

7.13. Mobile Treatment Services – Adult

MOBILE TREATMENT SERVICES (MTS) (ADULT)

Principles for Medical Necessity Criteria

Mobile treatment services (MTS) are designed for adults with serious mental disorders who exemplify a lack of adherence to traditional services and vulnerability. MTS provides treatment in the least intensive setting that is able to meet the participant’s clinical needs. These services are provided by a multidisciplinary treatment team and are available to the participant on a 24/7 basis.

When participants have a mental disorder that requires professional evaluation and treatment, they should be treated in the least intensive setting able to meet their medical needs. Satisfaction of all admission and continued care criteria must be documented in the clinical record based upon the conditions and factors identified below before treatment will be authorized.

CRITERIA

<p>Admission Criteria</p>	<p>All of the following criteria are necessary for admission:</p> <ul style="list-style-type: none"> A. The participant has a PBHS specialty mental health DSM 5 diagnosis included in the priority population, which is the cause of significant psychological, personal care, and social impairment. B. The impairments result in at least one of the following: <ul style="list-style-type: none"> ▪ A clear, current threat to the participant’s ability to live in his/her customary setting, or the participant is homeless and would meet the criteria for a higher level of care if mobile treatment services were not provided; or is in a state institution or inpatient psychiatric facility and with the introduction of mobile treatment level of care would be able to return to living in his/her customary setting ▪ An emerging risk to self, property, or others, or the participant would experience heightened risk in these areas if mobile treatment services were not provided ▪ Inability to engage in, participate in, and benefit from traditional outpatient treatment. C. Inability to form a therapeutic relationship on an ongoing basis as evidenced by one or more of the following: <ul style="list-style-type: none"> ▪ Frequent use of emergency rooms/crisis services for psychiatric reasons ▪ A pattern of repeated psychiatric inpatient facility admissions or long-standing psychiatric hospitalizations or ▪ Arrest for reasons associated with the participant’s mental illness.
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<p>Severity of Need and Intensity of Service</p>	<p>The participant’s condition requires intensive, comprehensive, integrated assertive mental health treatment, somatic treatment, and psychiatric rehabilitative services provided by a multidisciplinary team providing a minimum of weekly face to face contact to develop and restore independent living skills to support a participant’s recovery.</p>
<p>Criteria for Continued Stay</p>	<p>One of the following criteria are necessary for continuing treatment at the level of care:</p> <p>A. The participant continues to meet the admission criteria despite documented efforts to engage and support the participant in treatment and rehabilitation, or there is an emergence of additional problems consistent with admission criteria.</p> <p>B. There is clinical evidence of symptom or functional improvement; however,</p> <ul style="list-style-type: none"> ▪ The participant continues to be at-risk for a higher level of care based on the participant’s response to attempts to reduce the frequency or intensity of services in a planned way <p style="text-align: center;">Or</p> <ul style="list-style-type: none"> ▪ There is documented evidence that the participant is at risk due to the tenuous nature of clinical or functional gains. <p>C. There is documented evidence that the participant has either:</p> <ul style="list-style-type: none"> ▪ Had limited or no progress toward goals and there are changes to the treatment plan and interventions <p style="text-align: center;">Or</p> <ul style="list-style-type: none"> ▪ Had progress toward goals and there are changes to the treatment plan to support the participant’s transition to traditional outpatient services (i.e. scheduling and assisting participant with appointments, assisting participant with using public transportation independently, supporting participant’s efforts to actively participate in treatment, etc.)
<p>Discharge Criteria</p>	<p>I or (II, III and IV) are necessary and sufficient for planned transition from MTS/ACT services:</p> <p>I. A period of transition (as evidenced by overlapping authorizations between MTS/ACT and a less intensive service) has demonstrated the consumer’s ability to engage, participate in, and benefit from less intensive services</p> <p style="text-align: center;">Or</p>

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| <p>II. There is little to no threat of hospitalization or incarceration as evidenced by both:</p> <ul style="list-style-type: none">▪ No significant psychological, personal care, or social impairment▪ No significant threat to self, property, or others <p>And</p> <p>III. There has been no emergency department utilization and no mental health crisis services (as evidenced by services provided by the MTS/ACT during evening or weekend hours) in the last six months.</p> <p>And</p> <p>IV. The consumer no longer requires an intensive, assertive, multidisciplinary treatment team to develop/restore specific independent living skills.</p> |
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