



A Public Entity

INLAND EMPIRE HEALTH PLAN



**To:** PCPs and Behavioral Health Providers  
**From:** IEHP – Provider Relations  
**Date:** February 08, 2016  
**Subject:** **Specialty Mental Health Criteria**

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On October 16, 2015, Inland Empire Health Plan’s (IEHP) Behavioral Health Unit (BHU) updated the **Behavioral Health Initial Coordination of Care (COC) Form** to capture Members’ symptoms and functional impairments more accurately with additional clinical information.

IEHP PCPs and BH contracted Providers will continue to treat Members that have more mild to moderate mental health symptoms and minimal functional impairments (**Tier 1, Tier 2**). IEHP works closely with Riverside and San Bernardino County Departments of Behavioral Health to serve Medi-Cal Members that have more persistent, severe, and chronic mental health conditions (**Tier 3**). Through these updated forms, PCPs and BH contracted Providers can recommend Members’ behavioral health care be transitioned to the County, if (Tier 3) is met.

For Medi-Cal Members **ONLY**, the COC form includes the section below:

**Medi-Cal Only: Specialty Mental Health Criteria (Tier 3)**

**\*Does the Member meet Specialty Mental Health Criteria (Tier 3)?**

**Must have ALL of the following to meet Specialty Mental Health Criteria:**

1. Mental Health Diagnosis which falls into **3** these categories
2. GAF of 50 or below
3. Significant impairments in an important area of life functioning

**Yes**    **No**

Please select “Yes” **only** if all three criteria for Tier 3 are met. A “Yes” will trigger BHU to review the COC for possible transition of care to the County Mental Health Plan (MHP) for Specialty Mental Health Services. To avoid duplication, Medi-Cal Members can only receive behavioral health services from either IEHP or County Mental Health Plan at any given time. A “No” response indicates Members meet medical necessity criteria for Tier 1 and Tier 2 BH services, but does not meet Tier 3 Specialty Mental Health Criteria.

Services will be covered by IEHP until Members transition to their respective County Mental Health System. The Member needs to be notified of your recommendation to transition to County Mental Health for continuation of services.

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054.