

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

	<p>OR (2) Has a primary night-time residence that is: (a) temporary shelter;</p> <p>or (b) temporary residence for individuals who would otherwise be institutionalized;</p> <p>or (c) place not designed/used as a regular sleeping accommodations for human beings;</p> <p>And (1) Due to be evicted or discharged from a stay of 30 days or less from a treatment facility</p> <p>AND (2) Lacking resources to obtain and/or maintain housing Eligibility Determination for this population group should be completed annually in conjunction with the Person Centered Plan process.</p> <p>~~~~~</p> <p>NOTES: This target population was designed to cross walk with Levels C and D in the Child Levels of Care Document (March 2002). For additional information please refer to this document. Also, for additional clarification regarding specific terminology used in eligibility determination, please refer to the Child Mental Health IPRS Eligibility Clarification document.</p>																				
<p>ICD-9 Diagnosis Ranges</p>	<table border="0"> <tr> <td>293-29799</td> <td>3028-3029</td> <td>9958-99589</td> <td>V7102</td> </tr> <tr> <td>2988-2989</td> <td>306-30999</td> <td>V158-V1589</td> <td></td> </tr> <tr> <td>300-30099</td> <td>3101</td> <td>V61-V619</td> <td></td> </tr> <tr> <td>30113</td> <td>311-31499</td> <td>V623-V629</td> <td></td> </tr> <tr> <td>302-3026</td> <td>9955-99559</td> <td>V652</td> <td></td> </tr> </table> <p>~~~~~</p> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>	293-29799	3028-3029	9958-99589	V7102	2988-2989	306-30999	V158-V1589		300-30099	3101	V61-V619		30113	311-31499	V623-V629		302-3026	9955-99559	V652	
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<p>Concurrency Issues</p>	<p>An individual cannot be enrolled in CMSED 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. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>																				
<p>Service Array</p>	<p>Refer to <i>IPRS Service Array</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>																				
<p>Provider Restrictions</p>	<p>Billing Provider - Area Program or LME</p> <p>Attending Provider – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/SA Provider</p>																				
<p>Funding Sources</p>	<p>Child MH State Crisis 536996003 1590 220 00 (procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820) Child MH SSBG 536945 1291 250 Q7 Child MH MHBG 536945 1291 250 6W (procedure code NOT YP820)</p>																				

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	Child MH State UCR 536945 1290 220 00 Child MH UCR CTSP 536930 1290 220 39 ~~~~~ For full details, refer to <i>IPRS Budget Criteria</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)
Utilization Management	For Utilization Management information, refer to the Child Levels of Care Criteria document dated March 2002.