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Medicaid Mental Health Case Management

Mental Health Case Management

Medicaid-funded mental health case management is a community service provided for individuals who are eligible for Medicaid and who also have severe and persistent mental or emotional disorders that seriously impair their functioning.

As with all Medicaid funded services, there are also financial eligibility criteria.

Case Managers assist individuals to:

- Determine their physical, social, and medical needs;
- Find providers and make appointments;
- Link to community services and benefits such as food stamps, community resources, and educational programs;
- Monitor their progress; and
- Advocate for themselves when necessary.

If you answer yes to these questions, and you receive Medicaid, you may be eligible for Medicaid-funded mental health case management

- Do you have a clinical diagnosis of a serious mental health disorder such as schizophrenia, major depression, paranoia, bipolar depression, or other psychotic disorder?
- Does your mental health disorder severely impair your ability to function?
- Have your difficulties lasted a long time?
- Have you ever been in a psychiatric hospital, residential care program, or intensive outpatient treatment?

Next Steps

If you think that you might qualify for Medicaid-funded mental health case management, contact your local Community Services Board (CSB). To find

information online, visit <u>VirginiaNavigator</u>, enter "Community Services Boards" or "CSB" in the "What do you need?" box and put in your zip code. After you contact the CSB, a case manager will schedule a time to meet with you and assess your needs.

For more information about this and other Medicaid programs go to these links on the Department of Medical Assistance Services website:

- Virginia Medicaid
- Behavioral Health

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