

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<p><b>Assertive Community Treatment (ACT)</b> is a program that delivers services by a group of multi-disciplinary mental health staff who work as a team and provide the majority of treatment, rehabilitation, and support services individuals need to achieve their goals. This multi-disciplinary team ensures ongoing integrated, individualized, and comprehensive assessment, while providing intensive treatment/rehabilitation and support services in the community. The population typically served are individuals with severe and persistent mental illness and/or have concurrent substance abuse issues and who are at risk of decompensation and re-hospitalization even with the availability of traditional community-based services.</p>	<p><b>Admission and Concurrent Service Components</b></p> <ol style="list-style-type: none"> <li>1. ACT provides services through a multi-disciplinary integrated treatment approach. All staff must have at least one (1) year’s experience with the Serious and Persistent Mental Illness (SPMI) population in direct practice settings. The staff must be comprised of the full-time equivalents appropriate to the size of the ACT team. The composition of the team must include:               <ol style="list-style-type: none"> <li>a. The Team Leader is a full-time licensed master’s level mental health professional or RN with at least one (1) year direct experience with the SPMI co-occurring disorder population, and at least one (1) year program management experience.</li> <li>b. A Board Certified or Board Eligible or ASAM certified Psychiatrist on a full or part-time basis. The Psychiatrist shall provide 16 hours a week for every 50 individuals, and shall be accessible 24 hours a day, seven (7) days a week or have back-up arrangements for coverage.</li> </ol> </li> </ol>	<p><b>Admission Criteria - (Must meet <i>all</i> of the following)</b> Member Eligibility: The following are the eligibility requirements for Assertive Community Treatment Services:</p> <ol style="list-style-type: none"> <li>1. Adults, 18 years of age or older, who have serious and persistent mental illness. A person shall be considered to have a serious and persistent mental illness when all of the following criteria for diagnosis, treatment history, and functioning level are met.               <ol style="list-style-type: none"> <li>a. Diagnosis: Primary diagnosis of schizophrenia or other psychotic disorders, such as schizoaffective disorder or bipolar disorder, as defined in the Diagnostic and Statistical Manual of Mental Disorders. Individuals with a primary diagnosis of a substance use disorder, Intellectual Disabilities, or brain injury are not the intended member group;</li> </ol> <p style="text-align: center;">AND</p> </li> </ol>

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<p>The ACT team provides most of their services in the individual’s natural setting, with minimal referral to other program entities until some degree of stabilization has been achieved and the individual is ready for the transition to traditional community-based treatment services. Some of the various treatment, rehabilitation, and support service functions will be assumed by virtue of a staff person’s specialty area, while other generic activities can be carried out by most staff.</p> <p>The provision of services is guided by the principle that individuals be maintained in a community setting at the least restrictive level of care with the focus on assisting individuals in achieving a maximum level of independence with an overall enhancement in their quality of life.</p>	<p>2. Additional program staff include:</p> <ul style="list-style-type: none"> <li>a. At least three (3) full-time equivalent RNs for a full-sized team and two (2) full-time equivalent RNs for a modified team.</li> <li>b. Master’s level mental health professionals: four (4) full time employees (FTEs) in addition to the Team Leader for a full-sized team and two (2) in addition to the Team Leader for a modified team.</li> <li>c. Vocational Specialist who may be one (1) of the master’s level mental health professionals.</li> <li>d. Substance Abuse Specialist, preferably a Certified Addiction Counsellor (CAC).</li> <li>e. Mental Health Specialists/Case Managers with a minimum of a Bachelor of Arts degree.</li> <li>f. Peer Specialist</li> <li>g. Program/Administrative Assistant</li> </ul>	<p>b. The Psychiatrist recommends ACT level of care based upon a Psychiatric Evaluation;</p> <p align="center">AND</p> <p>c. Members who meet at least two (2) of the following criteria:</p> <ul style="list-style-type: none"> <li>1) At least two (2) psychiatric hospitalizations in the past 12 months or lengths of stay totaling over 30 days in the past 12 months that can include admissions to the psychiatric emergency services;</li> <li>2) intractable (i.e., persistent or very recurrent) severe major symptoms (e.g., affective, psychotic, suicidal, anxiety);</li> <li>3) Co-occurring mental illness and substance use disorders with more than six (6) months’ duration at the time of contact;</li> </ul>

