



BHS PROVIDER UPDATES

2017-6



New “Eligibility for Pathways to Well-Being and Enhanced Services Form” and Determination Process

The ***Eligibility for Pathways to Well-Being (PWB) and Enhanced Services Form*** is now live on Cerner Community Behavioral Health (CCBH). Please note, the PWB criteria for eligibility for Enhanced Services (Subclass) has not changed.

Instructions for accessing the form on CCBH are as follows:

- While under a client’s selected panel, click on the Top half of the New Assessment button
- Click on Assessment Type
- Under “Type” find and double click Eligibility for Pathways
- Enter Date, select Save, and continue with form completion
- Help text is available by clicking on the question marks found throughout the form

As a reminder, all clients with an open Child Welfare Services (CWS) case must have a completed Eligibility for Pathways to Well-Being Form.

If you have any questions about the use of this form, please contact your Pathways to Well-Being Liaison or Pathways to Well-Being Program Manager, Mandy (Amanda) Kaufman at:

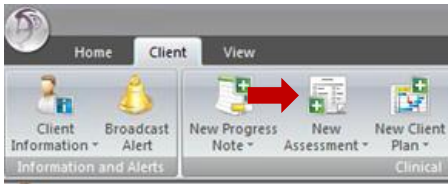
amanda.kaufman@sdcounty.ca.gov.

The form-fill version, the explanation sheet, and PWB Staff contact information can be found at the PWB website at: <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/workforce/pathways.html>

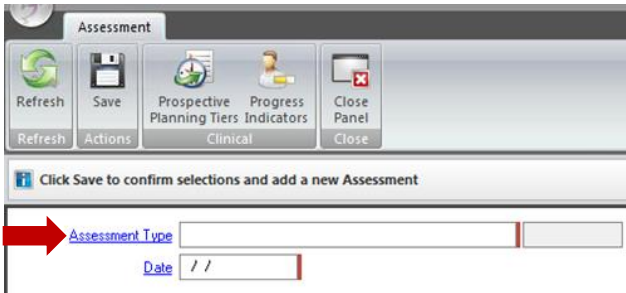
See walkthrough instructions and example of form on CCBH on the following 2 pages.

Pathways to Well-Being CCBH Eligibility Determination Walkthrough Instructions
2017-6

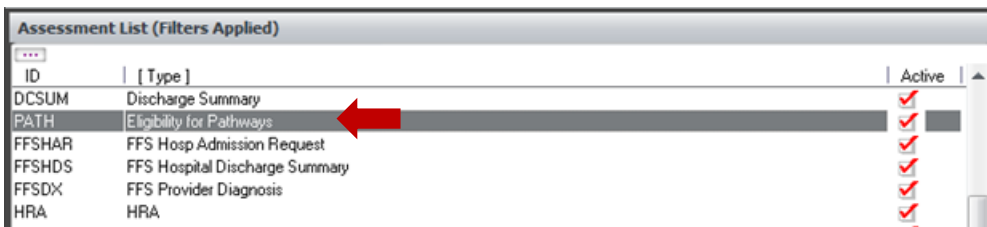
While under a client's selected panel, click on the Top half of the New Assessment button



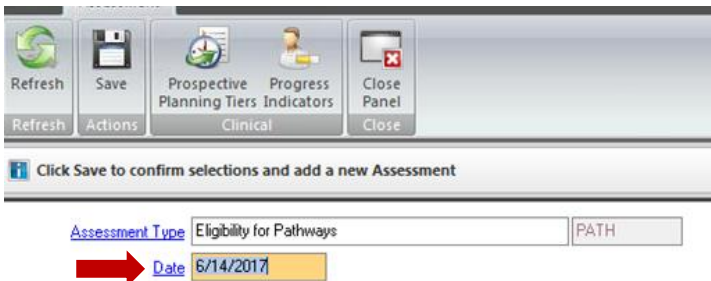
Click on Assessment Type



Under "Type" find and double click Eligibility for Pathways



Enter Date, select Save, and continue with form completion



Help text is available by clicking on the question marks found throughout the form



County of San Diego Behavioral Health Services
ELIGIBILITY FOR PATHWAYS TO WELL-BEING AND ENHANCED SERVICES
(Class or Subclass)
☐ Intake ☐ Reassessment ☐ Discharge

Program Name:

A Child/youth meets criteria for Enhanced Services (Subclass) if
Answers to item 1-3 below are Yes AND
Answer to either 4 OR 5 are YES

1. Child/youth has open Child Welfare Service Case (Including voluntary cases)? ☒ Yes ☐ No

Pathways to Well-Being CCBH Eligibility Determination Example
2017-6

Assessment									
 Refresh	 Perform Validation Check Validation	 Save and Close	 Save	 Final Approve	 Print	 Delete	 Add Signature Signatures	 Close Panel Close	

Eligibility for Pathways

County of San Diego Behavioral Health Services

ELIGIBILITY FOR PATHWAYS TO WELL-BEING AND ENHANCED SERVICES

(Class or Subclass)

☐ Intake ☐ Reassessment ☐ Discharge

Program Name

A Child/youth meets criteria for Enhanced Services (Subclass) if

Answers to item 1-3 below are Yes AND

Answer to either 4 OR 5 are YES

1. Child/youth has open Child Welfare Service Case (Including voluntary cases)? ☐ Yes ☐ No
2. Child/youth meets Medical Necessity criteria? ☐ Yes ☐ No
3. Child/youth (up to age 21) has full scope Medi-Cal? ☐ Yes ☐ No
4. 2 or more placement changes within 24 months due to behavioral health needs? ☐ Yes ☐ No
5. Child/youth is currently being considered for, receiving, or recently discharged from any of the following services (generally within 90 days):

Crisis Stabilization(ex: ESU, North County Crisis Intervention and Response Team)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Psychiatric Hospitalization	<input type="checkbox"/> Yes <input type="checkbox"/> No
Placement in RCL 10 or above or Short Term Residential Treatment Program (STRTP)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Special Care Rate (SCR) due to behavioral health needs	<input type="checkbox"/> Yes <input type="checkbox"/> No
Therapeutic Behavioral Services (TBS)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Wraparound, Comprehensive Assessment and Stabilization Services (CASS)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Foster Family Agency Stabilization and Treatment (FFAST)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Intensive Services Foster Care	<input type="checkbox"/> Yes <input type="checkbox"/> No

B ☐ Eligible for Enhanced Services (Subclass) OR

☐ Eligible for Pathways to Well-Being (Class)

☐ *Active to Subclass or Class as of: / /

☐ *Inactive to Subclass or Class as of: / /

* Dates must match current program eligibility determination date.

C CWS Protective Services Worker Name:

CWS Protective Services Worker Phone:

Out of County CWS Case ☐ Yes ☐ No

BHS Clinician/Provider:

Care Coordinator

Is the BHS Clinician/Provider assuming the Care Coordinator Role? ☐ Yes ☐ No

Form PATH Version 2.03; Revised 6/8/17

Developed for County of San Diego Behavioral Health Services