

**Smoky Mountain Center LME
Mental Health & Substance Abuse State Benefit Plan and Level of Care Guidelines
Effective October 22, 2009**

This is the benefit plan for state-funded **Mental Health and Substance Abuse** services for **Adult and Child** residents of Smoky Mountain Center LME's fifteen counties: Alexander, Alleghany, Ashe, Avery, Caldwell, Cherokee, Clay, Graham, Haywood, Jackson, Macon, McDowell, Swain, Watauga and Wilkes.

Providers may be reimbursed only for those specific services included in their contracts with Smoky Mountain Center. Some services for particular age/disability groups in selected counties may only be provided by selected providers. Funding availability for some services differs among SMC regions; availability of funding and funding level in one region does not guarantee the same availability in another region. For questions about eligibility for services in a given county, please consult with a Smoky Mountain Center Care Manager by calling 866-990-9712.

All individuals receiving services under this plan must be registered and active with Smoky Mountain Center in the state IPRS and CDW systems (see the SMC Provider Operations Manual (<http://www.smokymountaincenter.com/providers.asp>) for specific registration and enrollment requirements).

The services in this Benefit Plan are listed by consumer age/disability groups, and by levels of care within those groups. This plan represents the array of services determined to best meet the needs of most consumers within the available funding. An "X" in the grid signifies that the service is included in the benefit plan for individuals at that Level of Care. Maximum numbers of units are shown for services with limits on the service intensity that may be authorized. A blank in the grid signifies that a service is not included.

The authorization time periods (Assessment Period, 1st 90-Day Period and Ongoing 90-Day Periods) pertain to consumers' episodes of care, not calendar year or contract year. Continued services across contract years are authorized according to a consumer's episode of care and do not start over with a new year. Likewise, transition of a consumer to a new provider does not necessarily begin a new episode of care; providers are encouraged to consult with an LME Care Manager regarding services that may be authorized upon transition to a new provider.

In order to be authorized, services in the Level of Care Guidelines must be determined to be medically necessary at a specific intensity level for each individual consumer. There is no entitlement for authorization of these services at any intensity level--consumers are not eligible for services solely on the basis of being at a given Level of Care. The maximum number of units listed in the Level of Care Guidelines is not necessary for all consumers requiring the service—the necessary amount of service must be determined individually for each consumer. The service intensities listed in the Guidelines are the maximum amounts that will be necessary and approved for most consumers at a given Level of Care. However, consumers receiving multiple services generally require lower amounts of each service than someone receiving only a single service. Services at a higher level of intensity than that listed in the Guidelines may be requested and will be reviewed for approval by Care Managers. Three criteria must be met in order to authorize services at an intensity that is higher than that listed in the Guidelines: (1) the higher level of intensity is determined to be medically necessary; (2) it is established that the consumer will be at serious risk of deterioration or other harm if the higher intensity level is not provided; and (3) SMC has funding available for the higher intensity level.

Some services (e.g., Assessment) do not require preauthorization by the LME. However, all services provided under this plan are subject to post-payment review by the LME that may result in required corrective actions and/or recoupment of payments if found to have not been medically necessary when provided or to have not been provided according to NC DHHS and Smoky Mountain Center Service Definitions and other requirements in the provider's contract with Smoky Mountain Center.

Note that some services in this plan include Clinical Home requirements including First Responder responsibilities.

Note that SMC will allow admissions to Community Support Service through 12-31-2009. Refer to Implementation Update #60 on the DMHDDSAS website excludes CSS provided in conjunction with any of the following enhanced services: Intensive In-Home, MST, ACTT, Community Support Team, SA IOP and PSR.

Any and all services provided under this benefit plan are subject to the availability of funds as determined by Smoky Mountain Center LME. This plan should not be interpreted as an entitlement for any person to receive services.

Adult Mental Health	Level of Care: A (GAF>70)			
Service	Auth Required?	Assessment Period (30 days)	1st 90-Day Period	Ongoing 90-Day Periods
Assessment	No	X		
Medication Management	No	X	X	X
Group Tx. ¹	No	X	X	X
Recovery Education Center ²	No	X	X	X
Mobile Crisis Management ³	No	X	X	X

¹ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

² Recovery Education Centers are provided by Meridian Behavioral Health in Cherokee, Haywood, Jackson and Macon Counties in the Southern Region; by New River Behavioral Health in Watauga and Wilkes Counties in the Northern Region; and by New River Behavioral Health in Alexander, Caldwell and McDowell Counties in the Central Region.

³ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Adult Mental Health		Level of Care: B (GAF 51-70)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Group Tx. ⁴		No	X	X	X
Recovery Education Center ⁵		No	X	X	X
Select	Individual or Family Tx. P6-90806 ⁶	Yes		8 Sessions	
One	Individual or Family Tx. P6-H0004 ⁷	Yes		32 Units	
Mobile Crisis Management ⁸		No	X	X	X

For Consumers Receiving Community Support, Use the Following:

Community Support--Individual ⁹		Yes		24 Units	
Community Support--Group ¹⁰		Yes		32 Units	
Select	Individual or Family Tx. P6-90806 ¹¹	Yes		3 Sessions	
One	Individual or Family Tx. P6-H0004 ¹²	Yes		12 Units	

⁴ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

⁵ Recovery Education Centers are provided by Meridian Behavioral Health in Cherokee, Haywood, Jackson and Macon Counties in the Southern Region; by New River Behavioral Health in Watauga and Wilkes Counties in the Northern Region; and by New River Behavioral Health in Alexander, Caldwell and McDowell Counties in the Central Region.

⁶ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

⁷ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

⁸ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

⁹ Not available in counties with Recovery Education Centers

¹⁰ Not available in counties with Recovery Education Centers

¹¹ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

¹² Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

Adult Mental Health		Level of Care: C (GAF 31-50)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Recovery Education Center ¹³		No	X	X	X
Select One	Individual or Family Tx. P6-90806 ¹⁴	Yes		12 Sessions	8 Sessions
	Individual or Family Tx. P6-H0004 ¹⁵	Yes		48 Units	32 Units
Community Support Team ¹⁶		Yes		X	
ACTT ¹⁷		Yes		X	X
Psychosocial Rehab ¹⁸		Yes		X	X
Facility Based Crisis ¹⁹		Yes ²⁰	X	X ²¹	
Group Tx. ²²		No	X	X	X
Mobile Crisis Management ²³		No	X	X	X

For Consumers Receiving Community Support, See Guidelines on Following Page

¹³ Recovery Education Centers are provided by Meridian Behavioral Health in Cherokee, Haywood, Jackson and Macon Counties; by New River Behavioral Health in Watauga, Wilkes, Alexander, Caldwell and McDowell Counties.

¹⁴ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

¹⁵ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

¹⁶ Initial Auth of 48 units for month 1; auth 64 units for months 2 & 3; auth 48 units for months 4 & 5; auth 48 units for months 6 & 7 with plan for step-down by end of month 7. Limited # of slots available by region—check with Care Managers re slot availability

¹⁷ ACTT is available on limited basis per clinical necessity and availability of funding.

¹⁸ PSR is available on limited basis per clinical necessity and availability of funding.

¹⁹ Facility Based Crisis Service is provided by Synergy in Wilkes County and by Smoky Mountain Center in Haywood County

²⁰ Facility Based Crisis Service is authorized by New River Behavioral Health or Smoky Mountain Center Emergency Services

²¹ Facility Based Crisis limited to maximum of 30 days in 12 months

²² Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

²³ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Community Support and Individual/Family Tx Guidelines for Adult Mental Health Level of Care C

Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Community Support--Individual ²⁴		Yes		32 Units	24 Units
Community Support--Group ²⁵		Yes		48 Units	48 Units
Select One	Individual or Family Tx. P6-90806 ²⁶	Yes		4 Sessions	2 Sessions
	Individual or Family Tx. P6-H0004 ²⁷	Yes		16 Units	8 Units

²⁴ Not available in counties with Recovery Education Centers

²⁵ Not available in counties with Recovery Education Centers

²⁶ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

²⁷ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

Adult Mental Health		Level of Care: D (GAF <31)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Recovery Education Center ²⁸		No	X	X	X
Community Support Team ²⁹		Yes		X	
ACTT ³⁰		Yes		X	X
Psychosocial Rehab ³¹		Yes		X	X
Facility Based Crisis ³²		Yes ³³	X	X ³⁴	
Select	Individual or Family Tx. P6-90806 ³⁵	Yes		14 Sessions	12 Sessions
One	Individual or Family Tx. P6-H0004 ³⁶	Yes		56 Units	48 Units
Group Tx. ³⁷		No	X	X	X
Mobile Crisis Management ³⁸		No	X	X	X

For Consumers Receiving Community Support, See Guidelines on Following Page

²⁸ Recovery Education Centers are provided by Meridian Behavioral Health in Cherokee, Haywood, Jackson and Macon Counties; by New River Behavioral Health in Watauga, Wilkes, Alexander, Caldwell and McDowell Counties.

