



Out-Patient Levels of Care Definitions ACBHCS Adult System of Care

Level I *Must meet Medi-Cal medical necessity for specialty mental health*

Severe and persistent mental illness (SPMI) including significant functional impairment resulting in an inability to manage activities of daily living. May also include high risk for harm to self or others. May or may not have co-occurrence of substance use disorder but clear history supports presence of SPMI. The chronic nature of the severe mental illness is often demonstrated by multiple and lengthy hospital stays. Needs frequent and varied mental health services, including on-going case management, crisis intervention and medication support, to avoid repeated acute hospitalizations as moves toward recovery.

Examples of Diagnoses included in this group are Schizophrenia, Schizoaffective Disorder, and severe Bipolar I and Major Depressive Disorders, often with psychotic features.

(Authorized BHCS “single point of responsibility” service types: MH Service Teams, MHSA Full Service Partnership and ACT teams)

Level II *Must meet Medi-Cal medical necessity for specialty mental health*

Moderate-to-severe presentation of mental disorder, with or without substance use disorder (SUD), usually with a history of episodic use of acute services that require stabilization with psychiatric medication. In addition to medication support, services include as-needed: targeted case management, check-ins, brokerage and problem-solving assistance, crisis intervention, counseling and SUD services. May also include a variety of additional services to promote recovery, such as vocational and housing information or support.

Examples of Diagnoses include all of the above in Level I if individual has had a significant period of stability, Bipolar II, Major Depressive Disorder moderate-severe without psychosis, severe OCD, severe PTSD, Psychosis NOS, severe Personality Disorder (except Anti-Social) if risk of harm is present. Also include Co-occurring disorders where active and significant substance use is a focus of treatment but diagnosable mental illness is also present. May also include those with high-risk for harm to self or others. This is a time limited service of between 9-18 months designed to facilitate movement to even lower levels of care.

(Authorized BHCS Service Types: e.g. Casa Maria, Changes and other Temporary Case Management & Treatment Services –TCMS)

Level III *Must meet Medi-Cal medical necessity for specialty mental health*

Generally mild-to-moderate presentation of mental illness with at least one significant impairment in an important area of life functioning (work, relationships, etc.). Level III clients often have difficulty keeping appointments, managing daily routines and have limited social support. They are inconsistent in following their psychotropic and/or other medications. Level III services may include weekly outpatient psychotherapy as a first-line treatment or as

an adjunct to psychiatric medication evaluation and support. In addition, follow through with medical treatment for co-occurring chronic physical conditions and/or co-occurring SUD may be helped by adjunctive outpatient psychotherapy. It is recommended that concurrent supportive SUD services be utilized for those individuals with co-occurring substance use disorders to benefit most fully from the mental health services. Consumers who present with a complex psychiatric medication regimen or whose psychiatric symptoms have not improved from previous primary care based interventions may warrant regular access to an outpatient psychiatrist or therapist. Many consumers are able to utilize Level III services upon discharge from Acute Psychiatric care to prevent decompensation and continue the stabilization process. Upon demonstrating stability, Level III individuals may eventually move to a primary care setting (Level IV).

(Level III includes all “included” DSM IV-TR diagnoses; Authorized BHCS Service Types: e.g. Pathways to Wellness, other specialty providers for therapy MFT/LCSW may be onsite or located elsewhere but all service is office based.)

Level IV

Mild to moderate presentation of symptoms which may at times interfere with activities of daily life and/or adherence to treatment of chronic medical conditions. This outpatient education and treatment is based in a primary care setting. Individuals are encouraged to consider various forms of intervention which may or may not include prescription of psychotropic medications. Primary care behaviorists on site can provide direct services including evaluations, brief treatment, psycho education, connection to specialty behavioral health services and information and referral to other appropriate resources.

Diagnoses typically are mild to moderate anxiety and depression, situational and relational problems that exacerbate mood component. The individual may have at times had more moderate-severe symptoms but has not needed acute services often if ever. However, Primary Care settings may also serve as “home” for those with a more serious mental illness (MI) who are well into recovery and can manage without specialty BHCS services as long as they can receive psychotropic medication from the primary care clinic.

(Primary Care Clinic, e.g. Lifelong Downtown Oakland, Tricity Health Center; BHCS authorized non specialty services may include BACS Wellness Centers)

Level V

This level identifies the need for information and referral services *only*, for individuals who seek various resources and supports but generally function well in activities of daily life. Examples of such supportive services include Eden I & R, Family Education Resource Center (FERC), educational materials, domestic violence resources and primary prevention services.