

*Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2010-11*

**Adult Mental Health  
Assessment Only (AMAO)**

<p><b>Client Eligibility Criteria</b></p>	<p>Adults, ages 18 and over, who:</p> <ul style="list-style-type: none"> <li>• are seeking or needing services for a current Mental Health problem or symptom, <b>AND</b></li> <li>• have completed a current LME Screening/Triage/Referral (STR) process, <b>AND</b></li> <li>• have received a current LME STR triage determination of "Urgent" or "Routine", <b>AND</b></li> <li>• have been referred by the LME STR to the provider for assessment, <b>AND</b></li> <li>• have been determined by the provider <u>not to be eligible for any other MH, DD, or SA Target Population, AND</u></li> <li>• have been determined by the provider <u>not to be eligible for Medicaid services.</u></li> </ul> <p>The purpose of the Assessment Only Target Population is to provide a mechanism to reimburse a provider for a single service or assessment event that has been provided to a consumer, but for whom the provider determines that the consumer does not meet eligibility requirements for any other Target Population or for Medicaid services. Pending record requirements in APSM 45-2 apply.</p>									
<p><b>ICD-9 Diagnosis Ranges</b></p>	<p>Any valid ICD-9 Code</p> <p align="center">~~~~~</p> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>									
<p><b>Concurrency Issues</b></p>	<p>An individual cannot be enrolled in AMAO and any other MH, DD, or SA Target Population category at the same time.</p> <p align="center">~~~~~</p> <p>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>									
<p><b>Service Array</b></p>	<p align="center">Refer to <i>IPRS Service Array</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>									
<p><b>Provider Restrictions</b></p>	<p><b>Billing Provider</b> – Area Program or LME</p> <p><b>Attending Provider</b> – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/ SA Provider</p>									
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Adult MH State UCR	536949 1290 220 00	(procedure code NOT YP851, YP852)								
<p><b>Utilization Management</b></p>	<p>Up to 1 periodic service event within a current episode of care, and up to 2 periodic service events within the fiscal year, after which prior approval is required or current eligibility enrollment in another Target Population category.</p>									

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**Adult Mental Health  
Community Enhancement Program (AMCEP)**

<b>Client Eligibility Criteria</b>	<p>A single, special recipient (State Enrolled 'John Doe' client) will be used to report these services to IPRS. Individual consumers are not to be enrolled in this target population.</p> <p><b>NOTES:</b> Client may be identified in CNDS as '(local facility code)AMH001'</p>																		
<b>ICD-9 Diagnosis Ranges</b>	<p>Any valid ICD-9 Code</p> <p align="center">~~~~~</p> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>																		
<b>Concurrency Issues</b>	<p>An individual cannot be enrolled in AMCEP.</p> <p align="center">~~~~~</p> <p>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>																		
<b>Service Array</b>	<p>This is intended to cover area program costs for C&amp;E and drop in center coverage by having a non-client staff hour population group with payment (with limits) based on AMH staff hours.</p> <p align="center">~~~~~</p> <p>Refer to <i>IPRS Service Array</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>																		
<b>Provider Restrictions</b>	<p><b>Billing Provider</b> – Area Program or LME</p> <p><b>Attending Provider</b> – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/SA Provider</p>																		
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<b>Utilization Management</b>	<p>Area Program specific audits may be implemented to limit the amount of State UCR funds accessible by the population group.</p>																		

**Adult Mental Health  
Crisis Services (AMCS)**

**Client  
Eligibility  
Criteria**

Adults, ages 18 and over, who:  
are seeking or needing services for a current Mental Health problem or symptom,

**AND**

who is not eligible for Medicaid,

**AND**

who have completed a current Screening/Triage/Referral Interview and have received an "Emergent" triage determination, as defined below\*, or are currently enrolled in an eligible Adult Mental Health Target Population and are in need of crisis or emergency services beyond the capacity of the designated First Responder provider,

**Note: An individual who is eligible for Medicaid is not eligible for the Crisis Services target population, nor is an individual who is eligible for both Medicaid and IPRS services. The Crisis Services target population is limited to only those individuals who either:**

- a) have no IPRS target population eligibility, or**
- b) have only IPRS target population eligibility, but not Medicaid eligibility.**

The purpose of the Crisis Services Target Population is to provide a mechanism to reimburse a provider for crisis or emergency services that have been provided to a non-Medicaid Adult Mental Health consumer. The consumer may or may not meet eligibility requirements for any other IPRS Target Population, but may not be eligible for Medicaid.

