
Community Based Services (CBS), Adult, Florida Service Area

Services covered by this guideline:

1. Psychosocial Rehabilitation Group
2. Targeted Case Management
3. Intensive Team Case Management

I. **Intensity Guidelines:** *all three (3) elements are evaluated*

1. Severity of the functional impairment
2. Appropriate intensity of services
3. Least restrictive or intrusive services necessary

II. **Psychosocial Rehabilitation Admission Guidelines** *(all must be met):*

1. The member has received a psychological or psychiatric evaluation that includes a DSM-IV Axis I-V diagnosis that requires and will respond to therapeutic/supportive interventions and which documents the need for CBS.
2. The member demonstrates an exacerbation of a longstanding psychiatric disorder the symptoms of which (e.g. thought disorder, mood disorder) result in significant functional impairments associated with the mental health diagnosis.
3. Traditional Mental Health Services have been attempted (i.e. individual/family/group therapy, medication management, etc) and are inadequate to prevent the member from deteriorating or to reach identified goals.
4. Services are supervised by a qualified licensed mental health professional.
5. At least one member of the family agrees to participate in the service.
6. A clear individualized treatment plan is established including specific behavioral based and objective goals. Amount, scope and duration as well as specific interventions must be documented in the treatment plan and supported by progress notes.
7. The member demonstrates the capability of developing more complex personal and interpersonal life skills including problem solving, self advocacy, and the appropriate use of community resources.

Targeted Case Management Eligibility Guidelines:

In order to be certified to receive adult targeted case management services, the adult must:

1. Be enrolled in a Department of Children and Families (DCF) mental health target population (18 years and older);



2. Have a mental health disability (i.e. severe and persistent mental illness) that requires advocacy for and coordination of services to maintain or improve level of functioning;
3. Require services to assist in attaining self sufficiency and satisfaction in the living, learning, work and social environments of choice;
4. Lack a natural support system for accessing needed medical, social, education, and other services;
5. Require ongoing assistance to access or maintain needed care consistently within the service delivery system;
6. Have a mental health disability (i.e. severe and persistent mental illness) that, based upon professional judgment, will last for a minimum of one year;
7. Is not receiving duplicate case management services from another provider; and
8. Meets at least one of the following requirements:
 - Is awaiting admission to or has been discharged from a state mental health treatment facility;
 - Has been discharged from a mental health residential treatment facility;
 - Has had more than one admission to a crisis stabilization unit (CSU), short-term residential facility (SRT), inpatient psychiatric unit, or any combination of these facilities within the past 12 months;
 - Is at risk of institutionalization for mental health reasons; or
 - Is experiencing long-term or acute episodes of mental impairment that may put him/her at risk of requiring more intensive services.

Exception to Eligibility Criteria:

The following recipients may receive mental health targeted case management for up to a maximum of 30 days without meeting the eligibility criteria for a specific target group:

- A recipient who has been referred by CBH after a denied admission to or discharge from an inpatient psychiatric unit
- A recipient who has been admitted to an inpatient psychiatric unit; or
- A recipient who has been identified by CBH as high risk

III. Continued Stay Guidelines (all must be met):

1. Validated DSM IV Diagnosis which continues to have a broad and persistent effect on the member's ability to remain in the home/community.
2. Member is making adequate progress toward treatment goals as evidenced by lessening of symptoms over time and stabilization of psychosocial functioning through treatment planning and involvement but would not be able to progress without the services provided by the CBS.



3. The treatment plan is updated monthly (30 days) and reflects effort to reduce the frequency of service or clinical documentation for inability to decrease the usage of community based services.
4. Techniques are employed in treatment that are time-limited in nature and subordinate to a goal of enhanced autonomy and the least restrictive environment possible.

IV. Discharge Criteria:

1. Member no longer meets continued stay criteria.
2. Member has progressed to the extent CBS are no longer necessary.
 - A. Severity of illness requires higher level of care.