

# Family Case Management

Illinois Department of Human Services (IDHS)

## OVERVIEW

The program provides access to medical care, pediatric health education and counseling, developmental screening, and referrals to other community services as needed. Key Services include:

- Access to medical care
- Outreach and case management
- Referrals
- Education
- Identify and resolve barriers to accessing needed services
- Home visits (at least one during pregnancy or infancy)

DCFS wards and high-risk infants are case managed through two initiatives that are components of Family Case Management:

- **Medical Case Management of DCFS Wards:** The program provides medical case management services to all Wards in the legal care and custody of DCFS and placed in substitute care from birth through age five (5) years, and pregnant DCFS Wards and children of parenting DCFS Wards. Medical case management refers to medically-related services provided by a person trained or experienced in medical or social services as described in 77 Ill. Adm. Code 630.220.
- HWIL works in collaboration and cooperation with DCFS and others such as medical and social service providers to assure that the ward receives all services needed to promote health and well-being.
- **APORS/High Risk Infant Follow-Up:** HRIF is federally funded by Case Management and Title XX Health Support Services funds, to provide case management services to families with high-risk infants identified by the Adverse Pregnancy Outcomes Reporting System (APORS); high-risk pregnant women identified by Level II Perinatal facilities; infants diagnosed with a high risk condition after newborn hospital discharge; and/or infants and children at medical and/or environmental risk because of an adolescent parent, drug-abusing parent or high-risk situation identified by the public health nurses. In addition to Title XX Health Supports Services funds, Medicaid and/or medically indigent funds may be used to provide services to high-risk clients. The goals of HRIF services are: promotion of optimal growth and development; teach the family care of the high-risk infant; prevent complications; decrease morbidity and mortality; decrease stress and the potential for abuse; and ensure early identification and referral for further treatment and evaluation.

## WHO IS SERVED?

*Population(s)/Age Group:*

The target population for FCM is pregnant women and infants. The program serves special populations, such as incarcerated pregnant women of the Cook County Department of Corrections via Cermak Health Services and high-risk inter-conceptual women through the Women's Health Behavioral Program at the University of Illinois.

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## Eligibility Criteria and Screening Tools:

- Medicaid-eligible pregnant women and infants living under 200% of the federal poverty level
- Medicaid-eligible children one year and older living under 185% of the federal poverty level
- Pregnant women and children with a high-risk medical condition

## HOW ARE SERVICES DELIVERED?

### Local Service System:

Services are delivered through local health departments and community based organizations. To find a Family Case Management program, visit the [DHS Office Locator](#) and select Family Case Management from the drop down list.

### Referrals into Program:

Women can be referred by physicians or IDHS case managers; high risk infants can be referred during hospital discharge.

### Data Systems Used:

All DHS funded providers providing FCM services use Cornerstone. DCFS caseworkers use the Statewide Automated Child Welfare Information System (**SACWIS**).

## STATE PROGRAM ADMINISTRATOR OR CONTACT

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