



TEXAS DEPARTMENT OF STATE HEALTH SERVICES

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COMMISSIONER

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Dear HIV Administrative Agency;

As we enter 2008, we find the Medical Case Management (MCM) project near the completion of phase one, the literature review. Phase two, the survey of current practice in other jurisdictions across the U.S., is set to begin. We continue to learn through each step, and therefore find it important to communicate our thoughts as they evolve over time.

First on everyone's issue list is the waiver process for non-licensed staff. Once we complete the entire project in October 2008, we will be in a better position to make decisions about required licensure, and the criteria used to evaluate applications for waivers. We will not begin evaluating requests for waivers until January 2009. Current non-licensed case managers may continue in their positions and appropriate waivers should be requested once the criteria and process are made public. However, when considering new hires starting on or after April 2008, agencies should budget for and place only licensed staff in vacant MCM positions.

Not every agency is going to be able to deliver the services required for MCM. A core element of MCM is the integration of case management staff into the clinical care team. We envision the Medical Case Manager working in concert with the medical care team and problem-solving around medical issues everyday, several times a day. It will be important to understand your own capacities and development needs, as regardless of licensure, only those agencies that can deliver service which meets the core elements as outlined in the DSHS taxonomy should be providing MCM.

While we remain committed to the availability of MCM in every area of the state, this stance does not necessarily render social case management obsolete. If there is a role for non-medical case management, it must add value by enhancing access and maintenance in medical care. Remember, all case management providers, both social and medical, must meet the core case management standards adopted June 2006.

Thank you for your continued good work,

Ann Robbins, Ph.D.
HIV/STD Comprehensive Services Branch Manager