### Level of Care IV: Psychiatric Partial Hospitalization Services- Adult, Child, and Adolescent

#### I. Principles for Medical Necessity Criteria:
Partial Hospitalization programs provide the nature and intensity of services that would be provided in a hospital (including medical and nursing supervision and interventions) for at least 4 hours/days, but the Individual is not involved in a 24 hour/day program including a stay overnight.

When an Individual has a mental disorder that requires professional evaluation and treatment, he/she should be treated at the least intensive setting able to meet the individual's 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.

#### II. Admission Criteria
*All of the following criteria are necessary for admission:*

- **A.** The consumer has a PMHS mental health DSM-IV diagnosis, and the Individual's condition can be expected to be stabilized at this level of care.
- **B.** There is clinical evidence that the Individual would be at risk to self or others if he/she were not in a partial hospitalization program.
- **C.** There is clinical evidence that the Individual will be safe in a structured environment under clinical supervision for part of the day, and has a suitable environment for the rest of the time, and that a partial hospitalization program can safely substitute for or shorten a hospital stay to prevent deterioration that would lead to a re-hospitalization.
- **D.** All less intensive levels of treatment have been determined to be unsafe or unsuccessful.

#### III. Severity of Need and Intensity of Service
Medical necessity for admission to a Partial Hospitalization Program must be documented by the presence of all of the criteria. The length of the program varies based on the Individual's needs and medical necessity. Evidence of a stable and safe living environment and Individual safety during non-treatment hours is imperative to meet criteria and distinguish it from inpatient services. Active involvement of the Individual, family, caretakers, or significant others involved in the Individual's treatment should be sought.

#### IV. Continued Stay Criteria:
*All of the following criteria are necessary for continuing treatment at this level of care:*

- **A.** The consumer continues to meet admission criteria.
- **B.** 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
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<td>treatment plan to address the lack of progress are evident and/or a second opinion on the treatment plan has been considered. (There should be daily progress notes that document treatment and the Individual's response to treatment.)</td>
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<td>C. Clinical attempts at therapeutic re-entry into a less restrictive level of care have, or would, result in exacerbation of the mental disorder to the degree that would warrant the continued need for partial hospitalization services.</td>
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<td>D. There is evidence that the Individual, family, caretaker or significant other is involved in treatment in the frequency and manner indicated by the treatment plan.</td>
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<td>E. There is documented active planning for transition to a less intensive level of care</td>
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