

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Policy and Procedure</p>	Policy Issuer (Unit/Program)	Mental Health
	Policy Number	04-19
	Effective Date	
	Revision Date	6-28-23
Title: Level of Intensity Screening Tool (LIST)	Functional Area: Programs	
Approved By: <i>Signed version available upon request</i>		
Kelli Weaver, LCSW Deputy Director		

BACKGROUND/CONTEXT:

The Division of Behavioral Health Services (BHS) offers a continuum of mental health services for clients and families appropriate to their unique needs. This policy provides information related to the Level of Intensity Screening Tool (LIST) used to support justification of an individual’s potential need for high intensity services.

Definitions:

Access – A BHS team of mental health professionals who provide Sacramento County residents with referrals and linkages to mental health services. Team members determine eligibility for services based on referral information contained in a Service Request and by conducting a phone screening in the individual’s primary language. Bilingual staff, interpreters and Video Relay Service (VRS) or California Relay 711 are available at no cost.

Electronic Health Record (EHR) – A web-based health record used by BHS, contracted mental health providers, and contracted substance use prevention and treatment services providers. Users document services, manage billing, produce data reports, and record demographic information.

Full Service Partnership (FSP) – Programs that provide comprehensive, flexible, client-driven recovery-oriented, strength-based, trauma informed, culturally and linguistically responsive, community-based specialty mental health services, and FSP supports to adult beneficiaries who meet target population and medical necessity criteria as defined by the Sacramento County BHS and require frequent contact and support to maintain in the community due to the severity of their mental illness. FSPs consists of a team of mental health

professionals and other service providers. Admittance requires meeting Specialty Mental Health Services (SMHS) Criteria, Medi-Cal eligibility, capability of living in the community but with impairment that requires frequent contact and support to maintain community tenure.

Subacute Placement – Programs that provide comprehensive, culturally competent, strength-based, recovery-oriented, 24-hour subacute services to adult beneficiaries who meet target population and medical necessity criteria as defined by the Sacramento County BHS policy. These programs are licensed residential facilities as part of the sub-acute continuum, which includes Adult Residential Treatment Programs (ARTP), Transitional Residential (TR) Programs, Skilled Nursing Facilities (SNF), Mental Health Rehabilitation Centers (MHRC), Neurobehavioral SNFs, Institute of Mental Disease (IMD) facilities, Psychiatric Health facilities (PHF) or State Hospitals. Services are provided in a structured home environment that supports improving recovery and independent living skills of individuals living with co-occurring medical and/or substance use disorders along with a psychiatric condition for the purpose of community integration and transition to a lower level of care.

Intensive Placement Team (IPT) – A clinical team of designated mental health staff who evaluate referrals for high intensity outpatient services and subacute placement. IPT completes service authorizations, monitors the care of individuals receiving treatment within an authorized secured psychiatric setting, promotes recovery efforts, collaborates with treatment teams, offers input into client treatment plans, attends utilization reviews, provides consultation when needed, and assists in discharge planning for clients stepping down to the community.

Mental Health Plan (MHP) – Provides or arranges for the provision of SMHS to Medi-Cal beneficiaries in Sacramento County that meet medical necessity criteria, consistent with the beneficiaries’ mental health treatment needs and goals.

Purpose:

I. LIST USE AND SUBMISSION

- A.** When the clinical team determines that a client may benefit from a higher level of care, the LIST is completed to help determine level of service intensity for an existing MHP client or for a new client referred to the MHP, as follows:

1. The current service provider or treatment team submits a LIST to IPT.

- a. Providers with access to the County’s EHR will submit a LIST/service request in the County’s EHR (SmartCare). Providers will also submit the LIST and collateral documents to IPT via fax at (916) 854-8824 or e-fax at DHS-FAX-MH-IPT@SacCounty.net.
- b. Non-EHR users (ex. Adult Correctional Mental Health, Psychiatric Hospitals) will submit the LIST and collateral documents to IPT via fax at (916) 854-8824 or e-fax at DHS-FAX-MH-IPT@SacCounty.net.

Designated County staff such as the FSP Program Coordinator will determine appropriateness for higher level of care based on the completed LIST, review of collateral documents, and consult with the referring party as needed.

