

7.16. Outpatient Services

OUTPATIENT SERVICES

Principles for Medical Necessity Criteria

Outpatient mental health services are less intensive than partial hospitalization and intensive outpatient treatment. Outpatient treatment is expected to be participant and family driven and recovery-oriented.

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

Admission Criteria	<p>Both 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 with at least mild symptomatic distress and/or impairment in functioning due to the psychiatric symptoms and an appropriate description of the symptoms consistent with the diagnosis. B. The participant’s behaviors or symptoms can be safely and effectively treated while living independently in the community.
Severity of Need and Intensity of Service	<p>Medical necessity for admission to outpatient mental health services must be documented by the presence of all of the criteria. Length and frequency of service varies based on the participant’s needs and medical necessity. Active involvement of the participant, family, caretakers, or significant others involved in the participant’s treatment should be sought.</p>
Criteria for Continued Stay	<p>All of the following criteria are necessary for continuing treatment at this level of care:</p> <ul style="list-style-type: none"> A. The participant continues to meet admission criteria despite treatment efforts, or there is emergence of additional problems consistent with the admission criteria. B. The target outcomes have not yet been reached. C. Progress in relation to specific symptoms/impairments/dysfunction is clearly evident and can be described in objective terms, but goals of treatment have not been achieved or adjustments in the treatment plan to address the lack of progress are evident and/or a second opinion on the treatment plan has been considered.