

**MENTAL HEALTH PARTNERS**  
**Adult MH State Funded Benefit Plan**

<b>Service Array</b>	<b>Level A Mild GAF 71-100</b>	<b>Level B Moderate GAF 51-70</b>	<b>Level C Serious GAF 31-50</b>	<b>Level D Severe GAF 30 or below</b>
<b>Dx Assessment</b>	Prior Approval Required	Prior Approval Required	Prior Approval Required	Prior Approval Required
<b>Clinical Evaluation</b>	1 per provider yearly	1 per provider yearly	1 per provider yearly	1 per provider yearly
<b>Psychiatric Evaluation</b>	1 per provider yearly	1 per provider yearly	1 per provider yearly	1 per provider yearly
<b>Medication Mgt.</b>	4-6 visits per year	4-9 visits per year	4- 12 visits per year	4-12 visits per year
<b>Psychological Testing</b>	Prior Approval Required	Prior Approval Required	Prior Approval Required	Prior Approval Required
<b>Outpatient Individual and Family</b>	4 visits per year May request re-authorization up to 8 additional visits per year	<u>Initial Auth:</u> 4 visits per year; may request re-authorization up to 12 visits per year	<u>Initial Auth:</u> 4 visits per year; may request re-authorization up to 16 visits per year	<u>Initial auth:</u> 4 visits per year; may request re-authorization up to 20 visits per year
<b>Outpatient Group</b>	up to 16 hours per year	up to 24 hours per year	up to 32 hours per year	up to 40 hours per year
<b>SO Specific Treatment Pkg</b>	NONE	up to 42 visits per year with no more than 2 visits being individual or family therapy, all remaining sessions are group. No reauthorizations.	up to 42 visits per year with no more than 2 visits being individual or family therapy, all remaining sessions are group. No reauthorizations.	up to 42 visits per year with no more than 2 visits being individual or family therapy, all remaining sessions are group. No reauthorizations.
<b>Community Support - Individual</b>	NONE	<u>Initial Auth:</u> up to 8 hours for 90 days <u>Continuing Auth:</u> for 90 days up to 52 hours <u>Exception:</u> 2 hour/month limit indicated when consumer is receiving another enhanced service	<u>Initial Auth:</u> up to 8 hours for 90 days <u>Continuing Auth:</u> for 90 days up to 52 hours <u>Exception:</u> 2 hour/month limit when consumer is receiving another enhanced service	<u>Initial Auth:</u> up to 8 hours for 90 days. <b>Other enhanced services more appropriate for this level.</b>
<b>Community Support - Group</b>	NONE	Authorized for 3 hours weekly per 90 days	Authorized for 3 hours weekly per 90 days	Authorized for 3 hours weekly per 90 days

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<b>Community Support Team</b>	NONE	NONE	<u>Initial Auth:</u> up to 32 hours for 30 days. <u>Continuing Auth:</u> up to 8 hours per week for 180 days	<u>Initial Auth:</u> up to 32 hours for 30 days. <u>Continuing Auth:</u> up to 10 hours per week for 180 days
<b>Assertive Community Treatment Team</b>	NONE	NONE	<u>Initial Auth:</u> 4 contacts per 30 days. <u>Continuing Auth:</u> 24 contacts per 90 days with 2 additional 90 day re-auths if needed	<u>Initial Auth:</u> 4 contacts per 30 days. <u>Continuing Auth:</u> 24 contacts per 90 days with 2 additional 90 day re-auths if needed
<b>Psychosocial Rehabilitation</b>	NONE	Auth: up to 520 hours per 180 days x one re-auth per year	Auth: up to 780 hours per 180 days x one re-auth per year	NONE
<b>Supported Employment Individual and Group</b>	NONE	Auth up to 540 hours for up to 180 days with one re-auth per year	Auth up to 540 hours for up to 180 days with one re-auth per year	Auth up to 540 hours for up to 180 days with one re-auth per year
<b>Long Term Support</b>	NONE	Auth 2-4 hours monthly up to 180 days with one additional re-auth per year	Auth 2-4 hours monthly up to 180 days with one additional re-auth per year	Auth 2-4 hours monthly up to 180 days with one additional re-auth per year
<b>Day Activity</b>	NONE	up to 720 hours per 180 days x one re-auth	up to 720 hours per 180 days x one re-auth	up to 720 hours per 180 days x one re-auth
<b>Group Living - Low/Moderate/High Intensity</b>	NONE	NONE	Per day up to 180 days with one 180 day reauth if needed	Per day up to 180 days with one 180 day reauth if needed
<b>Supervised Living- Low/Moderate/High</b>	NONE	NONE	Per day up to 180 days with one 180 day reauth if needed	Per day up to 180 days with one 180 day reauth if needed
<b>Family Living Low or Moderate</b>	NONE	NONE	Per day up to 180 days with one 180 day reauth if needed	Per day up to 180 days with one 180 day reauth if needed

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<b>Mobile Crisis</b>	Up to 8 hours without prior approval. Additional 2- 16 hours per request	Up to 8 hours without prior approval. Additional 2-16 hours per request	Up to 8 hours without prior approval. Additional 2-16 hours per request	Up to 8 hours without prior approval. Additional 2-16 hours per request
<b>Facility Based Crisis</b>	NONE	NONE	3-5 days with re-authorization of up to 5 days if indicated	3-5 days with re-authorization of up to 5 days if indicated

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