



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?

- Was there a **plan** or **intent**?
- Did they **act** on these thoughts?
- Were thoughts **passive** or **active**?

had thoughts of, or engaged in, self-injury?

- What **specific actions** did they engage in? (*cutting, burning, head banging, etc.*)

exhibited aggressive behaviors?

- Was it **verbal** aggression?
- Physical** aggression? (*toward people and/or animals*)
- Property **destruction**?
- Fire-setting**?
- Threats** to do harm?

had homicidal ideation?

- Was there a **plan** or **intent**?
- Who did threats **target**?
- Any **attack-related behavior**? (*harassment, stalking, etc.*)

exhibited oppositional defiance?

- Were they **disobeying** rules?
- Staying out** past curfew?
- Leaving class** without permission?
- Starting **arguments**?

used any substances?

- What** did they use?
- How **often**?
- How did use **impact their functioning**?

struggled to manage their diagnoses?

- Have they been **depressed**? **Anxious**?
- Irritable**? Had **mood swings**?
- Exhibited **obsessions**? **Compulsions**?
- Experienced **psychosis**? **Mania**?
- Inattention**? **Hyperactivity**?

engaged in high-risk behaviors?

- Have they committed any **crimes**?
- Been **arrested**?
- Any **risky sexual behaviors**?
- Have they **run away**?
- Has there been **gang involvement**?
- Disordered eating**?

functioned in school?

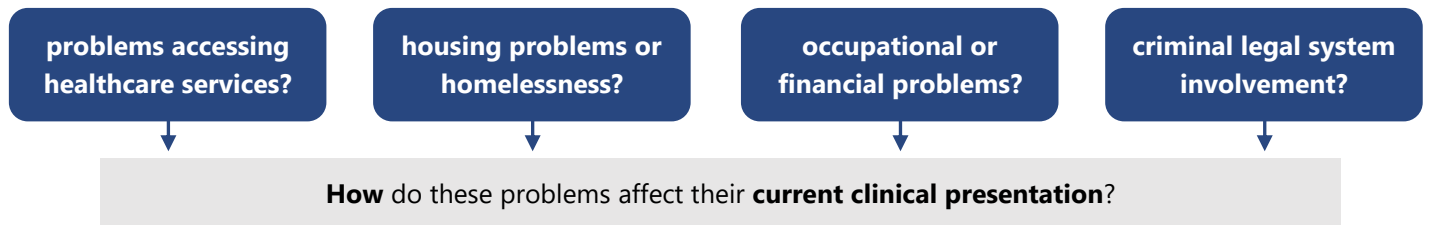
- How are they **doing academically**?
- Do they **complete their homework**?
- Do they **refuse to go to school**?
- Have they been **suspended** or **expelled**?

managed interpersonal relationships?

- 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...



***Note:**

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 added?
- were any treatment goals removed?
- 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?

Writing Tips:

The youth struggled to manage their anger during this review period.

X TOO VAGUE

The youth struggled to manage their anger during this review period as exhibited by them physically assaulting multiple peers and their grandmother.

✓ PRECISE & ILLUSTRATIVE

The youth was hospitalized 4 times in 2021.

X CENTERS PAST BEHAVIORS

Despite being hospitalized in 2021, the youth was not hospitalized during this review period.

✓ PRIORITIZES MOST RECENT INFO