

Mental Health Partial Hospitalization

Last Updated: [10/19/2023]

Service Type:

0050 Outpatient Psych (Enhanced Behavioral Health Services)

Procedure Code:

H0035

Medical Necessity Criteria

Admission Criteria:

Members must meet all of the following criteria:

- The individual must exhibit symptoms consistent with a DSM diagnosis (using the most current version of the DSM) that is documented in the initial assessment that requires and can reasonably be expected to respond to treatment interventions;
- There is a clinical determination that in the last 14 days, the individual has manifested an acute and significant or profound impairment in daily functioning in the home, school, community or occupational setting that has led to negative consequences and difficulties maintaining supportive, sustained relationships with identified family and peers due to a psychiatric disorder;
- The individual is at risk for admission to inpatient hospitalization, residential treatment services or residential crisis stabilization as evidenced by acute intensification of symptoms, but has not exhibited evidence of immediate danger to self or others and does not require 24- hour treatment or medical supervision; or the individual is stepping down from inpatient hospitalization or residential crisis stabilization and is no longer exhibiting evidence of immediate danger to self or others and does not require 24-hour treatment or medical supervision;
- The individual has a community-based network of natural supports who are able to ensure individual's safety outside the treatment program hours and a safety plan has been established;
- The individual requires access to an intensive structured treatment program with an onsite multidisciplinary team, including psychiatric interventions for medication management;
- The individual can reliably attend, and actively participate in, all phases of the treatment program necessary to stabilize his/her condition;
- The severity of the presenting symptoms cannot be safely or adequately addressed in a less intensive level of care;
- The individual has demonstrated willingness to recover in the structure of an ambulatory treatment program; and

Mental Health Partial Hospitalization

Last Updated: [10/19/2023]

Service Type:

0050 Outpatient Psych (Enhanced Behavioral Health Services)

Procedure Code:

H0035

- If an individual is being admitted to MH-PHP primarily for an eating disorder, the following must also be met:
 - The individual exhibits symptoms consistent with an eating disorder diagnosis and requires at least two of the following: i. As a result of eating disorder behaviors, weight stabilization above 80% IBW (or BMI 15-17); or ii. Daily, or near daily supervision and structure that could not be attained in a less intensive setting, to interrupt compensatory weight management behavior, such as caloric restriction, intake refusal, vomiting/purging, excessive exercise, compulsive eating/binging; or iii. Individual misuse of pharmaceuticals with an intent to control weight (e.g., laxatives, diuretics, stimulants) and cannot be treated at a lower level of care.
 - Medical comorbidity or medical complications resulting from the eating disorder are absent or manageable and do not require 24-hour medical monitoring or procedures provided in a hospital level of care. c. If the above criteria are not met, service authorization requests and medical necessity will be assessed on an individualized basis to determine if the individual's treatment needs can be best met in this setting and can be delivered in a safe and effective manner.

Exclusion Criteria:

Individuals meeting any of the following are ineligible for MH-PHP:

- The individual's functional impairment is solely a result of a personality disorder or Developmental Disability and/or Intellectual Disability, as defined in the Code of Virginia § 37.2-100;
- The individual is at imminent risk to harming self or others, or sufficient impairment exists that a more intensive level of service is required;
- The individual's psychiatric disorder can be effectively treated or recovery process safely maintained at a less intensive level of care;
- The individual, their authorized representative, or their guardian does not voluntarily consent to admission or treatment, and/or refuses or is unable to participate in all aspects of treatment;
- The individual requires a level of structure and supervision beyond the scope of the program;
- The individual has medical conditions or impairments that needs immediate attention; and/or

Mental Health Partial Hospitalization

Last Updated: [10/19/2023]

Service Type:

0050 Outpatient Psych (Enhanced Behavioral Health Services)

Procedure Code:

H0035

- The individual's primary problem is social, custodial, economic (i.e. housing, family conflict, etc.), or one of physical health without a concurrent major psychiatric disorder meeting criteria for this level of care, or admission is being used as an alternative to incarceration.
- Presenting issues are primarily due to Substance Use Disorder; in this case the individual should be evaluated for Addiction and Recovery Treatment Services.

