

LEVEL OF CARE GUIDELINES: DAY TREATMENT – UNITED HEALTHCARE PLAN OF THE RIVER VALLEY, INC.

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Relevant Services
<ul style="list-style-type: none"> • Iowa Day Treatment

Related Behavioral Clinical Policies & Guidelines:
<ul style="list-style-type: none"> • Optum Level of Care Guidelines

INTRODUCTION

The *Level of Care Guidelines* is a set of objective and evidence-based behavioral health criteria used to standardize coverage determinations, promote evidence-based practices, and support members’ recovery, resiliency, and wellbeing¹ for behavioral health benefit plans that are managed by UnitedHealthcare Plan of the River Valley.

The *Level of Care Guidelines* is derived from generally accepted standards of behavioral health practice. These standards include guidelines and consensus statements produced by professional specialty societies, as well as guidance from governmental sources such as CMS’ National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs). The *Level of Care Guidelines* is also derived from input provided by clinical personnel, providers, professional specialty societies, consumers, and regulators.

For more information on guiding principles for the *Level of Care Guidelines* and their development, approval, dissemination, and use, please see the *Introduction to the Level of Care Guidelines*, available at: www.providerexpress.com > Clinical Resources > Level of Care Guidelines.

Before using this guideline, please check the member’s specific benefit plan requirements and any federal or state mandates, if applicable.

DAY TREATMENT

DAY TREATMENT Community Mental Health Centers

Adults

Day Treatment provides a combination of diagnostic, treatment, and rehabilitative procedures which, through supervised and planned activities and extensive interactions between the provider and the member, provides the

¹ The terms “recovery” and resiliency” are used throughout the Psychological and Neuropsychological Testing Guidelines. SAMHSA defines “recovery” as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. SAMHSA defines “resilience” as the ability to adapt well over time to life-changing situations and stressful conditions. The American Society of Addiction Medicine defines “recovery” as a process of overcoming both physical and psychological dependence on a psychoactive substance, with a commitment to sobriety, and also refers to the overall goal of helping a patient to achieve overall health and well-being.

services of the clinic treatment program, as well as social training, task and skill training and socialization activities for a period of three to five hours per day, three or four times per week in a licensed Community Mental Health Center.

Day Treatment services are typically provided to members 21 years and older with more severe mental health conditions and related functional impairments. Day treatment services for adults are structured, long-term services designed to assist in restoring, maintaining or increasing levels of functioning, minimizing regression, and preventing hospitalization.

The course of treatment in Day Treatment is focused on addressing the factors that precipitated admission to the point that the member's condition can be safely, efficiently and effectively treated in a less intensive level of care.

1. Admission Criteria

- see "*Common Criteria and Best Practices for All Levels of Care*":
<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/locg.html>
- AND
- The member has a Serious Mental Illness (SMI)¹.
- AND
- The member is not in imminent or current risk of harm to self, others, and/or property.
- AND
- Assessment and diagnosis and/or treatment planning requires observation and interaction for at least three to five hours per day, three or four times per week in a licensed Community Mental Health Center. Examples include:
 - Assessment requires frequent interaction with the member, and observation of the member with others.
 - The treatment plan must be changed frequently which requires that the provider have face-to-face interactions with the member several times a week.
- OR
- The member requires engagement and support which requires extended interaction between the member and the program. Examples include:
 - The member requires a coordinated transition back into the community after treatment in Inpatient or a Residential Treatment Center.
 - The member has been unable to access or utilize the member's family or other natural resources on their own.
- OR
- The member requires a structured environment to practice and enhance skills. This requires face-to-face interactions several times a week that cannot be provided in a less intensive setting. Examples of skills include those that help the member:
 - Maintain their current living situation;
 - Return to work or school.
- OR
- The member requires a structured environment to complete goals and develop a plan for post-discharge services in a less intensive setting. Examples of assistance include the following:
 - Assistance with developing the skills needed to self-manage medications;
 - Assistance with making progress toward goals in spite of an environment that does not support recovery and/or limited community support services.
 - Criteria for Overnight Housing Coupled with a Day Treatment Program
 - Overnight housing is covered by the benefit plan.
- AND
- The treatment setting is separate from the housing.
- AND
- An unsupportive or high-risk living situation is undermining the member's recovery.
- OR
- Routine attendance at Day Treatment is hindered by the lack of transportation.

2. Continued Service Criteria

- see "*Common Criteria and Best Practices for All Levels of Care*":
<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/locg.html>

3. Discharge Criteria

- see "Common Criteria and Best Practices for All Levels of Care":
<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/locg.html>
4. Clinical Best Practices
- see "Common Criteria and Best Practices for All Levels of Care":
<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/locg.html>

REFERENCES*

1. Iowa Administrative Code. 441—24.4(225C) Standards for services.
2. Iowa Department of Human Services. (May, 2014). Community Mental Health Centers Manual.

*Additional reference materials can be found in the reference section(s) of the applicable Level of Care Guidelines and in the related Behavioral Clinical Policy

HISTORY/REVISION INFORMATION

Date	Action/Description
March, 2016	• Version 1
March, 2017	• Version 2

ⁱ According to Federal Register 58, Number 96, the definition of Serious Mental Illness (SMI) includes persons aged 18 or older who currently or at any time in the past year have had a diagnosable mental, behavioral, or emotional disorder (excluding developmental, dementias, mental disorders due to a medical condition and substance use disorders) of sufficient duration to meet diagnostic criteria specified within the DSM that has resulted in serious functional impairment, which substantially interferes with or limits one or more major life activities.