

Alamance-Caswell Local Management Entity  
 Integrated Payment & Reporting System (IPRS) Target Population Assignment Worksheet-  
 CMCED

Consumer Name:	Target Population: <b>CMECD</b>
Consumer Record Number:	DOB:
Provider Agency: Alamance-Caswell LME	Date of Enrollment:

Instructions:

1. Complete the consumer identifying information above.
2. Review Client Eligibility Criteria, ICD-9 Diagnosis Ranges, Concurrency Issues, & Service Array to determine appropriate target population to be assigned. *Note: Documentation to support assigned target population must be maintained in consumer record.*
3. Print, sign, and date worksheet as indicated.

***By signing below you are attesting that you have reviewed all applicable eligibility criteria to verify consumer's eligibility for assigned target population. The completed IPRS Target Population Assignment Worksheet must be maintained in consumer's medical record with all supporting documentation used to determine consumer's target population.***

\_\_\_\_\_  
 Staff Name (PRINT)

\_\_\_\_\_  
 Signature/Credentials of Staff

\_\_\_\_\_  
 Date

<b>Child Mental Health Early Childhood Disorder</b>	
<b>Client Eligibility Criteria</b>	<p>Child, starting on the third birthday until the 6<sup>th</sup> birthday, who demonstrates significantly atypical behavioral, socio-emotional, motor or sensory development such as:</p> <ol style="list-style-type: none"> <li>1. Diagnosed hyperactivity, attention deficit disorders, autism spectrum disorders, severe attachment disorders, other pervasive developmental disorders, or other behavioral disorders.</li> <li>2. Have indicators of emotional and behavioral disorders such as:               <ol style="list-style-type: none"> <li>a. delay or abnormality in achieving emotional milestones, such as attachment, parent-child interaction, pleasurable interest in adults and peers, ability to communicate emotional needs, or ability to tolerate frustration;</li> <li>b. persistent failure to initiate or respond to most social interactions;</li> <li>c. fearfulness or other distress that does not respond to comforting by caregivers;</li> <li>d. indiscriminate sociability, for example, excessive familiarity with relative strangers, or</li> <li>e. self-injurious or other aggressive behavior.</li> </ol> </li> <li>3. Have substantiated physical abuse, sexual abuse, or other environmental situations that raise significant concern regarding the child's emotional well being.</li> </ol> <p><b>OR</b></p> <p>Have documented presence of one or more of the following indicators associated with patterns of development, which have a high probability of meeting the criteria for developmental delay or atypical development as the child matures:</p> <ol style="list-style-type: none"> <li>a. Parental Substance Abuse: Birth mother during pregnancy or primary care giving parent has been a habitual abuser of alcohol and/or drugs.</li> <li>b. Parental Mental Retardation: Either parent has been diagnosed with mental retardation or developmental disability</li> </ol>

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	<p>c. Parental Mental Illness: Either parent has a diagnosed illness such as severe depression, bipolar illness, schizophrenia, or borderline psychotic conditions.</p> <p><b>OPTIONAL for FY04-05: The child</b></p> <p>Has a documented risk assessment score on the ASQ-SE as follows</p> <p>3 years of age ROC cutoff score of 59</p> <p>4 years of age ROC cutoff score of 70</p> <p>5 years of age ROC cutoff score of 70</p> <p>Eligibility Determination for this population group should be completed annually in conjunction with the Person Centered Plan process.</p>										
<p><b>ICD-9 Diagnosis Ranges</b></p>	<table border="0"> <tr> <td>291-2989</td> <td>31281-3149</td> </tr> <tr> <td>299-2999</td> <td>3153</td> </tr> <tr> <td>300-3019</td> <td>31531</td> </tr> <tr> <td>3027</td> <td>3158</td> </tr> <tr> <td>303-3124</td> <td>3159</td> </tr> </table> <p><b>ICD-9 Diagnosis Ranges</b></p> <p>~~~~~</p> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>	291-2989	31281-3149	299-2999	3153	300-3019	31531	3027	3158	303-3124	3159
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3027	3158										
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<p><b>Concurrency Issues</b></p>	<p>An individual cannot be enrolled in CMCED and any other MH, DD, or SA Target Population category at the same time.</p> <p>~~~~~</p> <p>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>										
<p><b>Service Array</b></p>	<p>Refer to <i>IPRS Service Array</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>										
<p><b>Provider Restrictions</b></p>	<p><b>Billing Provider</b> – Area Program or LME</p> <p><b>Attending Provider</b> – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/DD Provider</p> <p>All providers staff shall have child mental health and early childhood development specific skills, education and experience.</p>										
<p><b>Funding Sources</b></p>	<p>Child MH State Crisis 536996003 1590 220 00 (procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820)</p> <p>Child MH SSBG 536945 1291 250 Q7</p> <p>Child MH MHBG 536945 1291 250 6W (procedure code NOT YP820)</p> <p>Child MH State UCR 536945 1290 220 00</p> <p>Child MH UCR CTSP 536930 1290 220 39</p> <p>~~~~~</p> <p>For full details, refer to <i>IPRS Budget Criteria</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>										
<p><b>Utilization Management</b></p>											