

HCA publishes the Apple Health Community Informed DC:0-5™ Crosswalk

The Health Care Authority is pleased to announce that the Apple Health Community-Informed DC:0-5[™] Crosswalk is now is available for view or download on the Mental Health Assessment for Young Children provider webpage under *Using the DC:0-5*. The DC:0-5[™] Crosswalk is a result of the Infant-Early Childhood Mental Health (IECMH) work group's dedication, passion, and commitment to infant-early childhood heath.

"The IECMH work group has created a tool to connect DC:0-5™ diagnoses to ICD-10 diagnoses that will enhance professional's ability to diagnose and treat mental health challenges in the earliest years by identifying and describing disorders not addressed in other classification systems by pointing the way to effective intervention approaches," said Dr. Keri Waterland, HCA Division Director of Behavioral Health and Recovery.

What is the DC:0-5™ crosswalk?

The Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:05™) is the internationally accepted system for developmentally appropriate assessment of young children's mental health, and 2022 guidance from the Centers for Medicare and Medicaid (CMS) recommends its use for all state Medicaid/CHIP programs. Following legislation passed in 2021, the DC:0-5™ is now considered a best practice in Washington state for Apple Health (Medicaid) mental health professionals conducting mental health assessments for young children (MHAYC). However, providers can struggle to connect DC:0-5™ diagnoses to ICD-10 diagnoses, which are required for Medicaid claims, or DSM-5 diagnoses, which may be built into some electronic health records (EHRs). To address this challenge, providers refer to a tool called a "DC:0-5™ crosswalk," which connects DC:0-5™ diagnoses to associated ICD-10 diagnostic codes and DSM-5 diagnoses. In January 2022, Washington joined the ranks of several other states in creating an initial version of a statewide DC:0-5™ crosswalk for Apple Health (Medicaid) mental health professionals.

"The crosswalk is, in practical terms, a billing tool. However, making sure there is adequate care for the youngest and most vulnerable in our stated was always in the mind of work group members," said work group member Amanda Russell, clinical supervisor at Children's Home Society of Washington in Spokane County.

Who helped create the DC:0-5™ crosswalk?

Advocates for this work have highlighted the importance of community engagement for successful implementation of new infant-early childhood mental health (IECMH) policies and practices. Over the course of the last nine months, HCA convened a work group of members of the IECMH community to provide review and update the initial crosswalk. The work group included participants from across Washington, rural and urban areas, private practice and community behavioral health agencies, different disciplines of mental health, and a variety of racial/ethnic backgrounds. The work group met



once a month to review diagnoses and come to consensus decisions on how to reflect developmentally appropriate clinical best practices. The work group also sought external consultation from allied professionals who specialized in areas such as autism spectrum disorders, sensory disorders, sleep disorders, and eating disorders.

"I learned a lot from the opportunities to hear others' voices, to lean into tough debates, and to bring the clinical voices from my agency's IECMH team. Always holding in mind the tough balance of benefits versus harm of any diagnostic labels, it was helpful to be reminded of the scope of this work group along the way, and sit with the immense weight of the responsibility of this workgroup," said work group participant Haruko Watanabe, infant-early childhood mental health program manager at Navos Mental Health and Wellness Center in King County.

What's next?

"My hope is that the impact will be on agencies like mine, where folks might not be familiar with diagnosing very young children, in that it will give us an accessible tool to increase supervisor and therapist confidence in working with a younger population. The potential effect of this is that so many more young children will be able to access mental health services -- which is of course a societal good that I'm so glad to have been a part of," said work group member Heather Denbrough, clinical supervisor at Children's Center in Clark County.

Going forward, HCA plans to review the crosswalk annually with the collaboration of the IECMH field, to ensure it continues to reflect clinical practice. If you would like to share feedback about the crosswalk, an embedded feedback form can be found within the Crosswalk document. If you have any questions or would like to know more, please contact Christine Cole or Kiki Fabian.