

Origination Date: 4/20/10	Revision Date(s):
Developed By: Medical Criteria Committee	

- f. Risk assessment;
- g. Treatment plan;
- h. Specific goals for stabilization; and
- i. Plan for outpatient follow-up following discharge.

Criteria for authorization:

Authorization for admission is indicated by **ALL** of the following:

- (1) The patient demonstrates symptomatology consistent with a DSM-IV-TR (Axis I – V) diagnosis that requires therapeutic intervention. Evaluation needs to include a chemical dependency screening , and further assessment as warranted.
- (2) The patient is at risk to self or others due to suicidal or homicidal ideation, risk-taking or self-endangering behavior, or inability to care for self which is not so severe that it requires 24 hour supervision, but does require structure and supervision for a significant portion of the day.
- (3) The patient has adequate support or can demonstrate reliability in attendance and participation in the program.
- (4) The member cannot be treated at a lower level of care without the risk of deterioration.
- (5) The treatment plan needs to clearly state what benefits the patient can expect to receive by participating in the program. The goals of treatment cannot be based solely on the need for structure and support.

Continued Stay Criteria:

Continued authorization is indicated by **ALL** of the following:

- (1) The patient continues to meet admission criteria at this level of care
- (2) The patient's treatment does not require a more intensive level of care, and a less intensive level of care would not be clinically appropriate.
- (3) The patient is actively participating in treatment.
- (4) Progress in meeting treatment goals can be clearly demonstrated and described in objective terms. Changes in interventions are implemented when there is a lack of progress.

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Discharge Criteria:

Termination of continued authorization is indicated by **1 or more** of the following:

- (1) The patient's treatment plan goals have been substantially met, and continued care can be provided at a lower level of care.
- (2) The patient no longer meets admission criteria.
- (3) The patient is not making progress toward treatment goals and there is no reasonable expectation of progress at this level of care despite amendments to the treatment plan.

References:

- Bateman, A, Fonagy, P. (1999). Effectiveness of partial hospitalization in the treatment of borderline personality disorder: A randomized control trial. *American Journal of Psychiatry*. 156 (10): 1563 – 1569.
- Bystritsky, A et al. Quality-of-life changes among patients with obsessive-compulsive disorder in a partial hospitalization program. 50 (3); 4012-414.
- Horvitz-Lennon, M, Normand, S, Gaccione, P, Frank, R. (2001). Partial versus full hospitalization for adults in psychiatric distress: A systematic review of the published literature (1057 – 1997). *American Journal of Psychiatry*, 158 (5); 676-685.
- Raskin, R, Novacek, J, Bahlinger, D, Firth, L. (1996). A model for evaluating intensive outpatient behavioral health care programs. *Psychiatric Services*. 47: 1227-1232.
- Smith, GW, Ruiz-Sancho, A, Gunderson. (2001). An intensive outpatient program for patients with borderline personality disorder. *Psychiatric Services*. 52 (4); 532- 533.