

3.901 Comprehensive Behavioral Health Assessment

Description of Services: A comprehensive behavioral health assessment is an in-depth and detailed assessment of the recipient's emotional, social, behavioral, and developmental functioning. For those settings in which the recipient routinely participates, a comprehensive behavioral health assessment must include direct observation of the recipient in the following settings:

- Home
- School or child care
- Work site
- Community

Comprehensive behavioral health assessment components requiring face-to-face contact cannot be provided using telemedicine.

Provider qualifications: Provider qualifications must match the Florida Medicaid Specialized Therapeutic Services Coverage and Limitations Handbook.

Documentation: Documentation must match requirements listed in the Florida Medicaid Specialized Therapeutic Services Coverage and Limitations Handbook.

Important: While level of care determinations are considered in the context of an individual's treatment history; Beacon Health Options never requires the attempt of a less intensive treatment as a criterion to authorize any service.

Criteria	
Admission Criteria	<p><i>The following criteria are necessary:</i></p> <ol style="list-style-type: none"> 1. Member demonstrates symptoms consistent with a covered DSM (the most current version of the DSM) or ICD (the most current version of the ICD) diagnosis; and 2. Member is under the age of 21 years; and <p><i>And the following criteria are necessary:</i></p> <ol style="list-style-type: none"> 3. Member is a victim of abuse or neglect; and 4. The Department of Children and Families (DCF) or their designee has determined the member to require out-of-home care or be placed in a shelter status; or 5. The member has committed acts of juvenile delinquency; and 6. The member suffers from an emotional disturbance or a serious emotional disturbance; and 7. The member is at risk for placement in a residential setting
Exclusion Criteria	<p><i>The following criteria are sufficient for exclusion from this level of care:</i></p> <ol style="list-style-type: none"> 1. Medicaid does not reimburse for behavioral health overlay services for treatment of a cognitive deficit severe enough to prohibit the service from being of benefit to the member.
Continued Stay Criteria	<p><i>All of the following criteria are necessary for continuing treatment at this level of care:</i></p> <ol style="list-style-type: none"> 1. All of the admission criteria are still present.

Reviewed: 4/21/14, 11/17/14, 2/5/15, 11/17/15

Page 1 of 2

Revised: 2/5/15

This criterion is consistent with NCD and/or LCD.

Beacon Health Options Policies and Procedure and Medical Necessity Criteria cover the operations of all entities within the BVO Holdings, LLC corporate structure, including but not limited to Beacon Health Strategies LLC, Beacon CBHM LLC and ValueOptions, Inc.

First Coast Advantage, LLC.

Discharge Criteria	<i>Any of the following criteria are sufficient for discharge from this level of care:</i> 1. Failure to meet continuing stay criteria 2. The presence of exclusion criteria
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This criterion is consistent with NCD and/or LCD.
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