

ADULT FULL SERVICE PARTNERSHIP CRITERIA

Individuals eligible for FSP 1 ICM and FSP 2 ACT services must meet criteria in all three categories related to *diagnosis, functional impairment, and continuous high-service needs*. Key differences between FSP 1 ICM and FSP 2 ACT eligibility take into consideration the level of care needed to treat an individual based on acuity. Individuals living with more severe needs across diagnosis, functional impairment, and continuous high-services needs may be better suited for ACT.

Intensive Case Management Criteria	Assertive Community Treatment Criteria
1. Basic Eligibility requirements (all must be met) a. Adult (18 years or older), unless for the Transitional Age Youth (TAY) specific ACT program (can be 16 years or older) b. Must have current or suspected DSM diagnosis consistent with: i. Serious Mental Illness (SMI), ii. Severe Emotional Disturbance (SED), or iii. Substance Use Disorder (SUD), including co-occurrences. AND 2. Functional Impairment: Demonstrates moderate to significant functional impairment, such that they: a. Have consistent difficulty performing daily life tasks (e.g., personal hygiene, managing money), or b. Face challenges maintaining employment or housing, with occasional to persistent difficulty, and require moderate support from others. AND 3. Continuous or moderately High-Service Needs, or relatively low services needs with occasional periods of high-service needs, meets at least one of the following: a. Risk of hospitalization or psychiatric/emergency care without this intervention, b. Intractable (persistent or recurrent) severe major symptoms (e.g., affective, psychotic suicidal) c. Co-existing SUD of significant duration; d. High-risk or a recent history of being involved in the criminal justice system; e. Living in substandard housing, experiencing homeless, or at imminent risk of becoming homeless;	1. Basic Eligibility requirements (all must be met): a. Adult (18 years or older), unless for the Transitional Age Youth (TAY) specific ACT program (can be 16 years or older) b. Have a diagnosis consistent with Serious Mental Illness (SMI)* or co-occurring SMI and substance use disorder (SUD), according to current Diagnostic and Statistical Manual of Disorders (DSM) and the International Statistical Classification of Diseases and Related Health Problems criteria and as determined by a clinician (see BH-Connect Evidenced-Based Practice Policy Guide if needed for definitions of SMI) AND 2. Have significant functional impairment, defined as one or more of the following: a. Consistent inability to perform practical daily tasks needed to function in the community such as maintaining personal hygiene; meeting nutritional needs; caring for personal business affairs; obtaining medical, legal, and housing services; recognizing and avoiding common dangers or hazards to oneself and one's possessions. b. Persistent or recurrent failure to perform daily living tasks, except with significant support or help from others such as friends, family, or relatives; c. Consistent inability to be employed at a self-sustaining level or to carry out homemaker roles; and/or d. Inability to maintain a safe living situation (e.g., repeated evictions or loss of housing, or under a mental health (Lanterman-Petris-Short (LPS)) conservatorship) AND

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f. Living in housing, but clinically assessed to need more intensive services to maintain housing; g. Living in an inpatient bed or in a supervised community residence, but clinically assessed to be able to live more independently if intensive services are provided; and/or h. Risk of returning to unsheltered homelessness after being placed in interim housing, or risk of returning to homelessness after being placed in permanent supportive housing without this service. i. Inability to participate in traditional office-based services. AND 4. Most recent Level of Care Utilization System (LOCUS) score was 3 indicating a need for ICM services. AND 5. Requestor has attested that client is in need of services higher than what Outpatient Behavioral Health Clinics can provide.	3. Have an indicator of continuous, high-service needs as evidenced by <u>one or more</u> of the following: a. High use of psychiatric hospitalization or psychiatric emergency services as defined by one of the criteria below: i. Psychiatric inpatient (minimum of 1), or CSU admissions (minimum of 1), or an extended inpatient stay (14+ days) in the past 6 months. OR ii. Multiple PERT or MCRT contacts (minimum of 2) in the past 6 months. OR iii. Discharged directly from a State Hospital or MHRC/STP with a clinical assessment that, despite stabilization, cannot be safely maintained in a lower-intensity setting. b. Intractable (persistent or recurrent) severe major psychiatric symptoms (e.g., affective, psychotic, suicidal) c. Co-existing SUD of significant duration d. High-risk or a recent history of being involved in the criminal justice system e. Living in sub-standard housing, experiencing homelessness, or at imminent risk of becoming homeless f. Clinically assessed to be able to live more independently if intensive psychiatric services are provided g. Inability to participate in office-based services AND 4. Most recent Level of Care Utilization System (LOCUS) score was 4 or higher, indicating a need for ACT services.
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	<u>AND</u> 5. Requestor has attested that client is in need of services higher than what Intensive Case Management (ICM) can provide. <i>ACT is typically not appropriate for members solely diagnosed with SUD, personality disorder(s), or intellectual/development disabilities (I/DD).</i>
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[FSP Adult Levels of Care Comparison Chart](#)

Forensic Assertive Community Treatment (FACT):
1. Must meet all criteria for Assertive Community Treatment (ACT) Full Service Partnership (FSP) Level 2 BH Connect Prior Authorization Criteria (ONLY Vida, BH Court, Center Star) <u>AND</u> 2. Have lived experience with the criminal justice system in <u>at least ONE</u> of the following: a. Released from a correctional facility within the last 12 months (e.g., prison, jail, youth correctional facility) b. Are at high risk of criminal justice involvement (e.g., previous arrest, on diversion, or in mental health collaborative courts).