





Section: Utilization Management	Policy Name: Behavioral Health Screening Program Description & Guidelines	Policy Number: MHL 04.12
Owner: Manager of UM & Call Center	Reviewed By: Elizabeth Guisinger, LPC, CAADC Bangalore Ramesh, MD	Total Pages: 4
Required By: <input checked="" type="checkbox"/> BBA <input type="checkbox"/> MDHHS <input checked="" type="checkbox"/> NCQA <input checked="" type="checkbox"/> Other (please specify): See References	Final Approval By:  <small>Beth Guisinger (Nov 2, 2020 17:12 EST)</small>  <small>Bangalore K Ramesh (Nov 4, 2020 13:10 EST)</small>	Date Approved: Nov 2, 2020
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input checked="" type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input checked="" type="checkbox"/> MH/IDD Providers <input checked="" type="checkbox"/> Other (please specify): _____	Line of Business: <input type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): _____ <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Block Grant <input type="checkbox"/> SUD Medicaid <input checked="" type="checkbox"/> MI Health Link	Effective Date: 10/29/2020

Policy: It shall be the policy of Southwest Michigan Behavioral Health (SWMBH) to implement and review screening and assessment tools that are consistent with the regulatory requirements of Michigan Department of Health and Human Services (MDHHS), the Integrated Care Organization/Prepaid Inpatient Health Plan (PIHP) and the Three-Way Contracts, accreditation standards (National Council for Quality Assurance (NCQA)), and the Balanced Budget Act of 1997.

Purpose: To establish the SWMBH standards and guidelines for the adoption, dissemination, implementation and review of the behavioral health assessment and screening program guidelines and tools as appropriate throughout the network to effect best practice implementation and uniform benefit in accordance with federal laws and MDHHS Contract requirements.

Scope: The SWMBH Utilization Management (UM) Department will ensure members receive Level II assessments in accordance with specified timelines, and more often, if needed.

Responsibilities: SWMBH Staff will complete LOCUS, ASAM, and/or SIS (see definitions) according to the member’s needs to identify clinical need and ensure appropriate referrals are made based on medical necessity criteria and in the best interest of the individual.

Definitions:

- A. LOCUS: Level of Care Utilization System for Psychiatric and Addiction Services
- B. ASAM-PPC: American Society for Addiction Medicine-Patient Placement Criteria
- C. SIS: Supports Intensity Scale



Standards and Guidelines:

SWMBH is committed to ensuring each member receives services designed to meet each individual's special health needs as identified through the Behavioral Health Level II Assessment/Screening process. The screening and assessment program contains mechanisms to identify needs and integrate care that can be addressed with specialty behavioral health and substance abuse treatment services as well as integrated physical health needs and needs that may be accessed in the community including, but not limited to, employment, housing, financial assistance, etc. The assessment is completed in a uniform managed care information system containing functional screening tools that generate population-specific level of care guidelines. The behavioral health screening tools utilized are mandated by the MDHHS/ICO/CMS Three Way Contract and include the LOCUS for persons presenting with symptoms of mental illness, the ASAM-PPC for persons presenting with symptoms of a Substance Use Disorder or the SIS for Members presenting with indication of an Intellectual/ Developmental Disability. Components of each screen generate a needs list which is used to guide the treatment planning process. Assessments are completed by appropriate clinical professionals. Treatment plans are developed through a person-centered planning process with the member's participation and with consultation from specialists providing services or involved with the member.

The behavioral health assessment and screening program description, guidelines and tools will meet the following requirements:

- A. Any member requesting services shall be screened accordingly using the population appropriate screening tool
- B. Members referred through the Level I screening process from the ICO and triggering for a Behavioral Health Level II Screen shall be offered screening accordingly using the population appropriate screening tool
- C. Any member identified through risk stratification or an ICT meeting shall be offered screening accordingly using the population appropriate screening tool
- D. Level II assessments for the Duals Demonstration Project (MI Health Link) shall be completed according to the following guidelines"
 1. LOCUS shall be completed within 15 days of referral or request for service or if out of service for more than 3 months.
 2. LOCUS shall be updated annually within 365 days of initial screen or more frequently as change in level of care/needs dictate
 3. ASAM placement criteria shall be completed within 15 days of referral or request for service.
 4. ASAM placement criteria shall be updated when new authorization requests are submitted, and at a minimum of six-month intervals
 5. The Supports Intensity Scale (SIS) for individuals with I/DD shall be completed within 15 days of referral or request and handled according to MDHHS SIS Manual and AAIDD guidelines.
 6. The SIS shall be updated according to the MDHHS SIS Manual which indicates completion at least every 3 years.
- E. Are based upon valid and reliable clinical evidence or a consensus of healthcare professionals in the field.
- F. Consider the needs of the SWMBH members.



- G. Are adopted in consultation with contracting providers and staff who utilize the tools and guidelines.
- H. Are reviewed and updated on a minimum of every two years through the MHL Committee, utilizing committee member provider and practitioner input on program design with final approval by the Medical Director and Director of Clinical Quality in accordance with ICO/MDHHS contract requirements.
- I. Are shared with applicable providers through provider orientation/the provider manual and to members upon request. Additionally, implementation of new guidelines and/or review of existing guidelines is published in the provider and member newsletters.
- J. Any decisions based on the screening program/tools with respect to utilization management, complex case management, member education, coverage of services, etc. are consistent with the guidelines.

References:

- A. PIHP Contract Section: CMS/MDHHS/ICO Three Way Contract for the MHL Duals Demonstration Financial Alignment Contract, Section 2.6.6.3.2-4
- B. 2020 NCQA MBHO Standards

Attachments: None



Revision History

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Initial	4/26/2019	Scope & Responsibilities	Not in previous version	E. Guisinger
1	5/14/2020	NA	Annual Review	E. Guisinger
2	10/29/2020	References	Updated	E. Guisinger









MHL 04.12 Behavioral Health Screening Program Description & Guidelines

Final Audit Report

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