

Guidelines for Access to CSB Services

The Fairfax-Falls Church Community Services Board (CSB) is the public agency that provides services for people in our community who have mental illness, substance use disorders, and/or developmental disabilities. Anyone needing assistance in these areas may contact the CSB for help in finding appropriate treatment and resources. Our goal is for these services to be accessible when and where they are needed for individuals and families to live self-determined and healthy lives.

Services to the Whole Community

The following CSB services are provided to the general public:

- [Wellness, health promotion, and prevention programs](#)
- [Crisis and emergency services](#)
- [Telephone consultation and walk-in screening](#) to find appropriate treatment (**703-383-8500**)

Services for Mental Illness, Substance Use Disorders, and/or Developmental Disabilities

These CSB services are designed for people whose conditions seriously impact their ability to manage the daily activities of life. **To be eligible for these CSB services, an assessment will need to be performed by a CSB clinician.**

What to Expect at Your First Visit

Your visit to the CSB will be much like a first visit to the doctor's office. You will meet with a clinician who will ask questions to help determine your needs and how the CSB may help. You will meet with a business staff person that will ask questions about the following information:

- Proof of Fairfax County or Fairfax/Falls Church City residency
- Health insurance including Medicaid and Medicare
- Name, and telephone number of your current primary care physician and/or therapist
- Sources and amount of income

A. Individuals with Mental Illness

Mental illness involves changes in thinking, mood, and/or behavior. These disorders can affect how we relate to others and make choices. Mental illness takes many different forms, with some leading to deep levels of anxiety, extreme changes in mood, or reduced ability to focus, disturbances in thinking, or unusual behavior. To read more about mental health disorders, visit: <https://www.samhsa.gov/disorders>.

1. **Adults:** Adults with *serious mental illness*. Examples include schizophrenia, major depression and significant anxiety disorders, bipolar disorders, and borderline personality disorder.

- 2. Children and Adolescents:** Children and adolescents with behavioral health problems that significantly impact their mood, thinking, and/or behavior. The problems are often significantly disabling as compared to the functioning of most youth their age. The problems may be of recent onset or they have been going on for some time.

B. Individuals with Substance Use Disorders

Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home. To read more about substance use disorders, visit: <https://www.samhsa.gov/disorders/substance-use>.

Note: Special priority is afforded to pregnant women who are using substances and any individual who uses drugs by intravenous (IV) injection, or who uses opioids, including prescription pain medications.

C. Individuals with Developmental Disabilities or Delays

- 1. Adults and Children:** Individuals who have mental or physical impairment, or a combination of mental and physical impairments, such as autism and intellectual disability, other than a sole diagnosis of mental illness. **To be eligible for these CSB services, an assessment will need to be performed by a CSB clinician.** Individuals must meet the diagnostic criteria for a Developmental Disabilities Medicaid Waiver to be eligible for CSB Developmental Disabilities Services. Eligibility screenings can be scheduled by calling **703-324-4400**. All Developmental Disability Medicaid Waivers must be accessed through the CSB Developmental Disabilities Services. It is not necessary for the individual to have a social security number to qualify for CSB Developmental Disability Services.
- 2. Infants and Toddlers:** Infants and toddlers (ages 0 – 3 years) with developmental delays may also be eligible to receive specialized services through the CSB's [Infant & Toddler Connection](#). **To be eligible, an assessment will need to be performed by a CSB clinician.** Eligibility screenings can be scheduled by calling **703-246-7121**.

Guidelines for Allocating CSB Resources

The CSB provides essential services for individuals in our community who are affected by developmental delay, developmental disability, serious emotional disturbance, mental illness and/or substance use disorders. The CSB is committed to individuals and their families receiving services and supports when and where needed, but demand can exceed available resources.

These priority access guidelines are established to provide a process for determining who has priority to receive CSB services. For persons who do not have priority for services, the CSB Entry and Referral Services staff will help with identifying resources, linking with potential non-CSB sources of services, and following up with referrals.

The guidelines take into consideration individuals whose needs can only be addressed through a public system such as the CSB, which provides and coordinates multiple levels and types of services to help individuals gain a level of independence and self-determination.

Services will be provided in the following Rank Order of Priority Access:

1. Individuals currently enrolled in services will continue to receive them for as long as the services are still clinically necessary.
2. Pregnant women and any individual who uses drugs by intravenous (IV) injection, or who uses opioids, including prescription pain medications.
3. Individuals who meet the criteria for services and who have serious needs that cannot be met elsewhere or who do not have alternative resources such as service access, financial, insurance, or family supports.
4. Individuals who have insurance for services they are assessed to need may be asked to seek community treatment based upon an individualized assessment by the CSB clinician.

A note on Priority Access and Insurance: The CSB accepts most major insurance carriers. However, individuals and families who have no insurance or fewer insurance options may be prioritized when compared with insured individuals presenting with similar needs. Individuals who have insurance may be asked to seek community treatment based upon an individualized assessment by the CSB clinician. The CSB Entry and Referral Services staff will assist in identifying resources, linking with potential non-CSB sources of services, and following up with referrals. If an individual has insurance they are not barred from receiving services at the CSB.

Process for Appealing Treatment Decisions

Individuals who request CSB services and are declined may ask for reconsideration. The decision will be reviewed using the criteria for individualized services and the above priority access guidelines. Individuals can appeal CSB treatment decisions in the following situations:

- Individuals contacted the CSB to request services but were referred to another service provider based on the CSB's Priority Access and did not receive a CSB appointment.
- Individuals were referred to a different level of care of either increased or decreased intensity.
- Individuals' services are being transitioned out of the CSB because they have completed their treatment goals and objectives and are considered to no longer require a CSB service.

If you have questions or concerns about treatment decisions described above, please try to solve the problem with your service provider or the program supervisor.

If you are unable to resolve a problem with your service staff, you can begin a formal appeal process by calling the CSB's Appeals Line at **703-383-8466** and leaving a voice mail message. Please provide your name and phone number and indicate that you wish to appeal a treatment decision.

A reviewer will call you back. The reviewer will speak with you, your family or friends (if appropriate), and the treatment team where your services were delivered. They will also review your records in our electronic health record. The review will be completed within 10 business days, and you will be informed in writing regarding the outcome of the appeal.