



CRISIS INTERVENTION H2011

Provider:		Member ID:	
Review Date:		Reviewer Name:	

1.	Does the documentation demonstrate that the member met medical necessity? (Note: If Question #1 scores 0, all remaining questions score 0.)	1	0		
2.	Does the documentation include: <ul style="list-style-type: none"> • Signature with appropriate credentials of the crisis worker • Start/Stop times for the crisis worker • Date of the crisis • Location of the service • Code and/or descriptor? (Note: if there is no signature with appropriate credentials, questions #2, 3, 4, 5, 6, 7, and 8 on this tool score 0)	3	1.5	0	
3.	Does the documentation include: <ul style="list-style-type: none"> • Signature with appropriate credentials of the physician/psychologist (extenders) within 72 hours of the conclusion of the crisis • Date of review by the physician/psychologist (extenders)? (Note: if there is no signature with appropriate credentials, questions #2, 3, 4, 5, 6, 7, and 8 on this tool score 0)	3	0		
4.	Are the services consistent with the service definition and/or best practice? (NOTE: If Question #4 scores 0, all remaining questions are scored 0.) Was the intervention: <ul style="list-style-type: none"> • unscheduled • face-to-face • intended to resolve a crisis related to acute psychological signs and symptoms? 	1	0		
5.	Does the documentation include the interventions used to de-escalate the crisis?	3	1.5	0	
6.	Does the documentation include the member’s individualized response to the interventions used to de-escalate the crisis?	3	1.5	0	
7.	Does the documentation provide a description of the severity of the member’s symptoms including affect/mood and disposition during the crisis episode?	3	1.5	0	

8.	Does the documentation include recommendations regarding appropriate follow up including whether to modify or maintain the service plan?	3	1.5	0	
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Total Score = ____ [Possible 20]