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

Version: October 24, 2017
• 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.