


CBHI Clinical Pathways for MCI Providers

Families decide on the most appropriate initial CBHI service independently or in consultation with helping professionals such as MCI.

Choosing a Hub:

- ❖ **Outpatient Therapy (OP)**
- ❖ **In-Home Therapy (IHT)**
- ❖ **Intensive Care Coordination (ICC)**

Clinical Presentation	<p>The youth is in a behavioral health crisis demonstrating impairment in mood, thought, and/or behavior that substantially interferes with functioning at school, home, and/or in the community; and</p> <p>The youth presents a risk to self or others or has escalating behavior and is in need of clinical intervention to resolve the crisis and/or to remain stable in the community.</p>
	Mobile Crisis Intervention (MCI)
Intervention	Mobile Crisis Intervention (MCI)

Result of MCI intervention = *The youth's clinical presentation warrants Care Coordination and/or community-based clinical intervention. Medical necessity dictates level of intensity of care coordination and/or clinical intervention.*

	Outpatient Therapy (OP)	In-Home Therapy (IHT)	Intensive Care Coordination (ICC)
<p>MCI refers to any appropriate MassHealth services, including the following Hubs and may make recommendations for the Hub to consider particular Hub-dependent services as clinically indicated and in incorporates family voice/choice.</p>	<p>What the youth needs:</p> <ul style="list-style-type: none"> • Least intensive Care Coordination and/or traditional OP intervention <p>OP provides direct clinical care.</p>	<p>What the youth needs:</p> <ul style="list-style-type: none"> • More intensive immediate in-home clinical intervention to maintain youth/family stability in the home and prevent out-of-home placement (can be in addition to OP therapy) <p>IHT provides direct clinical care. IHT provides Care Coordination when serving as the Hub.</p>	<p>What the youth needs:</p> <ul style="list-style-type: none"> • Most intensive Care Coordination to convene treaters/natural supports, facilitate the development of Individualized Care Plan, make referrals, etc. <p>ICC is not a provider of direct clinical care; it is a care coordination process.</p>
Clinical Presentation	<p>The youth requires therapeutic intervention to address symptomatology/diagnosis interfering with the youth's ability to function in at least one life area. The youth is expected to respond to OP intervention; or the youth has a chronic affective illness, schizophrenia, or a refractory behavioral disorder, which by history, has required hospitalization.</p>	<p>The MA Child and Adolescent Needs and Strengths (CANS) assessment indicates clinical home-based intervention needed (beyond Outpatient Therapy) to enhance the family's problem-solving, limit-setting, and risk and safety management and/or to develop more effective patterns of household/family interaction and strengthen the family's ability to sustain the youth in the home setting or to prevent the need for out-of-home behavioral health treatment services. Consent is obtained.</p>	<p>The youth has serious emotional disturbance (SED) resulting in functional impairment.</p> <p>The youth needs or receives multiple services and needs a care planning team (CPT) to coordinate services from multiple providers or state agencies, special education, or a combination there of.</p> <p>The person(s) with authority to do so consents to medical treatment for the youth and agrees to participate in ICC.</p>

Families decide on the most appropriate initial CBHI service independently or in consultation with helping professionals such as:

CBHI Clinical Pathways for 24-Hour Levels of Care/State Agencies/Schools/Other

Community Organizations, Faith Leaders/Primary Care/Probation Courts/Schools/State Agencies/Inpatient/CBAT/TCU/EATS

Clinical Presentation	Intervention					
<p>The youth is:</p> <ul style="list-style-type: none"> In a behavioral health crisis; Demonstrating impairment in mood, thought, and/or behavior that substantially interferes with functioning at school, home, and/or in the community; and is At risk to self or others, or has escalating behavior and is in need of clinical intervention to resolve the crisis and/or to remain stable in the community. 	<p>Mobile Crisis Intervention (MCI) (provides direct clinical care)</p> <p>MCI can make referrals to most appropriate MassHealth service and/or community resource including:</p> <table border="1" data-bbox="1516 488 2026 521"> <tr> <td>OP</td> <td>IHT</td> <td>ICC</td> </tr> </table>	OP	IHT	ICC		
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<p>What the youth needs:</p> <ul style="list-style-type: none"> Least intensive care coordination and/or traditional OP intervention 	<p>Outpatient Therapy (OP) (provides direct clinical care)</p> <p>OP can make referrals to most appropriate MassHealth service and/or community resource including:</p> <table border="1" data-bbox="1516 753 2026 786"> <tr> <td>TM</td> <td>IHT</td> <td>IHBS</td> <td>FS&T</td> <td>ICC</td> </tr> </table>	TM	IHT	IHBS	FS&T	ICC
TM	IHT	IHBS	FS&T	ICC		
<p>What the youth needs:</p> <ul style="list-style-type: none"> More intensive immediate in-home clinical intervention to maintain youth/family stability in the home and prevent out-of-home placement (can be in addition to OP therapy) Will provide Care Coordination when acting as the Hub <p>CANS assessment indicates clinical, home-based intervention is needed (beyond Outpatient Therapy) to enhance the family's problem-solving, limit-setting, and risk and safety management and to develop more effective patterns of household/family interaction and strengthen the family's ability to sustain the youth in the home setting or to prevent the need for out-of-home behavioral health treatment services. Consent is obtained.</p>	<p>In-Home Therapy (IHT) (provides direct clinical care)</p> <p>IHT can make referrals to most appropriate MassHealth service and/or community resource including:</p> <table border="1" data-bbox="1516 987 2026 1019"> <tr> <td>OP</td> <td>TM</td> <td>IHBS</td> <td>FS&T</td> <td>ICC</td> </tr> </table>	OP	TM	IHBS	FS&T	ICC
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<p>What the youth needs:</p> <ul style="list-style-type: none"> Most intensive Care Coordination to convene treaters/natural supports, facilitate the development of Individualized Care Plan, make referrals, etc. <p>The youth has serious emotional disturbance (SED) resulting in functional impairment.</p> <p>The youth needs or receives multiple services and needs a Care Planning Team to coordinate services from multiple providers or state agencies, special education, or a combination thereof.</p> <p>The person(s) with authority to do so consents to medical treatment for the youth and agrees to participate in ICC.</p>	<p>Intensive Care Coordination (ICC) (provides <i>Wraparound</i> care coordination process and can be bundled with FS&T)</p> <p>ICC can make referrals to most appropriate MassHealth service and/or community resource including:</p> <table border="1" data-bbox="1537 1365 2005 1398"> <tr> <td>OP</td> <td>TM</td> <td>IHT</td> <td>IHBS</td> </tr> </table>	OP	TM	IHT	IHBS	
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CBHI Clinical Pathways – Choosing a Hub: For providers of 24-hour level of care, community-based services/state agencies, schools, courts, and others

