

Targeted Case Management (TCM) Level III Request Guide

PRIMARY GOAL:

 Justify WHY youth need ongoing intensive services

REMEMBER TO:

- Be SPECIFIC
- Focus on **CURRENT** behaviors (exhibited since last authorization)
- **1.** When the form asks, *Describe the patient's current clinical presentation (including current symptoms, impairments, or dysfunctions)*, consider:

Since the last authorization/in the last 6 months, has the youth... been hospitalized or to the ER? engaged with mobile crisis response? experienced any crisis or trauma? Explain why had suicidal ideation? had thoughts of, or engaged in, self-injury? • Was there a plan or intent? What specific actions did they engage in? • Did they act on these thoughts? (cutting, burning, head banging, etc.) Were thoughts passive or active? exhibited aggressive behaviors? had homicidal ideation? exhibited oppositional defiance? • Was it **verbal** aggression? • Were they **disobeying** rules? • Was there a **plan** or **intent**? • Physical aggression? • Staying out past curfew? • Who did threats target? (toward people and/or animals) • Leaving class without permission? • Any attack-related behavior? Property destruction? (harassment, stalking, etc.) • Starting **arguments**? • Fire-setting? • Threats to do harm? used any substances? struggled to manage their diagnoses? engaged in high-risk behaviors? • What did they use? • Have they been **depressed? Anxious?** • Have they committed any **crimes**? • How often? • Irritable? Had mood swings? Been arrested? • How did use **impact** • Exhibited **obsessions**? **Compulsions**? • Any risky sexual behaviors? their functioning? • Experienced psychosis? Mania? • Have they run away? • Inattention? Hyperactivity? • Has there been gang involvement? • Disordered eating? functioned in school? managed interpersonal relationships?

- How are they doing academically?
- Do they complete their homework?
- Do they refuse to go to school?
- Have they been **suspended** or **expelled**?
- Do they have **friends**?
- Get along with their **peers**?
- Have social skill deficits?
- Have **strained relationships** with siblings or caregivers?

2. When the form asks, *What social elements impact diagnosis (check all that apply)*, consider: **Has the youth experienced...**

problems accessing healthcare services?

housing problems or homelessness?

housing problems or financial problems?

where the problems affect their current clinical presentation?

include answer in section and be clear:

- "I checked off Financial Problems because it impacts their [specific diagnosis] in [this specific way]"
- **3.** As the provider, you are responsible for *describing updates to the treatment plan and the specific actions planned to address the symptoms or behaviors*. In doing so, consider:

 Since the last authorization...
 - has the treatment plan changed?
- were any treatment goals removed?
- were any treatment goals added?
- were any treatment goal dates extended?

Moving forward...

- what needs/behaviors will the treatment focus on?
- what are you going to do to address these symptoms and behaviors?
 - Will you help the youth learn how to manage their anger?
 - Help them improve their social skills?
 - Help them regulate their emotions and behaviors?
- → How?
- **4.** When the form asks, *Describe current planning for transition to a less intensive level of care*, consider:
 - What needs to happen before the youth transitions out of intensive care?
 - What are the barriers to discharge?

