

IBHS Clinical Measurement Tool

County:	
Provider:	
Date of Review	
Magellan Reviewer:	

	Item	Description	Present	Partial	Not Present	Not Applicable
1	Written Order	Specifies the IBHS service, hours and setting				
2	Written Order	Contains clinical information to support the medical necessity of the service ordered				
3	Written Order	Contains valid behavioral health disorder diagnosis				
3	Assessment	(For initial assessments only): Individual assessments were completed in 15 days and ABA assessments completed in 30 days				
4	Assessment	Includes treatment and medical history				
5	Assessment	Includes developmental and social history				
6	Assessment	Includes family structure and history				
7	Assessment	Includes educational history				
8	Assessment	Includes trauma history				
9	Assessment	Includes cultural, language or communication needs				
10	Assessment	Direct Observation in all relevant settings				
11	Assessment	Includes assessment and plan to address SDOH, Barriers, etc.				
12	Assessment	Data Analysis, Graphs as applicable, Baseline and current level, frequency/intensity/duration				
13	Assessment	Structured Tool used and included				
14	Assessment	For concurrents only: include summary of progress, barriers for progress, and changes to address lack of progress				
16	Assessment	Specifies the IBHS service, hours and setting				
17	Assessment	Includes summary of findings and clinical rationale for specific recommendations				
19	Individual Treatment Plan	Is strengths based				
20	Individual Treatment Plan	Includes service type, settings, hours				
21	Individual Treatment Plan	Includes timeframes for ITP				
22	Individual Treatment Plan	Behaviors are clearly defined and observable				
23	Individual Treatment Plan	Includes how caregiver(s) will be involved in treatment				
24	Individual Treatment Plan	Includes specific goals, objectives, and interventions to address therapeutic needs				
25	Individual Treatment Plan	Treatment plan clearly notes barriers and what is being done to address them				
26	Individual Treatment Plan	Functions of behaviors are consistent with treatment plan interventions				
27	Individual Treatment Plan	A description of progress or lack of progress towards goals/objectives				
28	Individual Treatment Plan	Replacement behaviors defined operationally				
29	Individual Treatment Plan	Is caregiver/user friendly in content and format				
30	Individual Treatment Plan	Discharge plan is developmentally appropriate and clinically reasonable				

31	Individual Treatment Plan	Aftercare plan includes estimated discharge date with specific community/natural supports/resources				
32	Individual Treatment Plan	Crisis plan includes member's triggers and specific interventions that can be implemented to avert a crisis				
33	Individual Treatment Plan	Signature and date by the youth, young adult or parent or legal guardian of a child/youth, staff person who completed ITP and someone who meets qualifications of a Clinical Director				
34	Individual Treatment Plan	For ABA only: Baseline measures reported using direct measures (FID); method of data collection for continued treatment reported using same measure and presented in easy to read graphic displays				
35	Individual Treatment Plan	For ABA only: Maintenance and Generalization is planned for as part of intervention in a manner that leads to least restrictive, least intrusive, independent functioning of member and caregivers				
36	Coordination of Care	Dx matches use of medication				
37	Coordination of Care	ISPT as applicable with all appropriate parties in attendance				
38	Coordination of Care	Documented collaboration with other service systems				
39	CANS	CANS score is consistent with information in packet				
40	IBHS Medical Necessity Guidelines (MNG)	Member has been in IBHS with current provider for 3+ years.				
41	IBHS Medical Necessity Guidelines (MNG)	Evidence that MNG is met for service type requested				
		TOTALS:	0	0	0	0