Continued Stay Criteria:

Members must meet all of the following:

- The individual continues to meet admission criteria;
- Another less intensive level of care would not be adequate to administer care;
- Treatment is still necessary to reduce symptoms and increase functioning so the individual may be treated in a less intensive level of care;
- The individualized treatment plan (ISP), updated every 30 calendar days or as clinically appropriate, contains evidence suggesting that the identified problems are likely to respond to current treatment plan (ISP);
- Documentation indicates that regular monitoring of symptoms and functioning reveals that the individual is making progress towards goals, or the treatment plan (ISP) is modified if the individual is not making substantial progress toward a set of clearly defined and measurable goals;
- A psychiatric medical evaluation documents that medication options have been considered or initiated;
- The individual's natural supports (e.g. individually identified family/guardian/caregiver) are participating in treatment as clinically indicated and appropriate, or engagement efforts are underway;
- Documentation demonstrates that coordination of care and vigorous, active discharge planning has been ongoing from the day of admission with the goal of transitioning individual to a less intensive level of care. These efforts should be documented to include communication with potential future service

Mental Health Partial Hospitalization

Last Updated: [10/19/2023]

Service Type:

0050 Outpatient Psych (Enhanced Behavioral Health Services)

Procedure Code:

H0035

providers, community partners, and related resources related to school, occupational or other community functioning; and

- If an individual is being admitted to MH-PHP for an eating disorder, then one of the following must also be met:
 - Individual has had no stabilization of weight since admission or there is continued instability in food intake; or
 - The eating disorder behaviors persist and continue to put the individual's medical status in jeopardy.

If the above criteria are not met, there are some circumstances under which authorization may be extended for up to 10 calendar days. These circumstances include any of the following:

- The individual has clearly defined treatment objectives that can reasonably be achieved through continued MH-PHP treatment, such treatment is necessary in order for the discharge plan to be successful, and there is no less intensive level of care available in which the objectives can be safely accomplished;
- Individuals can achieve certain treatment objectives in the current level of care and achievement of those objectives will enable the individual to be discharged directly to a less intensive community rather than to a more restrictive setting; and/or
- The individual is scheduled for discharge, but the community-based aftercare plan is missing critical components. The components have been vigorously pursued by the provider delivering the service but are not available (including but not limited to such resources as placement options, substance use treatment or mental health appointments, therapeutic mentoring, etc.).

Individuals may be authorized to participate in less than 20 hours a week as a transitional step down to lower-level services for one to two weeks prior to transitioning to promote recovery. Providers should seek approval for such a transition from the MCO or the FFS contractor and the provider shall document the rationale in the individual's ISP.

Mental Health Partial Hospitalization

Last Updated: [10/19/2023]

Service Type:

0050 Outpatient Psych (Enhanced Behavioral Health Services)

Procedure Code:

H0035

Discharge Criteria:

The individual meets discharge criteria if any of the following are met:

- The individual no longer meets admission/continued stay criteria and/or meets criteria for another level of care, either more or less intensive, and that level of care is sufficiently available;
- Required consent for treatment is withdrawn or not obtained;
- The individual does not appear to be participating in the treatment plan (ISP) despite documented efforts to engage the individual;
- The individual's level of functioning has improved with respect to the goals outlined in the ISP, and there is reasonable expectations that the individual can to maintain this recovery process at a lower level of treatment;
- For eating disorders, individual has gained weight, or is in better control of weight reducing behaviors/actions, and can now be safely and effectively managed in a less intensive level of care; and/or
- If there is a lapse in service greater than seven consecutive calendar days, including circumstances where this lapse is due to admission for a medical or psychiatric inpatient hospitalization.

Service Authorization:

MH-PHP requires service authorization and shall be delivered by a service provider who meets the provider qualifications listed above. Providers shall submit service authorization requests within one business day of admission for initial service authorization requests and by the requested start date for continued stay requests. If submitted after the required time frame, the begin date of authorization will be based on the date of receipt. Additional service authorization information is located in Appendix C to this manual.

An individual may participate in MH-PHP services concurrent with Opioid Treatment Services/Medication Assisted Treatment. The MH-PHP provider and the buprenorphine-waivered practitioner shall collaborate and corroborate these efforts in documentation.

- One unit of service is one day.

Mental Health Partial Hospitalization

Last Updated: [10/19/2023]

Service Type:

0050 Outpatient Psych (Enhanced Behavioral Health Services)

Procedure Code:

H0035

- The minimum number of service hours per week is 20 hours with at least four service hours per service day, a minimum of 5 days per week.
- In cases that an individual does not complete the minimum of four clinical service hours per service day or attend treatment a minimum of five days per week, the provider shall:
- Document any ISP deviation as well as the reason for the deviation in the individual's medical record; and
- Notify the MCO or the Fee for Service contractor Utilization Management (UM) staff when they have not been able to provide the minimum required sessions. The provider shall submit documentation at the time of the next authorization review.
- If the individual consistently deviates from the required services in the ISP, the provider should work with the MCO or the Fee for Service contractor UM staff to reassess for another Level of Care or model to better meet the individual's needs.