²⁹ Initial Auth of 48 units for month 1; auth 64 units for months 2 & 3; auth 48 units for months 4 & 5; auth 48 units for months 6 & 7 with plan for step-down by end of month 7. Limited # of slots available by region—check with Care Managers re slot availability.

³⁰ ACTT is available on limited basis per clinical necessity and availability of funding.

³¹ PSR is available on limited basis per clinical necessity and availability of funding.

³² Facility Based Crisis Service is provided by Synergy in Wilkes County and by Smoky Mountain Center in Haywood County.

³³ Facility Based Crisis Service is authorized by New River Behavioral Health or Smoky Mountain Center Emergency Services

³⁴ Facility Based Crisis limited to maximum of 30 days in 12 months

³⁵ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

³⁶ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

³⁷ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

³⁸ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Community Support and Individual/Family Tx Guidelines for Adult Mental Health Level of Care D

Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Community Support--Individual		Yes		36 Units	24 Units
Community Support--Group		Yes		48 Units	48 Units
Select	Individual or Family Tx. P6-90806 ³⁹	Yes		4 Sessions	3 Sessions
One	Individual or Family Tx. P6-H0004 ⁴⁰	Yes		16 Units	12 Units

³⁹ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

⁴⁰ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

Adult Substance Abuse		Level of Care: A (ASAM I or Opioid Maintenance)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Group Tx. ⁴¹		No	X	X	X
Recovery Education Center ⁴²		No	X	X	X
Select	Individual or Family Tx. P6-90806 ⁴³	Yes		2 Sessions	
One	Individual or Family Tx. P6-H0004 ⁴⁴	Yes		8 Units	
Mobile Crisis Management ⁴⁵		No	X	X	X

⁴¹ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ. Group, rather than Individual Tx, is the preferred treatment service for substance use disorders.

⁴² Recovery Education Centers are provided by Meridian Behavioral Health in Cherokee, Haywood, Jackson and Macon Counties; by New River Behavioral Health in Watauga, Wilkes, Alexander, Caldwell and McDowell Counties.

⁴³ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

⁴⁴ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

⁴⁵ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Adult Substance Abuse		Level of Care: B (ASAM II.1 – II.5)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Group Tx. ⁴⁶		No	X	X	X
Recovery Education Center ⁴⁷		No	X	X	X
Select	Individual or Family Tx. P6-90806 ⁴⁸	Yes		6 Sessions	3 Sessions
One	Individual or Family Tx. P6-H0004 ⁴⁹	Yes		24 Units	12 Units
SA Intensive Outpatient Program (IOP) ⁵⁰		Yes		36 Sessions	
Meth Intensive Outpatient Program (IOP) ⁵¹		Yes		42 Sessions	
Facility Based Crisis ⁵²		Yes ⁵³	X	X ⁵⁴	
Mobile Crisis Management ⁵⁵		No	X	X	X

⁴⁶ Group Tx., P6-90853, includes CPT Codes 90849 and 90853, and Service Code H0004HQ. IOP or **Group Tx. rather than Individual Tx, is the preferred treatment service for substance use disorders.**

⁴⁷ Recovery Education Centers are provided by Meridian Behavioral Health in Cherokee, Haywood, Jackson and Macon Counties in the Southern Region; by New River Behavioral Health in Watauga and Wilkes Counties in the Northern Region; and by New River Behavioral Health in Alexander, Caldwell and McDowell Counties in the Central Region.

⁴⁸ NA in counties with RECs. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event. If receiving Community Support, see Guidelines on next page.

⁴⁹ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

⁵⁰ IOP is the preferred service for LOC B, but SA Group Tx with limited supplemental Individual Therapy or Family Therapy may be substituted if IOP is unavailable or if consumer declines IOP

⁵¹ Meth Intensive Outpatient Program (IOP) is provided by New River Behavioral Health in the Northern and Central Regions, and by Meridian Behavioral Health and Mountain Youth Resources in the Southern Region.

