
(301) 791-3242 FAX (301) 791-3239

WICOMICO COUNTY

Wicomico County Health Department
Addictions
108 E. Main Street
Salisbury, MD 21801
(410) 742-3784 FAX (410) 543-6680

WORCESTER COUNTY

Worcester County Health Department
Alcohol & Other Drug Programs

Snow Hill Health Center
6040 Public Landing Rd
Snow Hill, MD 21863
(410) 632-1100

Pocomoke Health Center
400 A Walnut Street
Pocomoke, MD 21851
(410) 957-2005

WACS Center
11827 Ocean Gateway
Ocean City, MD 21842
(410) 213-0202

BALTIMORE COUNTY BUREAU OF SUBSTANCE ABUSE OPERATED TREATMENT PROGRAMS

EPOCH COUNSELING CENTER- LANSDOWNE (256A) Printer # 230 789-2647/ 2706
3902 Annapolis Road
Lansdowne, Maryland 21227 Fax 789-8364

COORDINATOR: Matt Braswell HOURS: Tues & Wed 8:30am-9:30pm
OFFICE MANAGER: Carolyn Roeth Mon, Thurs & Fri 8:30am-4:30pm

AREA SERVED: Arbutus, Baltimore Highlands, Belmont, Brooklyn, Catonsville, Halethorpe,
Hollifield, Lansdowne, Oella, Relay, Rosemon

ZIP CODES: 21112, 21116, 21227, 21228, 21229, 21207 (west of Dogwood Rd)

NORTHWEST AREA PROGRAM/ FIRST STEP (0989) Printer # 223 887-0624/00625
Liberty Family Resource Center
3424 resource Drive Fax 887-0713

COORDINATOR: Paul Sacks HOURS: Mon & Wed 8:30am- 9:30pm
OFFICE MANGER; Constance Taylor Tues, Thurs & Fri 8:30am-4:30pm

AREA SERVED: Fowbleburg, Garrison, Glyndon, Granit, Hebbville, Lochearn, Milford, Owings
Mills, Pikesville, Randallstown, Reistertown, Wards Chapel, Woodensberg,
Woodstock, Worthington, Woodlawn.

ZIP CODES: 21020, 21022, 21055, 21070, 21071, 21105, 21117, 21133, 21136, 21153, 21207, (west
of Dogwood Rd) 21208, (county only), 21209 (west of Falls Rd), 21215(county only),
21244(west of Dogwood Rd).

NORTHERN AREA TREATMENT PROGRAM (0985) printer # 232 887-7671
2 West Aylesbury Road
Timonium, Maryland 21293 Fax 887-7706

COORDINATOR: Nicholas Palamieri HOURS: Mon, Tues,& Thurs 8:30am-9:30pm
OFFICE MANAGER: Deana Gischel Wed & Fri 8:30am-4:30pm

AREA SERVED: Butler, Carney, Cockeysville, Jacksonville, Lutherville, Manor Maryland Line,
Monkton, Oakleigh, Parkton, Parkville, Ruxton, Shawan, Sparks, Sweet Air,
Timonium, Towson, White Hall, White House.

ZIP CODES: 21023, 21030, 21053, 21088, 21093, 21105, 21111, 21120, 21131, 21139, ,
21152, 21161, 21169, 21204, 21209, (east of Falls Rd/ County only), 21234,
21239, (county only), 21212, (county only), 21239,(county only)21239,
21284(Eudowood P.O. Box), 21280, 21289, (Towson P.O Box)

EASTERN AREA TREATMENT PROGRAM (0224) Printer # 234 887-6465
9100 Franklin Square Drive, 3rd Floor MS # 1102V
Baltimore, Maryland 21237 Fax: 887-0418

COORDINATOR: J. Nicholas Deutsch
OFFICE MANGER: Faye Hiles
HOURS: Mon, Wed, & Thurs 8:30am-9:30pm
Tues, & Fri 8:30am-4:30pm

AREA SERVED: Baldwin, Bradshaw, Chase, Essex, Fork, Fullerton, Gittings, Hydes, Kingsville, Manorview, Middle River, Overlea, Perry Hall, Rossville, union Church, White Marsh.

ZIP CODES: 21013, 21021, 21027, 21051, 21057, 21082, 21087, 21092, 21118, 21128, 21156, 21167, 21206, 21220, 21221, 21236, 21237, 21162

EPOCH COUNSLING CENTER, SOUTHEAST (0256) Printer #234 887-7344/7345
7701 Dunmanway Fax 887-7190
Dundalk, Maryland 21222

COORDINATOR: Diana Givins
OFFICE MANAGER: Pamela Sexton
HOURS: Mon, Tues 8:30am-9:00pm
Wed, Thurs & Fri 8:30am-5:00pm

AREA SERVED: Carnegie, Platt, Dundalk, Edgemere, Fort Howard, Frankton, Grange, Gray Manor, Harborview, Inverness, Lodge Farm, Sollers Point, Sparrows Point, Turner Station.