Eligibility for the Crisis Services target population requires LME admission of consumer into the CDW through completion of the Identifying Information (Record 10 or 30), Demographics (Record 11 or 31), and Substance Abuse (Drug of Choice) Details (Record 17 or 37).

The LME may establish the initial eligibility period in the Crisis Services (AMCS) population group for up to fourteen (14) days. After the initial eligibility period, the consumer must be reassessed and determined to continue to be in need of crisis and emergency services to be considered for another fourteen (14) day eligibility period.

*\* STR Definition of "Emergent": An individual's need shall be categorized as "Emergent" when the individual presents a moderate or severe risk related to safety or supervision, or is at moderate or severe risk of substance abuse withdrawal symptoms, or presents a mild, moderate, or severe risk of harm to self or others, or has severe incapacitation in one or more area(s) of physical, cognitive, or behavioral functioning related to mental health, developmental disabilities or substance abuse problems.*

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*Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2010-11*

**Adult Mental Health  
Crisis Only (AMCS)  
(continued)**

<b>ICD-9 Diagnosis Ranges</b>	Any Valid ICD-9 For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. ( <a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a> )
<b>Concurrency Issues</b>	An individual cannot be enrolled in AMCS and any other MH, DD, or SA Target Population category at the same time.  For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. ( <a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a> )
<b>Service Array</b>	Refer to <i>IPRS Service Array</i> on the IPRS website. ( <a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a> )
<b>Provider Restrictions</b>	<b>Billing Provider</b> – LME <b>Attending Provider</b> – Multi-Service or Multi-Service w/SA Provider or Enrolled MH Provider
<b>Funding Source(s)</b>	Adult MH State Crisis                      536949003 1290 220 00 ~~~~~ For full details, refer to <i>IPRS Budget Criteria</i> on the IPRS website. ( <a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a> )
<b>Utilization Management</b>	Each Local Management Entity is responsible for the development and implementation of crisis and emergency services delivery and authorization guidelines to ensure the prompt and efficient implementation of services to eligible “Crisis Services (CS)” consumers. This includes LME approved procedures for the authorization of 24 hour admissions to inpatient hospital, facility based crisis, and 24 hour detoxification programs. The Division recommends that the LME review and authorize Mobile Crisis services after the delivery of the initial 16 units (4 hours) of this service.  During regular hours of operation, the Division recommends immediate notification of the LME by the crisis or emergency services provider for all 24 hour emergency admissions. Written notification regarding such emergency admissions is recommended to be provided to the LME within 24 hours in all circumstances.