⁵² Facility Based Crisis Service is provided by Synergy in Wilkes County and by Smoky Mountain Center in Haywood County.

⁵³ Facility Based Crisis Service is authorized by New River Behavioral Health or Smoky Mountain Center Emergency Services

⁵⁴ Facility Based Crisis limited to maximum of 30 days in 12 months.

⁵⁵ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Community Support and Individual/Family Tx Guidelines for Adult Substance Abuse Level of Care B

Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Community Support—Individual		Yes		16 Units	8 Units
Community Support--Group		Yes		36 Units	36 Units
Select One	Individual or Family Tx. P6-90806 ⁵⁶	Yes		2 Sessions	1 Session
	Individual or Family Tx. P6-H0004 ⁵⁷	Yes		8 Units	4 Units

⁵⁶ Not available in counties with Recovery Education Centers. Individual & Family Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

⁵⁷ Not available in counties with Recovery Education Centers. Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

Adult Substance Abuse	Level of Care: C (ASAM III.1 – III.7)			
Service	Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment	No	X		
Facility Based Crisis ⁵⁸	Yes ⁵⁹	X	X ⁶⁰	
Mobile Crisis Management ⁶¹	No	X	X	X
FOR ASA LOC C consider referral to ADATC. Alternatively, staff case with LME Care Manager for availability of other services.				

⁵⁸ Facility Based Crisis Service is provided by Synergy in Wilkes County and by Smoky Mountain Center in Haywood County.

⁵⁹ Facility Based Crisis Service is authorized by New River Behavioral Health or Smoky Mountain Center Emergency Services

⁶⁰ Facility Based Crisis limited to maximum of 30 days in 12 months.

⁶¹ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Adult Substance Abuse	Level of Care: D (ASAM III.9 or higher)			
Service	Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment	No	X		
Mobile Crisis Management ⁶²	No	X	X	X
FOR ASA LOC D seek medical consultation for medically managed detoxification.				

⁶² Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Child Mental Health and Substance Abuse Service	Level of Care: A (GAF>70)			
	Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment	No	X		
Medication Management	No	X	X	X
Group Tx. ⁶³	No	X	X	X
Juvenile Justice Treatment Continuum ⁶⁴	No	X	X	X
Mobile Crisis Management ⁶⁵	No	X	X	X

⁶³ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

⁶⁴ JJTC is a program for court-ordered youth and their families provided by a single contracted provider in each region

⁶⁵ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Child Mental Health and Substance Abuse		Level of Care: B (GAF 51-70)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Select One	Individual or Family Tx. P6-90806 ⁶⁶	Yes		8 Sessions	4 Sessions
	Individual or Family Tx. P6-H0004 ⁶⁷	Yes		32 Units	16 Units
Group Tx. ⁶⁸		No	X	X	X
Juvenile Justice Treatment Continuum ⁶⁹		No	X	X	X
Trauma-Focused Cognitive Behavioral Therapy ⁷⁰		Yes		X	X
Mobile Crisis Management ⁷¹		No	X	X	X

For Consumers Receiving Community Support, Use the Following Guidelines:

Community Support--Individual		Yes		32 Units	20 Units
Community Support--Group		Yes		32 Units	32 Units
Select One	Individual or Family Tx. P6-90806 ⁷²	Yes		4 Sessions	
	Individual or Family Tx. P6-H0004 ⁷³	Yes		16 Units	

⁶⁶ Individual & Family Therapy Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

⁶⁷ Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

⁶⁸ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

⁶⁹ JJTC is a program for court-ordered youth and their families provided by a single contracted provider in each region

⁷⁰ Evidence based practice for children that have experienced severe trauma or victimization

⁷¹ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

⁷² Individual & Family Therapy Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event.

⁷³ Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit.