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<p>Services are provided in the community wherever the individual needs supportive, therapeutic, rehabilitative intervention (e.g., at the individual’s residence, place of work or leisure, provider program site, etc.).</p> <p>The ACT multi-disciplinary staff individually plan and deliver the following services to individuals:</p> <ul style="list-style-type: none"> <li>• Service Coordination: Assigned case manager who coordinates and monitors the individual’s activities with the team, and links with community resources that promote recovery</li> <li>• Crisis Assessment and Intervention: Available 24 hours a day, seven (7) days a week, including telephone and face-to-face contact</li> </ul>	<ol style="list-style-type: none"> <li>3. Services are provided to be consistent with Pennsylvania’s Community Support Program (CSP) principles.</li> <li>4. Caseloads are based on staff-to-individual ratios. The minimum ratio for each full-time equivalent is 1:10, with a 1:8 ratio for a modified team (not including the psychiatrist and program assistant).</li> <li>5. The program will provide comprehensive bio-psychosocial assessments that include psychiatric evaluation, nursing assessment, psychosocial and rehabilitative functional assessments, and substance use evaluations. Also available are psychopharmacological consultation for medication adjustment and psychological assessment for the purpose of differential diagnosis.</li> <li>6. Following admission into the program and upon completion of the assessments, a strength-based comprehensive integrated treatment/rehabilitation plan will be developed. The individualized plan will include measurable outcomes and timelines, with the</li> </ol>	<ol style="list-style-type: none"> <li>4) High risk or recent history of Criminal Justice involvement which may include frequent contact with law enforcement personnel, incarcerations, parole or probation;</li> <li>5) Literally homeless, imminent risk of being homeless, or residing in unsafe housing;</li> <li>6) Residing in an Inpatient or supervised community residence, but clinically assessed to be able to live in a more Independent living situation, if intensive services are provided, or requiring a residential or institutional placement, if more Intensive services are not available.</li> </ol> <p align="center">AND</p> <ol style="list-style-type: none"> <li>d. Difficulty effectively utilizing traditional case management or office-based outpatient services, or evidence that they require a more assertive and frequent non-office-based service to meet their clinical needs.</li> </ol>

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<ul style="list-style-type: none"> <li>• Symptom Assessment and Management: Ongoing comprehensive assessment and accurate diagnosis, psycho-education regarding mental illness and medication management, symptom self-management, and supportive therapy</li> <li>• Medication Prescription, Administration, Monitoring, and Documentation: The ACT psychiatrist shall establish an individual clinical relationship with each individual. As referenced in the ACT bulletin (pg. 17), will assess monthly the individual’s symptoms and response to medications including side effects.</li> </ul> <p>Integrated treatment that addresses the inter-relationships between mental health issues and substance</p>	<p>signature of the individual as an active participant in the development of the treatment goal. The plan will be revised as needed to reflect the individual’s current, ever-changing needs. It must be revised at minimum once every six (6) months or whenever there is a significant change in the individual’s status.</p> <p>7. Required Services:</p> <ul style="list-style-type: none"> <li>a. Crisis Intervention 24 hours a day, seven (7) days a week, telephonic and in-person</li> <li>b. Supportive Psychotherapy</li> <li>c. Integrated treatment that addresses the inter-relationship between mental health issues and substance use</li> <li>d. Medication, prescription administration, monitoring, mobile medication administration, and documentation</li> <li>e. Rehabilitation: work related assessment, intervention and support</li> </ul>	<p><b>Continued Stay Criteria (must meet all criteria)</b></p> <ol style="list-style-type: none"> <li>1. Validated DSM diagnosis, which remains the principal diagnosis, and continued SPMI symptomatology affecting the member’s ability to function in the community, and to access and utilize traditional treatment services. It is expected that a Psychiatric evaluation has been completed since the last review and continues to recommend ACT level of care.</li> <li>2. There is evidence that the member is benefiting from the continued involvement of the ACT team, in at least two (2) of the following areas: <ul style="list-style-type: none"> <li>a. Medication adherence evidenced by decreasing ACT involvement with a move toward independence.</li> <li>b. Reduction in the use of inpatient episodes, and/or days spent in inpatient care, as compared to prior authorization period.</li> <li>c. Improvement in the member’s community supports (health, legal, transport, housing,</li> </ul> </li> </ol>

