



POLICY AND PROCEDURE MANUAL

Policy Number: PA.225.CC
Last Review Date: 03/26/2020
Effective Date: 04/01/2020

PA.225.CC- Crisis Assessment and Stabilization Alternative (CASA) Specialized Mental Health Services

CountyCare considers CASA Specialized Mental Health Services medically necessary for the following indications:

1. The member requires treatment for a documented mental illness recognized by the current edition of the Diagnostic & Statistical Manual of Mental Disorders and exhibits significant incapacitating or debilitating disturbance in mood, thought, or behavior interfering with activities of daily living, AND
2. The member has completed a more intensive level of care treatment program, AND
3. The member does not require ongoing, significant active, or invasive medical treatment for management, AND
4. The member does not require a 24-hour observation, AND
5. The member is able to participate in structured therapeutic interventions, AND
6. The member exhibits potential to achieve a higher level of independence in activities of daily life while preventing regression to a lower level of functioning, AND
7. The provider must provide documentation presenting a treatment plan leading to the reduction or control of symptoms within the duration of the program with anticipated discharge to community with treatment interventions toward that goal, AND
8. The member does not have access to, or would not achieve adequate symptom improvement from appropriate, less restrictive level of care.

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A. Limitations

1. Service must be provided by a state-designated CASA program.
2. Service is available to members 18 years and older.
3. The member's admission to a CASA Specialized Mental Health Services facility must not exceed 28 days per treatment episode.
4. Initial authorization of CASA Specialized Mental Health Services is granted for the first 7 days of admission. Following initial authorization, the provider must re-submit an authorization request.
5. The member is not eligible for CASA Specialized Mental Health Services if the member requires active intervention or treatment, or a higher level of medical care beyond medical maintenance, including but not limited to:
 - a. Persons who require skilled nursing care, have limited feeding capacity, or require assistance ambulating
 - b. Persons with a swallowing problem with recurring aspiration
 - c. Persons who require a catheter, such as a foley catheter, feeding tubes or nasogastric tubes, or central lines;
 - d. Persons are at risk of medically significant complications due to recent major medical trauma, according to the requirements for trauma in the Emergency Medical Services, Trauma Center, Primary Stroke Center and Emergent Stroke Ready Hospital Code
 - e. Persons with acute neurological symptoms, including unstable seizure disorders
 - f. Persons who require ongoing nebulizer treatments that are not self-administered
 - g. Persons who require electrocardiogram monitoring/telemetry
 - h. Persons who are at risk of medically significant complications due to drug withdrawal
 - i. Persons with medically significant bleeding
 - j. Persons with communicable diseases requiring isolation, except for brief contact isolation
 - k. Persons with delirium
 - l. Persons with dementia
 - m. Persons with moderate, severe or profound developmental disability
 - n. Persons with methadone dependency, unless he or she is in an accredited methadone program

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- o. Persons with toxic levels of medication or who are at risk to become toxic (i.e. acetaminophen)

Background

According to the National Alliance on Mental Illness, roughly one in five U.S. adults experience mental illness, and the average delay between symptom onset and treatment is 11 years. There are various treatment options available for individuals suffering from mental illness, such as evidence-based medications, therapy, and social rehabilitation through housing, employment and peer support. CASA Specialized Mental Health Services provide treatment for those who have been discharged from inpatient psychiatric care and would benefit from further symptom improvement prior to integrating with the community. These transition services include crisis prevention planning, individualized assessment and treatment, living skill development, interagency case coordination, and illness management.

Codes:

Code	Description
0169	Other Room & Board (Medical or General)

References

1. American Psychiatric Association. (2013). Diagnostic and statistical. <https://doi.org/10.1176/appi.books.9780890425596>
2. 77 I. Adm. Code 380.120. 1996. Web. 3 February 2020. <http://www.ilga.gov/commission/jcar/admincode/077/077003800A01200R.html>
3. Center for Substance Abuse Treatment. Substance Abuse Treatment for Adults in the Criminal Justice System. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2005. (Treatment Improvement Protocol (TIP) Series, No. 44.) 3 Triage and Placement in Treatment Services. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK64131/>
4. Nicks BA, Mahler S, Manthey D. Impact of a physician-in-triage process on resident education. West J Emerg Med. 2014;15(7):902–907. doi:10.5811/westjem.2014.9.22859
5. Saxon V, Mukherjee D, Thomas D. Behavioral Health Crisis Stabilization Centers: A New Normal. J Mental Health & Clin Psychology (2018) 2(3): 23-26

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6. National Alliance on Mental Illness. Securing Stable Housing. 2020.
<https://www.nami.org/Find-Support/Living-with-a-Mental-Health-Condition/Securing-Stable-Housing>
7. World Health Organization (2019). International Statistical Classification of Diseases and Related Health Problems (11th ed.). <https://icd.who.int/>

Disclaimer:

CountyCare medical payment and prior authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. The policies constitute only the reimbursement and coverage guidelines of CountyCare and its affiliated managed care entities. Coverage for services varies for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies.

CountyCare reserves the right to review and update the medical payment and prior authorization guidelines in its sole discretion. Notice of such changes, if necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

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