

**Department of Human Services
Office of Mental Health & Addiction Services**

**Service Delivery Timelines
August 3, 2005**

As specified in the MHO contract:

For urgent and emergency response, initial face-to-face or telephone screening within fifteen minutes of contact to determine the nature and urgency of the situation.

For emergency response, covered services within 24 hours of contact.

For urgent response, covered services within 48 hours of request.

For non-urgent and non-emergency response, intake assessment within two calendar weeks following a request for covered services.

For post-hospital services, covered services within one calendar week following discharge from acute inpatient psychiatric care.

For OHP members who are placed in substitute care by DHS, a comprehensive mental health assessment to be provided no later than 60 days following the date of placement.

As specified in OMHAS Level of Service Intensity Determination Policy One:

ISA determinations will be made within 3 working days of completed ISA referral. Commencement of ISA services will follow timelines specified in MHO contract.

As specified in the Intensive Community-Based Treatment & Support Services (ICTS) OAR:

A child and family team meeting is convened and an initial Service Coordination Plan developed no later than 14 calendar days from the date the provider receives an authorized request for ICTS services.

A comprehensive assessment or assessment update is completed within 14 calendar days from the date the provider receives an authorized request for ICTS services. It is updated annually and reviewed and approved by the LMP.

The Service Coordination Plan is completed within 30 calendar days from the date the provider receives an authorized request for ICTS services. The plan is reviewed and revised quarterly by the child and family team.

An individualized treatment plan is completed within 30 calendar days from the date the provider receives an authorized request for ICTS services. It is reviewed and revised quarterly and approved by the LMP.

Monthly summary progress notes by the care coordinator that document that the child and family team has discussed progress with treatment and service coordination planning and convened a child and family team meeting if necessary.

Other requirements:

Providers of ITS and outpatient services must meet service delivery and documentation standards and timelines as outlined in the rules regulating the services they provide.