

## Ohio Medicaid ACT Eligibility Criteria:

Based on OAC 5160-27-04: Mental Health Assertive Community Treatment Service (current draft – 8/29/2017). CEBP added notes in text boxes with examples or possible sources of information/documentation as to whether the recipient meets that criterion or not.

(F) A medicaid recipient is eligible to receive ACT when determined... to have met all of the following:

### 1) Diagnosis(es):

- **Eligible diagnoses:** Schizophrenia Spectrum; Bipolar Spectrum; Major Depressive Disorder with Psychosis, and

Examples or possible sources:

Hospital Discharge Summaries; Diagnostic Assessment; Social Security Disability Determination letter; Provider-developed ACT Referral form

### 2) The recipient has:

- **Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) determination or**
- **Adult Needs and Strengths Assessment (ANSA)**
  - **Eligible scores:**
    - Score of two or greater on at least one of the items in the "*Mental Health Needs*" or "*Risk Behaviors*" sections or
    - Score of three on at least one of the items in the "*Life Domain Function*" section, and

Source:

Verification in disability system; Social Security Disability Determination letter  
ANSA rating sheet

3) **Institutional Utilization and other functional criteria** – The recipient has one or more of the following:

- (a) Two or more admissions to a psychiatric inpatient hospital setting during the past twelve months, or
- (b) Two or more occasions of utilizing psychiatric emergency services during the past twelve months, or
- (c) Significant difficulty meeting basic survival needs within the last twenty-four months, or
- (d) History within the past two years of criminal justice involvement including but not limited to arrest, incarceration, or probation, and

Examples or possible sources:

- **Psychiatric inpatient:** State or psychiatric hospital or psychiatric unit admission and discharge dates; Hospital Discharge Summaries.
- **Psychiatric emergency services:** hospital emergency department (whether or not admitted); mobile crisis encounter; crisis intervention encounter; stay at crisis residential unit.
- **Difficulty meeting basic survival needs:**
  - Substandard housing: house known to be drug trafficking/use house; infested with pests; lack of working utilities, plumbing, and/or HVAC; in area that compromises person's safety; cardboard box under a bridge.
  - Homelessness: literal homelessness (e.g. streets, park bench, under bridge); shelters; lack of permanent residence (e.g. couch surfing).
  - Imminent risk of homeless: landlord has threatened eviction; family is moving out of area; family refusing to continue housing the person; neighbors have called police at least twice complaining of client behavior; has exhausted all available system/community housing resources, supports; has been banned from housing resources/supports.
  - Person has "moved" more than twice in the last 12 months.
  - Other examples: too paranoid to go to grocery store; not eating regularly; inappropriate dress for the weather; lacking safe cooking skills; inability to pay utilities on time to keep them connected.

- Sources: DA; progress notes or psychiatric prescriber notes; hospital admission notes; crisis encounter notes
- **Criminal Justice involvement:** names, dates, correctional facility(ies) and/or charges; date of start and end of probation or parole; NGRI status; NCST status
- Provider-developed ACT Referral form
- Provider-developed ACT Assessment form
- ANSA rating sheet:
  - Life Domain Functioning: 1 or higher on Residential Stability; 2 or higher on Legal or Medication Compliance; or 3 or higher on Sexuality or Self-Care
  - Mental Health Needs: 2 or higher on any item
  - Risk Behaviors: 2 or higher on any item except Gambling

**4) The recipient experiences one or more of the following:**

- a. Persistent or recurrent severe psychiatric symptoms, or
- b. Coexisting substance use disorder of more than six month in duration, or
- c. Residing in an inpatient or supervised residence, but clinically assessed to be able to live in a more independent living situation if intensive services are provided, or
- d. At risk of psychiatric hospitalization, institutional or supervised residential placement if more intensive services are not available or,
- e. Has been unsuccessful in using traditional office-based outpatient services; and

- Examples or possible sources:
- **Persistent or recurring symptoms:** acute and chronic affective or psychotic symptoms (see slides with lists of symptoms); suicidal ideation or attempt in last 12 months
  - **Substance use disorder:** hospital discharge summaries; diagnostic assessment; ANSA Mental Health Needs “Substance Use” score of 2 or greater

- **Residing in an inpatient or supervised residence, but clinically assessed to be able to live in a more independent living situation if intensive services are provided:** person is currently residing in inpatient or supervised residence (e.g. group home, family care home, other residential treatment or setting where formal services are provided); person requests move to independent living situation (though assessed to need more supports to be safe/successful); has received a PASS-R recommendation to move into lesser restrictive setting (or other formal assessment that demonstrates the person is not in an appropriate level of care – due to lack of better options).
- **At risk of psychiatric hospitalization, institutional or supervised residential placement if more intensive services are not available:** alcohol or other drug use (with or without diagnosis) has adversely impacted functioning, housing, community tenure, ability to care for needs, or has resulted in hospitalization, exacerbation of symptoms, and/or interfered with treatment engagement. Threatening behavior. Discontinues medications against medical advice. “Nuisance to community”, vagrancy or loitering.
- **Unsuccessful in using traditional office-based outpatient services:** has been terminated from less intensive services for non-adherence or not keeping appointments; history of not keeping appointments and/or not engaging in treatment; has been banned from premises for inappropriate behaviors; has “fired” previous service providers; transient.
- Provider-developed ACT Referral form
- Provider-developed ACT Assessment form
- ANSA rating sheet:
  - Mental Health Needs: 2 or higher on any item
  - Risk Behaviors: 2 or higher on any item except Gambling
  - Life Domain Functioning: 1 or higher on Residential Stability; 2 or higher on Legal or Medication Compliance; or 3 or higher on Sexuality or Self-Care

And

**5) The recipient is eighteen years of age or older at the time of ACT enrollment.**