



State of Vermont
Department of Mental Health
Office of the Commissioner
108 Cherry Street, PO Box 70
Burlington, VT 05402-0070
www.mentalhealth.vermont.gov

Agency of Human Services

[phone] 802-652-2002
[fax] 802-652-2036
[tty] 800-253-0191

MEMORANDUM

TO: Designated Agency Medical Directors
Designated Hospital Medical Directors
Community Rehabilitation & Treatment (CRT) Directors
Designated Agency Executive Directors
Designated Agency Children, Youth & Family Directors

FROM: Michael Hartman 

DATE: October 16, 2009

RE: CRT Eligibility for Schizophrenia

It has become increasingly clear in the research literature that people suffering from Schizophrenia have better outcomes, with less disability, if appropriate treatments –medications and psychosocial supports - are provided early in the course of the illness. In Vermont, the Designated Agencies' CRT program offers the most supports and infrastructure to provide these services.

Currently, a fairly severe level of disability is one of the qualifying criterion for eligibility for these services, unless provisionally enrolled into the program. In light of the evidence of improved outcomes for people served soon after their first psychotic episode, Vermont's Department of Mental Health is no longer requiring evidence of disability for CRT eligibility for individuals diagnosed with schizophrenia. However, DMH is encouraging use of the provisional status for CRT services for these individuals and active pursuit of diagnostic clarity and evaluation of ongoing program service needs in the ensuing six months following enrollment. For example, a firm diagnosis of schizophrenia is not necessary; verification of diagnosis and service-need can occur during the period of provisional eligibility. This action will circumvent the need to fulfill the disability criteria for CRT eligibility prior to receiving services.

Dr. McMains has spoken with the Community Psychiatrists group and the CRT Directors. Both groups have cautioned about assigning a diagnosis of schizophrenia prematurely so that individuals don't become labeled with a serious mental illness and not actually have that mental illness. These groups have suggested the use of the provisional category enrollment for individuals with suspected Schizophrenia. I believe this to be a sensible approach. Therefore I am recommending to the CRT Program Directors to

provisionally enroll individuals with schizophrenia into the CRT Program and exclude the disability criteria for individuals experiencing a first psychotic episode. The provisional enrollment allows that person to be enrolled and served by the program on a provisional status for six months while allowing additional time to verify the diagnosis and need for services.

Questions or inquiries regarding this memo can be directly to Trish Singer, Director of Adult Mental Health.

MH/psp