ZIP CODES 21052, 21219, 21222, 21224

COURT EVALUATION UNIT Phone: 887-3828
Coordinator- Nicholas Gori Fax: 887-3786

BOCAT Phone: (410) 823-7225
208 Washington Ave.
Towson, Maryland 21204

AWARE (Women's Program) Phone: (410) 377-0990
6229 N. Charles Street
Baltimore, Maryland 21212

EPOCH COUNSELING - CATONSVILLE Phone: (410) 744-5937
800 Ingleside Road Fax: (410) 744-4674
Catonsville, Maryland 21228

COMMUNITY COUNSELING RESOURCE CTR. Phone: (410) 628-6120
Cranbrook Building
10400 Ridgland Road
Cockeysville, Maryland 21030

EPOCH COUNSELING - ESSEX

Stem- Ross Professional Center
621 Stemmers Run Road, Suite E
Essex, Maryland 21221

Phone: (410) 574-2500
Fax: (410) 574-4478

AWAKENINGS

2 West Aylesbury Road
Timonium, Maryland 21093

Phone: (410) 561-9591

EPOCH COUNSELING - DUNDALK

Eastpoint Office Park
1107 North Point Blvd, Suite 205
Baltimore, Maryland 21224

Phone: (410) 284-3070
Fax: (410) 285-3848

**PRINCE GEORGE'S COUNTY HEALTH DEPARTMENT
DIVISION OF ADDICTIONS AND MENTAL HEALTH
PROGRAM LOCATIONS**

D. LEONARD DYER HEALTH CENTER

Southern Region Addictions
9314 Piscataway Road
Clinton, MD 20735
Phone (301) 856-9400
Fax (301) 856-9589

PENN-SILVER HEALTH CENTER

Prevention Program
5408 Silver Hill Road
Forestville, MD 20747
Phone (301) 817-3070
Fax (301) 817-3085

PENN-SILVER HEALTH CENTER

Central Region Addictions
5408 Silver Hill Road
Forestville, MD 20747
Phone (301) 817-3070
Fax (301) 817-3085

**COMMUNITY OUTREACH AND
TREATMENT SERVICES (COATS)**

6490 Landover Road
Landover, MD 20785
Phone (301) 772-1192
Fax (301) 772-2831

PENN-SILVER HEALTH CENTER

Northern Region Addiction
5408 Silver Hill Road
Forestville, MD 20747
Phone (301) 817-3077
Fax (301) 817-3205

OASIS

702 Gorman Avenue
Laurel, MD 20702
Phone (301) 498-4500
Fax (301) 498-4502

ADMINISTRATIVE OFFICE

1701 MCORMICK DRIVE, SUITE 230
LARGO, MARYLAND 20774
PHONE (301) 883-7853 FAX (301) 883-7881

*Northern Region is temporarily located in Penn-Silver until renovations are completed.

Authorization Numbers for MCO Enrollee Referrals for Substance Abuse Assessment or Treatment

Managed Care Organization	Behavioral Health Organization (BHO)	Number to call for Authorization
AMERICAID Community Care See below for Johns Hopkins Medical Services Corporation	ValueOptions	1-877-888-6445 FAX: 1-214-492-1681
FreeState Health Plan See below for Total Health Care	Magellan	1-800-441-6001 FAX: 410-123-6981
Helix Family Choice	Magellan	1-800-441-6001 FAX: 410-423-6981
Jai Medical Systems		Debbie Vane 410-433-2200 FAX: 410-433-4615
MD Physicians Care	Glass Substance Abuse	410-225-9185 1-800-725-9185 FAX: 410-907-4107
PrimeHealth Corp.		Dennis Roy Graham 301-731-7140 x511 Pager 1-888-479-9181 FAX: 1-301-429-5681
Priority Partners	Bay Meadow Health Service	1-800-261-2429 410-424-4476 x 8628 FAX: 410-424-4891
United Health Care's Family First	United Behavioral Health	1-888-291-2507 FAX: 1-800-557-5785

Some AMERICAID enrollees receive services through Johns Hopkins Medical Services Corporation (JHMSC), and some FreeState enrollees receive services through Total Health Care (THC). Addictions Specialists and treatment providers can determine where an individual with an AMERICAID or FreeState card receives services in one of three ways:

Action	AMERICAID	FreeState
Check the member ID card and call as appropriate.	JHMSC cards have a "JH" For authorization: 410-424-4657	THC enrollees have "810" before the site/PCP identification.
Call the MCO member services number.	1-800-600-4441	410-998-5698 or 1-800-640-3872
Call the BHO as for any enrollee. BHO staff will determine where the enrollee receives services.	ValueOptions 1-877-888-6445	Magellan 1-800-441-6001

Total Health Care Authorization Numbers		
Name	Telephone	Pager
Wendy Merrick	410-361-8111	410-232-5605
Adrienne Britton-Robinson	410-361-8113	410-232-5346

Please report changes in personnel or contact numbers to (410) 767-1434

Division of Special Populations
Office of Health Services
Department of Health and Mental Hygiene
January 8, 2001