**Adult Mental Health  
Adult with Mental Illness (AMI)**

<b>Client Eligibility Criteria</b>	<p>Adult, ages 18 and over, who meets diagnostic criteria, and who as a result of a Mental Illness exhibits functioning which is so impaired as to interfere substantially with his/her capacity to remain in the community. In these persons their disability limits their functional capacities for activities of daily living such as interpersonal relations, homemaking, self-care, employment, and recreation.</p> <p>The revised target population of Adult with Mental Illness (AMI) consolidates the following former target populations for consumer eligibility to services within IPRS: Adult with Severe and Persistent Mental Illness (AMSPM), Adult with Serious Mental Illness (AMSMI), Deaf or Hard of Hearing (AMDEF), and Homeless (PATH) - (AMPAT).</p> <p>Level of functioning criteria includes:</p> <p>Any client who has or has ever had a GAF score of 50 or below</p> <p><b>OR</b></p> <p>Current client who never had a GAF assessment when admitted</p> <p><b>AND</b></p> <p>Who without continued treatment and supports would likely decompensate and again meet the level of functioning criteria (GAF score of 50 or below)</p> <p><b>OR</b></p> <p>Current client who when admitted met level of functioning criteria but as a result of effective treatment does not currently meet level of functioning criteria</p> <p><b>AND</b></p> <p>Who without continued treatment and supports would likely decompensate and again meet the level of functioning criteria (GAF score of 50 or below)</p> <p><b>OR</b></p> <p>New client who does not currently meet GAF criteria and no previous GAF score is available, and who has a history of:</p> <ul style="list-style-type: none"><li>• two or more psychiatric hospitalizations;</li></ul> <p><b>OR</b></p> <ul style="list-style-type: none"><li>• two or more arrests;</li></ul> <p><b>OR</b></p> <ul style="list-style-type: none"><li>• homelessness as defined by:<ol style="list-style-type: none"><li>(1) lacks a fixed, regular and adequate night-time residence</li></ol><p><b>OR</b></p><ol style="list-style-type: none"><li>(2) has a primary night-time residence that is:<ol style="list-style-type: none"><li>(a) temporary shelter</li></ol><p><b>or</b></p></li><li>(b) temporary residence for individuals who would otherwise be institutionalized</li></ol><p><b>or</b></p></li><li>(c) place not designed/used as a regular sleeping accommodations for human beings;</li></ul> <p><b>NOTE:</b> It should be noted that an individual can remain in the target population even though his/her level of functioning might improve beyond the initial GAF score of 50.</p>
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**Adult Mental Health  
Adult with Mental Illness (AMI)  
(continued)**

	<p>This population should include any clients who are currently homeless or who are at imminent risk of homelessness as defined by:</p> <p>(1) due to be evicted or discharged from a stay of 30 days or less from a treatment facility</p> <p><b>AND</b></p> <p>(2) lacking resources to obtain and/or maintain housing.</p> <p><b>NOTE:</b> There may need to be “John Doe” clients for outreach to people who refuse to give their names.</p> <p>This population should also include any clients who have been assessed as having special communication needs because of deafness or hearing loss and having a Mental Health diagnosis</p> <p>Eligibility Determination for this population group should be completed annually in conjunction with the Person Centered Plan process. or with significant change in functioning</p>
<p><b>ICD-9 Diagnosis Ranges</b></p>	<p>2900-29021      30000-3029      99580-99589</p> <p>29040-2909      3070-3101</p> <p>2930-2931      311-31223</p> <p>29382-2979      31232-3129</p> <p>2988-2989      7999</p>
	<p align="center">~~~~~</p> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>
<p><b>Concurrency Issues</b></p>	<p>An individual cannot be enrolled in AMI and any other MH, DD, or SA Target Population category at the same time.</p> <p align="center">~~~~~</p> <p>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>
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*Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2010-11*

**Adult Mental Health  
Adult with Mental Illness (AMI)  
(continued)**

<b>Funding Source(s)</b>	Adult MH State Crisis	536996003 1590 220 00	(procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820)
	Long Term Vocational Support	536949001 1290 220 00	(procedure code = YM645)
	Long Term Vocational Support	536949001 1390 221 00	(procedure code = YM645)
	Adult MH MHBG	536949 1291 250 6W	(procedure code NOT YP820, YP851, YP852)
	Adult MH SSBG	536949 1291 250 Q7	(procedure code NOT YP851, YP852)
	Adult MH State UCR	536949 1290 220 00	(procedure code NOT YP851, YP852)
	<p>Only the area programs having Fed PATH funds can get paid from that funding source. These are Wake, Southeastern, Durham, CenterPoint, Mecklenburg, Blue Ridge, Crossroads, Piedmont, &amp; Cumberland for adults. Other area programs can get paid from MHBG or State money. or PATH funding we need to be able to document that \$1 of other state/local funds are spent for each \$3 of PATH funding.</p> <p><b>NOTE:</b> The small reserve in AMH for interpreter services will continue to be handled on an invoice basis outside the IPRS system at this time</p> <p align="center">~~~~~</p> <p align="center">For full details, refer to <i>IPRS Budget Criteria</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>		
<b>Utilization Management</b>			

