



## Behavioral Health Tier System

### Level I *Criteria*

A score of 92% or greater on cumulative chart reviews based on at least 3 chart reviews  
Submission of claims through APEX for **at least 6 months**

#### *Action*

No authorizations required

Annual chart review

### Level II *Criteria*

A score of 90% or greater on cumulative chart reviews based on at least 2 chart reviews

#### *Action*

Authorizations required for Case Management, TBOS, and Psychosocial Rehabilitation  
Biannual chart reviews

### Level III *Criteria*

A score of 85% or greater on cumulative chart reviews

#### *Action*

Authorizations required for every service

Chart review every three months until the next level of criteria is met

\* All hospitalizations require pre-authorization. Also, the hospitals may be subject to more frequent reviews as a requirement for utilization management.

\*\* Providers are required to follow FCA contract and credentialing guidelines. Failure to do so may result in the agency remaining at **and/or** reducing to a lower level on the tier system.