




Division of Prevention and Behavioral Health Services
 Department of Services for Children Youth and Their Families
 State of Delaware

PBHS-CS101		DPBHS Service Eligibility Policy	
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PURPOSE:

To define eligibility criteria for services provided by the Division of Prevention and Behavioral Health Services ("DPBHS"), State of Delaware.

DEFINITIONS:

Applicable definitions are given in the appendix to DPBHS policy "Development and Revision of Policies."

POLICY:

Consistent with statutory authority (16 Del. C. chapter 90), agreement with the State Medicaid Office under the Medicaid waiver, DPBHS hereby establishes eligibility criteria for mental health and substance abuse services for children and youth who are served by DPBHS. Eligibility for service is established when criteria 1., 2., 3., and 4. below are all met or when criteria 5. is met.

1. A. Age: Up to Age 18 - Children and youth are eligible for services until their 18th birthday.
 B. Over Age 18:-For those youth active with DFS or DYRS and over the age of a18 and less than 19 years of age, DPBHS may provide consultation, monitoring and / or other services.
2. Residence: Delaware residents are eligible for services.
3. Service Eligibility: Service Eligibility is established by clinical review by a licensed behavioral health professional.
4. Categorical Eligibility:
 - A. Insurance and Medicaid Benefits: DPBHS services are intended as a primary resource for those who have
 - 1) Medicaid benefits, and who require more than the basic Medicaid 30-hour annual outpatient benefit; or
 - 2) Uninsured, or
 - 3) Exhausted all applicable private insurance behavioral health or substance abuse benefits, and
 - 4) The absence of a specific level of care or specific provider in a private mental health insurance package is not sufficient grounds for categorical eligibility.
 - B. Co-Insurance: DPBHS does not function as a secondary payor for the purpose of funding insurance co-payment or deductibles when the youth has private insurance only. If a youth has both private insurance and Medicaid, the private insurer is the primary payor and Medicaid is the secondary payor.

- C. For clients meeting eligibility requirements for DPBHS services, and who also qualify for services from other state agencies, divisions within state agencies, school districts, physical/medical health care services, and/or other services, DPBHS will provide clinically necessary behavioral health and substance abuse services in collaboration with other involved agencies.
- 5. Behavioral Health Crises – Crisis services may be provided to children and youth meeting criteria A. or B. below.
 - A. DPBHS mobile response and stabilization services and short-term emergency hospitalizations may be provided to non-resident of the State of Delaware who is under the age of 18 years of age, who are in the State of Delaware and are at imminent danger to self or others arising from a behavioral health disorder. DPBHS reserves the right to seek reimbursement for services provided to non-Delaware residents.
 - B. The DPBHS mobile response and stabilization services also may be utilized by privately insured persons if they meet criteria 1., 2., and 3. above for initial crisis response (excluding crisis bed) intervention, but subsequent treatment is the responsibility of the private insurance carrier unless the youth otherwise meets eligibility criteria and is admitted to DPBHS services.
 - 6. Prevention & Early Intervention Services – clients must meet the requirements as defined by the individual programs.