**Adult Mental Health  
Stable Recovery Population (AMSRE)**

<p><b>Client Eligibility Criteria</b></p>	<p>Adults, ages 18 and over, who:</p> <ul style="list-style-type: none"> <li>• Are currently enrolled in AMI target population or eligible for enrollment in AMI target population, and who are stable and moving toward their personal recovery within the community AND</li> <li>• Evidence of stability and recovery includes <u>all</u> of the following:             <ul style="list-style-type: none"> <li>○ Illness has been managed successfully in the community with no need for crisis services or hospitalization within the past six months related to mental illness, substance abuse or developmental disabilities AND</li> <li>○ Has a safe, stable place to live in the community and has not been homeless or evicted or forced to move within the past six months AND</li> <li>○ Has not been engaged in activities that resulted in arrest by law enforcement within the past six months AND</li> <li>○ Participates in meaningful activities or employment of his/her own choosing in the community AND</li> <li>○ Has family or friends with whom he/she has a positive, ongoing relationship AND</li> <li>○ Has an understanding of how to access health care to address physical health issues, if any, AND</li> <li>○ Continues to need medication and/or occasional counseling or support related to his/her mental illness diagnosis.</li> </ul> </li> </ul> <p><b>Continued Stay Criteria</b></p> <ul style="list-style-type: none"> <li>• If functioning is beginning to deteriorate, adults in this AMSRE target population may be moved back into AMI.</li> <li>• If there is a need for crisis services or hospitalization, if the person is homeless or evicted, if the person is arrested by law enforcement, or if the person needs for services to maintain meaningful activities or employment or services to address relationships or health issues, adults in this AMSRE target population are to be moved back into the AMI target population.</li> </ul> <p>Eligibility Determination for this population group should be completed annually in conjunction with the Treatment Plan process.</p>																									
<p><b>ICD-9 Diagnosis Ranges</b></p>	<table border="0"> <tr> <td>2900-2909</td> <td>297-29799</td> <td>3003</td> <td>3071</td> <td>31234</td> </tr> <tr> <td>29383</td> <td>2989</td> <td>30120</td> <td>30751</td> <td></td> </tr> <tr> <td>29411</td> <td>30001</td> <td>30183</td> <td>30981</td> <td></td> </tr> <tr> <td>295-29599</td> <td>30014</td> <td>3022</td> <td>31230</td> <td></td> </tr> <tr> <td>296-29699</td> <td>30021</td> <td>3024</td> <td>31233</td> <td></td> </tr> </table> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>	2900-2909	297-29799	3003	3071	31234	29383	2989	30120	30751		29411	30001	30183	30981		295-29599	30014	3022	31230		296-29699	30021	3024	31233	
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<p><b>Concurrency Issues</b></p>	<p>An individual cannot be enrolled in AMSRE and any other MH, DD, or SA Target Population category at the same time.</p> <p>~~~~~</p> <p>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>																									

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**Adult Mental Health  
Stable Recovery Population - (AMSRE)  
(continued)**

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<b>Utilization Management</b>	Individualized service plan with annual review. Plan may be revised during the year, with authorization, if service needs change.															