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<p>use. While the substance use needs to be a consideration during treatment, ACT teams cannot provide substance use treatment without a license from the Department of Drug and Alcohol Programs (DDAP).</p> <ul style="list-style-type: none"> <li>• Work-related Services: Assist the individual to value, find, and maintain meaningful employment</li> <li>• Activities of Daily Living: Includes housing, household activities, personal hygiene, money management, use of transportation, access physical health resources</li> <li>• Social/Interpersonal Relationship and Leisure Time Training: Activities to improve communication skills, develop assertiveness, increase self esteem</li> </ul>	<ul style="list-style-type: none"> <li>f. Social and Recreational Skills Training</li> <li>g. Activities of Daily Living Services</li> <li>h. Support Services: Health, Legal, Financial, Transportation, Living Arrangements</li> <li>i. Advocacy</li> <li>j. Education</li> </ul> <p>8. The ACT’s contacts with individuals will vary based on the individual’s clinical needs. The ACT team will have the capacity to provide multiple contacts per week to the individual. There will be an average of three (3) contacts per week for all individuals, but multiple contacts may be as frequent as two (2) to three (3) times per day, seven (7) days per week.</p> <p>9. The ACT team shall provide ongoing contact for members who are hospitalized for substance abuse or psychiatric reason to assist the continuity of care of those members. The ACT team shall:</p>	<p>finances, vocational skills, etc.) with the goal of moving toward independence.</p> <p>3. Treatment Planning and subsequent therapeutic interventions reflect appropriate, adequate, and timely implementation of all treatment interventions in response to the individually changing needs. This is evidenced through the following:</p> <ul style="list-style-type: none"> <li>a. Service hour intensity matches the needs of the member</li> <li>b. Expected level of Member engagement is present to expect continued stability or improvement</li> </ul> <p>4. The member has not achieved six (6) months of demonstrated stabilization or is not at the stabilization baseline, and continues to meet the admission criteria of this level of intervention.</p> <p>5. The member remains in a community residential setting that requires the additional supports of ACT.</p>

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<ul style="list-style-type: none"> <li>• Peer Support Services: Linkages to self-help programs and organizations that promote recovery</li> <li>• Support Services: Assistance to access medical services, housing, financial support, social services, etc.</li> <li>• Education, Support and Consultation to Individuals' Families and other Major Supports: Includes psycho-education related to individual's illness and role of the family, linkages to family self-help programs and organizations that promote recovery</li> <li>• The ACT team is directed by a Team Leader and Psychiatrist and includes sufficient staff from the core mental health disciplines, at least one (1) peer specialist and program/</li> </ul>	<ul style="list-style-type: none"> <li>a. Assist in admission process;</li> <li>b. Make contact with the member and inpatient provider within 48 hours of knowing of the inpatient admission to:               <ul style="list-style-type: none"> <li>1) provide information</li> <li>2) conduct appropriate assessment</li> <li>3) assist with member's needs and</li> <li>4) begin discharge planning</li> </ul>               in conjunction with the inpatient setting;             </li> <li>c. Maintain at least weekly face-to-face contact with the member and the inpatient treatment team staff;</li> <li>d. Transition the member from the inpatient setting to the community; and</li> <li>e. Maintain at least three (3) face-to-face contacts per week for one (1) month following discharge.</li> </ul>	<ul style="list-style-type: none"> <li>6. Evidence that currently available community services are not adequate or effective in managing the members needs</li> <li>7. There is expected benefit of continued stability with the support of the ACT team.</li> </ul> <p><b>Discharge Criteria</b></p> <ul style="list-style-type: none"> <li>1. Discharge shall occur when:           <ul style="list-style-type: none"> <li>a. The member has attained reasonable goals in the treatment plan.</li> <li>b. The individual and the team determine, based on the attainment of goals as identified in the individual's treatment plan, that ACT services are no longer needed based on the attainment of goals.</li> <li>c. The individual moves outside the geographic area of the ACT team's responsibility. In such cases, the ACT team will arrange for a transfer of mental health services responsibility to an ACT program or other</li> </ul> </li> </ul>

**MAGELLAN BEHAVIORAL HEALTH OF PENNSYLVANIA, INC.  
MENTAL HEALTH GUIDELINES FOR HEALTHCHOICES**

**ASSERTIVE COMMUNITY TREATMENT (ACT) (revised August 1, 2022)**

<b>Service Description and Common Service Settings</b>	<b>Magellan Specifications</b>	<b>Magellan Utilization Management Guidelines</b>
<p>administrative support staff who are able to provide treatment, rehabilitation and support services 24 hours per day, seven (7) days per week.</p> <p><b>Common Settings:</b></p> <ul style="list-style-type: none"> <li>• Assertive Community Treatment (ACT)</li> </ul>	<p>10. When members are discharged to lower levels of care based on careful assessment of their readiness and mutual agreement, the process should involve a gradual transition period including at least 30 days of overlap of responsibility for monitoring the members' status and progress. The members should also have the option to reenroll in the ACT team even after the transition period has ended. The ACT team should periodically monitor the members' engagement in the new program until members are assessed to have fully and successfully engaged in the new program.</p>	<p>provider within the members new geographic location.</p> <p>d. If member is admitted to an all-inclusive 24-hour program, such as state hospital, incarceration, EAC, LTSR, etc., they will be discharged from ACT.</p> <p>e. Member is not actively engaged with the ACT treatment team, after numerous attempts to re-engage.</p> <p>f. The individual chooses to withdraw from ACT services and attempts to re-engage with the service have not been successful. ACT team will attempt to connect the member to alternate supports.</p>