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- 441—25.4(331) Access standards. Regions shall meet the following access standards:
 - **25.4(1)** A sufficient provider network which shall include:
- a. A community mental health center or federally qualified health center that provides psychiatric and outpatient mental health services in the region.
- b. A hospital with an inpatient psychiatric unit or state mental health institute located in or within reasonably close proximity that has the capacity to provide inpatient services to the applicant.
- **25.4(2)** Crisis services shall be available 24 hours per day, 7 days per week, 365 days per year for mental health and disability-related emergencies. A region may make arrangements with one or more other regions to meet the required access standards.
 - a. Basic crisis response.
- (1) Twenty-four-hour crisis response. An individual shall have immediate access to crisis response services by means of telephone, electronic, or face-to-face communication.
- (2) Crisis evaluation. An individual shall have immediate access to a crisis screening and will have a crisis assessment by a licensed mental health professional within 24 hours of referral.
- b. Crisis stabilization community-based services. An individual who has been determined to need CSCBS shall receive face-to-face contact from the CSCBS provider within 120 minutes from the time of referral.
- c. Crisis stabilization residential services. An individual who has been determined to need CSRS shall receive CSRS within 120 minutes of referral. The service shall be located within 120 miles from the residence of the individual.
- d. Mobile response. An individual in need of mobile response services shall have face-to-face contact with mobile crisis staff within 60 minutes of dispatch.
- *e. Twenty-three-hour observation and holding.* An individual who has been determined to need 23-hour observation and holding shall receive 23-hour observation and holding within 120 minutes of referral. The service shall be located within 120 miles from the residence of the individual.
 - 25.4(3) The region shall provide the following treatment services:
 - a. Outpatient.
- (1) Emergency: During an emergency, outpatient services shall be initiated to an individual within 15 minutes of telephone contact.
- (2) Urgent: Outpatient services shall be provided to an individual within one hour of presentation or 24 hours of telephone contact.
- (3) Routine: Outpatient services shall be provided to an individual within four weeks of request for appointment.
- (4) Distance: Outpatient services shall be offered within 30 miles for an individual residing in an urban community and 45 miles for an individual residing in a rural community.
 - h Inpatient
 - (1) An individual in need of emergency inpatient services shall receive treatment within 24 hours.
 - (2) Inpatient services shall be available within reasonably close proximity to the region.
- c. Assessment and evaluation. An individual who has received inpatient services shall be assessed and evaluated within four weeks.
- **25.4(4)** Subacute facility-based mental health services. An individual shall receive subacute facility-based mental health services within 24 hours of referral. The service shall be located within 120 miles of the residence of the individual.
- **25.4(5)** Support for community living. The first appointment shall occur within four weeks of the individual's request of support for community living.
- **25.4(6)** Support for employment. The initial referral shall take place within 60 days of the individual's request of support for employment.
- **25.4(7)** Recovery services. An individual receiving recovery services shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services.
 - **25.4(8)** Service coordination.
- a. An individual receiving service coordination shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services.

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- b. An individual shall receive service coordination within ten days of the initial request for such service or being discharged from an inpatient facility.
- **25.4(9)** The region shall make the following intensive mental health services available. A region may make arrangements with one or more other regions to meet the required access standards.
 - a. Assertive community treatment.
 - (1) A minimum of 22 ACT teams shall be operational statewide.
- (2) A sufficient number of ACT teams shall be available to serve the number of individuals in the region who are eligible for ACT services. As a guideline for planning purposes, the ACT-eligible population is estimated to be about 0.06 percent of the adult population of the region. The region may identify multiple geographic areas within the region for ACT team coverage. Regions may work with one or more other regions to identify geographic areas for ACT team coverage.
 - b. Access centers.
 - (1) A minimum of six access centers shall be operational statewide.
- (2) An access center shall be located within 120 miles of the residence of the individual or be available within 120 minutes from the time of the determination that the individual needs access center services.
 - c. Intensive residential services.
 - (1) A minimum of 120 intensive residential service beds shall be available statewide.
- (2) An individual receiving intensive residential services shall have the service available within two hours of the individual's residence.
 - (3) An individual shall be admitted to intensive residential services within four weeks from referral.
- **25.4(10)** The following limitations apply to home and vehicle modification for an individual receiving mental health and disability services:
- a. A lifetime limit equal to that established for the home- and community-based services waiver for individuals with intellectual disabilities in the medical assistance program.
- b. A provider reimbursement payment will be no lower than that provided through the home- and community-based services waiver for individuals with intellectual disabilities in the medical assistance program.

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