**Adult Mental Health  
Veteran and Family (AMVET)**

<p><b>Client Eligibility Criteria</b></p>	<p>Designated AMH Veteran* (Military Service Member), age 18 and over, who has served in Operation Enduring Freedom (OEF)<sup>1</sup> or Operation Iraqi Freedom (OIF)<sup>2</sup>, as defined below, or an Adult Family Member**, age 18 and over, of a designated AMH or CMH Veteran who has served in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF), and who:</p> <ul style="list-style-type: none"> <li>• has a Division covered diagnosis of an ICD-9 Mental Disorder as evidenced by a principal or primary mental health diagnosis as listed below; <b>OR</b></li> <li>• has a Division covered V Code of an ICD-9 Supplementary Classification of Factors Influencing Health Status and Contact with Health Services (V-Code) as listed below;</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>• has completed a current Screening/Triage/Referral (STR) process, and, as appropriate, provided the individual with information about federal, state, and local resources available to Military Services Members and their families; <b>AND</b></li> <li>• has received a current STR triage determination of "Urgent" or "Routine" (A consumer screened with a STR triage determination of "Emergent" should be immediately placed in an appropriate Adult Crisis Target Population and provided such services until such time as they can be properly linked with a provider offering urgent or routine care services); <b>AND</b></li> <li>• has been referred by STR to a provider for assessment; <b>AND</b></li> <li>• has been determined by the provider <u>not to be eligible for any other adult MH, DD, or SA Target Population</u> (A developmental disabilities consumer or a substance abuse consumer should be immediately placed in an appropriate adult DD or SA Target Population. An adult mental health consumer meeting the AMI or AMSRE target population should be placed in one of these target populations); <b>AND</b></li> <li>• has been determined by the provider <u>not to be eligible for Medicaid or Health Choice Program benefits</u>; <b>AND</b></li> <li>• has been determined by the provider not to be eligible for presenting diagnosis(es) for medically necessary service(s) under any program directly or indirectly provided or sponsored by the Department of Veterans Affairs, the CHAMPVA Program, the Department of Defense TRICARE/CHAMPUS Program, or any other public or private health insurance program. An individual's lack of eligibility for presenting diagnosis(es) for medically necessary service(s) includes a denial or lack of eligibility due to Military Service Member or Family Member diagnostic status, type of service(s) needed, exhausted or inadequate services coverage for medically necessary MH, DD, SA services, including TBI-related services, or a delay of 14 days or more in confirming eligibility for such coverage through other resources.</li> </ul> <p>An eligible diagnosis of an ICD-9 Mental Disorder or an eligible V Code of a ICD-9 Supplementary Classification may be accompanied by a Traumatic Brain Injury (TBI) or intracranial injury and accompanying medical necessity for MH/DD/SA services to address TBI-related psychiatric disorders, emotional problems, behavioral symptoms, and changes in mood or personality. These include such conditions as emotional instability, depression, anxiety, hypomania, mania, apathy, irritability, anger, obsessive compulsive disorder, bipolar disorder, phobias, panic disorder, disinhibition, inability to control anger, impulsiveness, lack of initiative, inappropriate sexual activity, aggression, and trouble with memory, concentration, attention, language, thinking, and learning.</p> <p><b>*Designated AMH Veteran (Military Service Member)</b> is defined as a Military Service Member, age 18 or over, who has served in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF), and includes the following:</p> <ul style="list-style-type: none"> <li>• Active Duty Service Member (Discharged)</li> <li>• National Guard or Reserve Member (Activated)</li> <li>• National Guard or Reserve Member (Not Activated)</li> <li>• National Guard or Reserve Member (Discharged)</li> <li>• Active Duty Service Member (Deceased) (Deceased Military Service Member has been defined only for eligibility purposes for family members designated below to be assured access to services)</li> <li>• Activated, Not Activated, or Discharged National Guard or Reserve Member (Deceased) (Deceased Military Service Member has been defined only for eligibility purposes for family members designated below to be assured access to services)</li> </ul>
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*Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2010-11*