Child Mental Health and Substance Abuse		Level of Care: C (GAF 31-50)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Select One	Individual or Family Tx. P6-90806 ⁷⁴	Yes		16 Sessions	8 Sessions
	Individual or Family Tx. P6-H0004 ⁷⁵	Yes		64 Units	32 Units
Group Tx. ⁷⁶		No	X	X	X
Intensive In-Home Treatment ⁷⁷		Yes		X	X
Multi Systemic Therapy ⁷⁸		Yes		X	X
Juvenile Justice Treatment Continuum ⁷⁹		No	X	X	X
Trauma-Focused Cognitive Behavioral Therapy ⁸⁰		Yes		X	X
Mobile Crisis Management ⁸¹		No	X	X	X

For Consumers Receiving Community Support, See Guidelines on Following Page

⁷⁴ Individual & Family Therapy Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

⁷⁵ Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

⁷⁶ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

⁷⁷ Intensive In-Home Treatment is available on a limited basis per clinical necessity and availability of funding. Auth 15 units month 1; 12 units combined months 2 & 3. Limited # of slots available by region—check with Care Managers re slot availability.

⁷⁸ Multi Systemic Therapy is available on a limited basis per clinical necessity and availability of funding. Auth 120 units month 1; 96 units combined months 2 & 3

⁷⁹ JJTC is a program for court-ordered youth and their families provided by a single contracted provider in each region

⁸⁰ Evidence based practice for children that have experienced severe trauma or victimization.

⁸¹ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Community Support and Individual/Family Tx Guidelines for Child Mental Health and Substance Abuse Level of Care C

Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Community Support--Individual		Yes		80 Units	60 Units
Community Support--Group		Yes		48 Units	48 Units
Select	Individual or Family Tx. P6-90806 ⁸²	Yes		4 Sessions	3 Sessions
One	Individual or Family Tx. P6-H0004 ⁸³	Yes		16 Units	12Units

⁸² Individual & Family Therapy Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

⁸³ Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

Child Mental Health and Substance Abuse		Level of Care: D (GAF <31)			
Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Assessment		No	X		
Medication Management		No	X	X	X
Select One	Individual or Family Tx. P6-90806 ⁸⁴	Yes		16 Sessions	8 Sessions
	Individual or Family Tx. P6-H0004 ⁸⁵	Yes		64 Units	32 Units
Group Tx. ⁸⁶		No	X	X	X
Intensive In-Home Treatment ⁸⁷		Yes		X	X
Multi Systemic Therapy ⁸⁸		Yes		X	X
Juvenile Justice Treatment Continuum ⁸⁹		No	X	X	X
Trauma-Focused Cognitive Behavioral Therapy ⁹⁰		Yes		X	X
Mobile Crisis Management ⁹¹		No	X	X	X

For Consumers Receiving Community Support, See Guidelines on Following Page

Community Support and Individual/Family Tx Guidelines for Child Mental Health and Substance Abuse Level of Care D

⁸⁴ Individual & Family Therapy Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

⁸⁵ Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

⁸⁶ Group Tx. includes CPT Codes 90849 and 90853, and Service Code H0004HQ

⁸⁷ Intensive In-Home Treatment is available on a limited basis per clinical necessity and availability of funding. Auth 15 units month 1; 12 units combined Months 2 & 3. Limited # of slots available by region—check with Care Managers re slot availability.

⁸⁸ Multi Systemic Therapy is available on a limited basis per clinical necessity and availability of funding. Auth 120 units month 1; 96 units combined months 2 & 3.

⁸⁹ JJTC is a program for court-ordered youth and their families provided by a single contracted provider in each region

⁹⁰ Evidence based practice for children that have experienced severe trauma or victimization

⁹¹ Provided by New River Behavioral Health in Northern & Central Regions, and by SMC in the Southern Region. Clinical Home First Responder responsibilities must be met before requesting MCM intervention.

Service		Auth Required?	Assessment Period (30 days)	1 st 90-Day Period	Ongoing 90-Day Periods
Community Support--Individual		Yes		160 Units	80 Units
Community Support--Group		Yes		48 Units	48 Units
Select	Individual or Family Tx. P6-90806 ⁹²	Yes		4 Sessions	3 Sessions
One	Individual or Family Tx. P6-H0004 ⁹³	Yes		16 Units	12 Units

⁹² Individual & Family Therapy Package P6-90806 includes CPT Codes 90804, 90806, 90847 and 90846, billed by event. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.

⁹³ Individual & Family Therapy Package P6-H0004 includes Service Codes H0004, H0004HR and H0004HS, billed by 15-minute unit. Up to six sessions Individual and/or Family Therapy combined, integrated with CSS or with clinical justification for absence of CSS. Continued authorization requires demonstration of benefit from therapy and necessity for continued therapy.