- 2. If approved for an FSP level of care, IPT will admit to the identified FSP in the County’s EHR (SmartCare).
- 3. If approved for eligibility for higher level of care, IPT will assess and take the next steps consistent with the County’s policy [MH 04-03 Subacute Placement Referrals](#).

DETAILS:

II. LIST DESCRIPTION

A. Evaluation Domains:

- 1. LIST is a standardized tool that provides a consistent data set across four evaluation domains. The domains include the following:

I	Clinical Complexity A. Psychiatric Hospitalization B. Psychotropic Medication Stability C. Past Exposure to & Use of Treatment D. Level of Engagement
II	Risk Factors A. Suicidal/Homicidal Ideation B. Danger to Self or Others C. Self-Neglect D. History of Incarceration/Criminal Justice

	Involvement E. High Risk Behavioral/Impulsivity
III	Life Circumstances A. Emotional Distress B. Relationships/Supports C. Level of Support with Case Management Needs
IV	Co-morbidity/Medical or Substance Use A. Medical Conditions B. Substance Use

B. Scores and Level of Intensity Recommendations

1. Each domain is composed of a series of criteria which have three levels of intensity; severe (3), moderate (2), and mild (1).
2. If multiple criteria are endorsed in the same domain, the number associated with the highest intensity domain will be given.
3. Select N/A if the criteria do not apply to the client.
4. Please note, for scoring, each item in the scale is described based on the behavior observed of the client being assessed.
5. Scoring should be focused on how the current behaviors impact the current functioning of the client being assessed.
6. Referral Recommendations:

Scores Between:	Level of Intensity/Program Recommendation:
0 – 15	Managed Care/Primary Care Physician (PCP)
16 – 24	Community Outreach Recovery Empowerment (CORE) Programs
25 – 34	FSP Programs
35- 42	Sub-Acute Consideration

7. Please note that a LIST/service request without collateral documents will be delayed until collateral documents are submitted. The LIST packet must be included for eligibility and linkage to an appropriate FSP or Subacute program.
8. A complete LIST packet includes:

- a. Level of Intensity Referral form
- b. Screening tool
- c. Specialty Eligibility section for Specialty FSP programs
- d. Assisted Outpatient Treatment (AOT) criteria are met to justify the higher level of care. A copy of the crisis assessment that outlines the support for the AOT FSP needs to be attached.
- e. Homelessness checklist for individuals experiencing homelessness
- f. Multi-System Team Release form for the Community Justice Support program
- g. General release of information

C. Rationale for using the LIST process:

1. Assists current treatment providers in documenting clinical necessity to determine appropriate level of care. LIST functions as a decision support tool.
2. Decreases administrative barriers to timely linkage for clients in need of high intensity services.
3. Assists staff across agencies in determining a level of care decision based on multiple parameters, versus only using a limited data set such as diagnosis or length of hospitalization.
4. Enables treatment teams to identify potential treatment focus in some areas (e.g., working on increasing client's natural supports/relationships).
5. Promotes program and system accountability.
6. Creates a common point of reference, vocabulary, and consistent measures across providers and provider types.

D. Application of LIST:

1. Any staff can support in the completion of the LIST with clinical oversight and consultation.
2. When possible, the LIST should be completed in a team

environment that may include information from internal and external partners involved in the client's care.

3. When the clinical team determines that a client may benefit from a higher level of care, the LIST is completed to help determine level of service intensity for an existing MHP client or for a new client referred to the MHP.
4. Individuals completing the LIST should be objective and should not consider any future variables.
5. Client will be linked to the appropriate provider based upon the intensity of needs identified and the specialty criteria being met.

E. Documentation Requirements:

1. The LIST scores are auto-calculated on the form, generating a level of care recommendation.
2. All required Domain Ratings must be marked in the appropriate section to produce the score for the appropriate level of care.
3. The additional information/level of care recommendation section must contain the recommended level of care and the identified client needs to explain the higher level of care.
4. A progress note should document a summary of the recommendation to a higher level of care and the disposition to the appropriate provider.

Reference(s)/Attachments:

[LIST Instruction Manual](#)

[LIST Packet](#)

[LIST Recorded Training](#)

Related Policies:

[QM P&P 01-07 Determination for Medical Necessity and Target Population](#)

[MH P&P 04-03 Subacute Placement Referrals](#)

[Adult MH P&P 09-02 Multi-Agency Collaboration](#)

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BHS-DHS@saccounty.gov