**Adult Mental Health  
Veteran and Family (AMVET)  
(continued)**

	<p><b>** Adult Family Member of a Designated AMH or CMH Veteran</b> is defined as a family member, age 18 or over, of a living or deceased designated AMH or CMH Veteran who has served in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF), and includes the following:</p> <ul style="list-style-type: none"> <li>• Spouse or Domestic Household Partner (age 18 or over)</li> <li>• Unremarried Former Spouse or Unremarried Widow or Widower (age 18 or over)</li> <li>• Dependent Adult Child, including SSI-Related Disabled Adult Child (age 18 or over)</li> <li>• Dependent Parent or Guardian (age 18 or over)</li> <li>• Family Member currently providing Dependent Care for Designated Veteran (age 18 or over)</li> </ul> <p><b>Noncovered Undesignated AMH Veterans and Adult Family Members</b> It is anticipated that noncovered undesignated adult Veterans (ages 18 and over), and adult Family Members (ages 18 and over) of a living or deceased undesignated Veteran, will maintain continuing federal benefits eligibility and will not require services eligibility through IPRS for the following individuals:</p> <ul style="list-style-type: none"> <li>• Active Duty Service Member and Dependent Family Members</li> <li>• Retired Service Member and Dependent Family Members</li> <li>• Retired National Guard or Reserve Member and Dependent Family Members</li> <li>• Member of Armed Forces Service Academy and Dependent Family Members</li> </ul> <p><sup>1</sup><b>Operation Enduring Freedom (OEF):</b> Operation Enduring Freedom (OEF) is the official name used by the U.S. Government for its contribution to the <a href="#">War in Afghanistan</a>, together with three smaller military actions, under the umbrella of its <a href="#">Global War on Terrorism</a> (GWOT). The Operation comprises several subordinate operations: <a href="#">Operation Enduring Freedom - Afghanistan</a> (OEF-A), <a href="#">Operation Enduring Freedom - Philippines</a> (OEF-P) (formerly Operation Freedom Eagle), <a href="#">Operation Enduring Freedom - Horn of Africa</a> (OEF-HOA), <a href="#">Operation Enduring Freedom - Trans Sahara</a> (OEF-TS) <a href="#">Operation Enduring Freedom - Kyrgyzstan</a> (completed in 2004), and <a href="#">Operation Enduring Freedom - Pankisi Gorge</a> (completed in 2004). Reference sourced 12-31-08 at: <a href="http://en.wikipedia.org">http://en.wikipedia.org</a></p> <p><sup>2</sup><b>Operation Iraqi Freedom (OIF):</b> Operation Iraqi Freedom (OIF) is the official name used by the U.S. Government for the military invasion of Iraq on March 20, 2003 and the deployment of American troops in Iraq to the present day. Reference sourced 12-31-08 at: <a href="http://en.wikipedia.org">http://en.wikipedia.org</a></p>												
<p><b>ICD-9 Diagnosis Ranges</b></p>	<table border="0"> <tr> <td>2900-2949</td> <td>3060-316</td> <td>V6101-V619</td> <td>V673</td> </tr> <tr> <td>29500-29991</td> <td>V400-V409</td> <td>V620-V629</td> <td>V690-V699</td> </tr> <tr> <td>30000-3029</td> <td>V600-602</td> <td>V650-V659</td> <td></td> </tr> </table> <p>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> +on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>	2900-2949	3060-316	V6101-V619	V673	29500-29991	V400-V409	V620-V629	V690-V699	30000-3029	V600-602	V650-V659	
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30000-3029	V600-602	V650-V659											
<p><b>Concurrency Issues</b></p>	<p>An individual cannot be enrolled in AMVET and any other MH, DD, or SA Target Population category at the same time.</p> <p>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (<a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>)</p>												

**Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2010-11**

**Adult Mental Health  
Veteran and Family (AMVET)  
(continued)**

<b>Service Array</b>	Refer to <i>IPRS Service Array</i> on the IPRS website. <a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a>												
<b>Provider Restrictions</b>	<b>Billing Provider</b> – Area Program or LME  <b>Attending Provider</b> – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/ SA Provider												
<b>Funding Source(s)</b>	<table border="0"> <tr> <td>Cross Disability State Crisis</td> <td>536996003 1590 220 00</td> <td>(procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820)</td> </tr> <tr> <td>Adult MH MHBG</td> <td>536949 1291 250 6W</td> <td>(procedure code NOT YP820, YP851, YP852)</td> </tr> <tr> <td>Adult MH SSBG</td> <td>536949 1291 250 Q7</td> <td>(procedure code NOT YP851, YP852)</td> </tr> <tr> <td>Adult MH State UCR</td> <td>536949 1290 220 00</td> <td>(procedure code NOT YP851, YP852)</td> </tr> </table> <p align="center">~~~~~</p> <p align="center">For full details, refer to <i>IPRS Budget Criteria</i> on the IPRS website. <a href="http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm">http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm</a></p>	Cross Disability State Crisis	536996003 1590 220 00	(procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820)	Adult MH MHBG	536949 1291 250 6W	(procedure code NOT YP820, YP851, YP852)	Adult MH SSBG	536949 1291 250 Q7	(procedure code NOT YP851, YP852)	Adult MH State UCR	536949 1290 220 00	(procedure code NOT YP851, YP852)
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<b>Utilization Management</b>	Individualized service plan with annual review. Plan may be revised during the year, with authorization, if service needs change.												