

7.20. Targeted Case Management – Child/Adolescent

TARGETED CASE MANAGEMENT (CARE COORDINATION SERVICES) (CHILD/ADOLSCENT)

Principles for Medical Necessity Criteria

Care coordination services are provided to assist participants in gaining access to needed medical, mental health, social, educational and other services.

When participants have a mental disorder that require professional evaluation and treatment, they should be treated at the least intensive setting able to meet their medical needs.

Satisfaction of all admission and continued care criteria must be documented in the clinical record based upon the conditions and factors identified below before treatment will be authorized.

CRITERIA

<p>Admission Criteria</p>	<p>All of the following criteria are necessary for admission:</p> <ul style="list-style-type: none"> A. The participant has a PBHS specialty mental health DSM 5 diagnosis which requires, and is likely to respond to, therapeutic intervention. B. The participant is at-risk of, or needs continued community treatment to prevent inpatient psychiatric treatment. C. The participant is at-risk of, or needs continued community treatment to prevent treatment in a residential treatment center (RTC) D. The participant is at-risk of and out of home placement due to multiple behavioral health stressors. E. The participant requires community treatment and support in order to prevent or address emergency room utilization due to multiple behavioral health stressors; or F. The participant requires community treatment and support in order to prevent or address homelessness or housing instability, or otherwise lacking in permanent, safe housing; or G. The participant requires community treatment and support in order to prevent or address arrest or incarceration due to multiple behavioral health stressors.
<p>Severity of Need and Intensity of Service</p>	<p>Medical necessity for admission to care coordination services must be documented by the presence of all of the criteria. Active involvement of the participant, family, caretaker or others involved in the participant’s treatment should be sought. Levels of service include:</p> <p>Level I - General: Based on the severity of the participant’s mental illness, and the participant meets at least two of the following conditions:</p>

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1. Not linked to behavioral health, health insurance, or medical services
2. Lacks basic supports for education, income, shelter, or food
3. Transitioning from one level of intensity to another level of intensity of services
4. Needs care coordination services to obtain and maintain community-based treatment and services.
5. The participant is currently enrolled in Level II or III care coordination services and has stabilized to the point that Level I is most appropriate.

Level 2 - Moderate: Based on the severity of the participant’s mental illness, and the participant urgently meets three or more of the following conditions:

1. Not linked to behavioral health services, health insurance or medical services
2. Lacks basic supports for education, income, food or transportation
3. Homeless or at-risk for homelessness
4. Transitioning from one level of level of intensity to another level of intensity including out of inpatient psychiatric or substance use services; RTC; or 1915(i) services
5. Multiple behavioral health stressors within past 12 months, such as history of psychiatric hospitalizations, repeated visits or admissions to emergency room psychiatric units, crisis beds, or inpatient psychiatric units
6. Needs care coordination services to maintain community-based treatment and services.
7. The target populations may include participants transitioning to a community setting and case management services will be made available for up to 180 consecutive days of the covered stay in the institution.
8. The participant is currently enrolled in Level III care coordination services and has stabilized to the point that Level II is most appropriate.
9. The participant is currently enrolled in Level I care coordination and has experienced one of the following adverse childhood experiences during the preceding six months:
 - a. Emotional, physical, or sexual abuse
 - b. Emotional or physical neglect

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- c. Significant family disruption or stressors

Level 3 – Intensive: Based on the severity of the participant’s mental illness the participant urgently meets at least one of the following conditions:

1. Has been enrolled in the 1915(i) for six months or less
2. The participant is currently enrolled in Level I or Level II targeted case management and has experienced one of the following adverse childhood experiences during the preceding six months:
 - a. Emotional, physical, or sexual abuse
 - b. Emotional or physical neglect
 - c. Significant family disruption or stressors
3. Meets the following conditions:
 - a. Has a behavioral health disorder amenable to active clinical treatment
 - b. Has a serious emotional disorder and continues to meet the service intensity needs and medical necessity criteria for the duration of their enrollment
 - c. Has been assessed by a licensed mental health professional that finds a significant impairment in functioning representing potential serious harm to him or herself or others, across settings
 - d. Scores 4 or 5 on the ECSII (Early Childhood Services Intensity Instrument); or 5 or 6 on the CASII (Child and Adolescent Service Intensity Instrument)

Youth with a score of 5 on the CASII shall also meet one of the following criteria to be eligible:

1. Transitioning from an RTC
2. Living in the community:
 - a. Be at least age 13 and older and have:
 - i. Three or more inpatient psychiatric hospitalizations in the past 12 months
 - ii. Been in an RTC within the past 90 calendar days
 - b. Be age 6-12 years old and have:
 - i. Two or more inpatient psychiatric hospitalizations in the past 12 months
 - ii. Been in an RTC within the past 90 calendar days

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	<p>Youth who are younger than six years of age who have a score of 4 on the ECSII shall either:</p> <ol style="list-style-type: none"> 1. Be referred directly from an inpatient hospital 2. If living in the community, have two or more hospitalizations in the past 12 months.
<p>Criteria for Continued Stay</p>	<p>All of the following criteria are necessary for continuing treatment at this level of care:</p> <ol style="list-style-type: none"> A. The participant continues to meet admission criteria. B. The participant is reassessed every six months after the initial assessment. C. The participant’s current available living environment is not suitable for stabilizing the participant during the crisis. D. Progress in relation to specific symptoms/impairments/dysfunction is clearly evident and can be described in objective terms, but goals of treatment have not been achieved or adjustments in the care plan to address the lack of progress are evident. E. There is documented active planning for transition to a less intensive level of care.