



EASA Center for Excellence (CfE) Guidance to Statewide Network on Eligibility Criteria for Acceptance

December 28, 2023

After revisiting the temporary guidance that was sent out in July 2022, the EASA Center for Excellence, at the request of Oregon Health Authority, is making this guidance permanent.

1. EASA eligibility criteria and reciprocity expectations, per the Center for Excellence:

a. Eligibility

- i. FEP. Individuals meeting criteria for first episode psychosis consistent with schizophrenia spectrum disorder or bipolar disorder with psychosis must be **prioritized** and brought in to the program immediately.
- ii. Individuals with a score of 5 on at least one P-scale on the SIPS (FEP being the equivalent of level 6) should be prioritized at the same level as FEP.
- iii. CHRp- Individuals with a score of 4 on at least one P-scale on the SIPS, meet the criteria for CHRp, and are not in stable, appropriate long-term mental health services are the next level of prioritization.
- iv. CHRp- Individuals with at least one score of 3 of at least one P-scale on the SIPS that meet the criteria for CHRp may be accepted into local EASA programs if there is capacity. However, short-term education and support for the individual and their family/supports and connection to ongoing mental health services is generally appropriate for this population.

b. Cross-site reciprocity

If an individual brought in to EASA with FEP or CHRp level 5 criteria moves to another county within 18 months from the date of intake into EASA, they are automatically accepted without additional screening in the new EASA. Both EASA programs should work closely to facilitate continuity of care. If they were brought in at a level 4 or below and have not progressed to a higher level of symptomology the originating EASA program and receiving EASA program may determine the most appropriate plan for transition, involving the youth and family.

2. Additional pre-existing criteria have not changed. Exceptions can be made for age and length of pre-existing conditions, and not diagnosis.

- a. Reside in appropriate geographic area.
- b. Be within minimum age range of 15-25; can go as low as 12 or as high as 30 based on appropriateness and need.
- c. Clinical High Risk: Meets criteria for one of the three progressive Psychosis Risk. Syndromes based on SIPS assessment by trained and certified SIPS interviewer.
- d. First episode psychosis: Symptoms have not been present for longer than 12 months at a diagnosable level for schizophrenia spectrum disorder or bipolar disorder with psychotic features
- e. Psychotic symptoms are not known to be caused by something other than schizophrenia spectrum disorder or bipolar disorder with psychotic symptoms (i.e. substance use, trauma, major depression or another medical condition).