

Coverage of any medical intervention discussed in a Prevea360 Health Plan medical policy is subject to the limitations and exclusions outlined in the member's benefit certificate or summary plan description (SPD) and applicable state and/or federal laws.

Residential Treatment – Behavioral Health

MP9554

Covered Service: Yes

Prior Authorization Required: Yes
Dependent on applicable laws and provisions per state

Additional Information: A facility that provides Residential Treatment is either a stand-alone mental health facility or a physically and programmatically-distinct unit within a facility licensed for this specific purpose and that includes 7 days per week, 24 hour supervision and monitoring

BadgerCare Plus and the State of Illinois: Medical necessity determination for substance abuse disorders are made in accordance with the appropriate patient placement criteria established by the American Society of Addiction Medicine (ASAM) criteria as mandated by law. **These requirements replace section 4.0 below.** See Forward Health Updates | NO. 2020-42 or 215 ILL. COMP. STAT. 5/370c(b)(3) (2017) for more information.

Self-funded plans (ASO) may require prior authorization. Please refer to the member's Summary Plan Description (SPD) for specific coverage and prior authorization requirements.

Prevea360 Health Plan Medical Policy:

- 1.0 Admission to Residential Treatment **requires** prior authorization through the Health Services Division and is considered medically necessary when **ALL** of the following are met:
 - 1.1 The member is expressing willingness to actively participate in a Residential Treatment level of care; **AND**
 - 1.2 The member has been diagnosed with a moderate-to-severe mental health disorder per the most recent version of the Diagnostic and Statistical Manual of Mental Disorders (in the case of substance abuse related Residential treatment, this diagnosis is of substance use disorder), and there is evidence of significant distress/impairment and this is the focus of active, daily treatment;

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- 1.2.1 Member risk and severity of behavioral health disorder is appropriate to proposed level of care as indicated by **1 or more** of the following:
 - 1.2.1.1 Danger to self, **OR**
 - 1.2.1.2 Danger to others; **AND**
 - 1.2.2 Behavioral health disorder is present and appropriate for residential care with **ALL** of the following:
 - 1.2.2.1 Moderately severe psychiatric, behavioral, or other comorbid condition, **AND**
 - 1.2.2.2 Serious dysfunction in daily living; **AND**
 - 1.3 This impairment in function is seen across multiple settings (e.g. work, home, and community for adults; school may be included for children/adolescents) and clearly demonstrates the need for 24 hour psychiatric and nursing monitoring and intervention; **AND**
 - 1.4 As a result of the interventions at this level of care, the symptoms and/or behaviors that led to the admission can reasonably be expected to show improvement such that the member will be capable of returning to the community and to less restrictive level of care; **AND**
 - 1.5 The member is cognitively capable of actively engaging in the recommended treatment plan, such as participation in structured activities in a group environment; **AND**
 - 1.6 There is evidence that a less restrictive level of care is not likely to provide safe and effective treatment **OR** that admission to acute inpatient care is likely if residential treatment does not happen, e.g. multiple failed attempts at stabilization are documented, **OR** lower level of care is not available.
- 2.0 Continued Residential Treatment **requires** prior authorization through the Health Services Division and is considered medically necessary when **ANY** of following are met:
- 2.1 The treatment provided is leading to measurable clinical improvements in the moderate-to-severe symptoms and/or behaviors that led to this admission **AND** a progression toward discharge from the present level of care, but the member is not sufficiently stabilized so that they can be safely and effectively treated at a less restrictive level of care; **OR**
 - 2.2 If the treatment plan implemented is not leading to measurable clinical improvements in the moderate-to-sever symptoms and/or behaviors that led to this admission and a progression toward discharge from the present level of care, there must be ongoing reassessment and

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- modifications to the treatment plan that address specific barriers to achieving improvement when clinically indicated; **OR**
- 2.3 The member has developed new symptoms and/or behaviors that require the intensity of Residential treatment for safe and effective treatment.
- 2.4 In addition to **one or more** of the criteria above (2.1, 2.2 or 2.3) **ALL** of the following are required for continued Residential Treatment:
- 2.4.1 The member and family are involved in the treatment and discharge planning process; **AND**
- 2.4.2 Continued stay is not primarily for the purpose of providing a safe and structured environment; **AND**
- 2.4.3 Continued stay is not primarily due to lack of external supports; **AND**
- 2.4.4 There is a reasonable expectation for improvement in the severity of the current condition; **AND**
- 2.4.5 Continued stay is not primarily for the purpose of bridging care to another program; **AND**
- 2.4.6 Request for continued Residential treatment is not based on a pre-determined program or preset number of days; **AND**
- 2.4.7 Neither a higher nor lower level of care is more appropriate (e.g. patient condition has deteriorated such that more intensive supervision is necessary; nor has patient stabilized or improved such that effective treatment is available at a lower level of care.)
- 3.0 In addition to meeting the criteria of 1.0 or 2.0, **ALL** of the following criteria should be met if the member is a child or adolescent (under 18 years of age):
- 3.1 The facility providing Residential Treatment should be either a stand-alone mental facility intended for children/adolescents **OR** a physically and programmatically-distinct unit within a facility licensed for this purpose; **AND**
- 3.2 The program should provide for the child/adolescent's mental health, physical health and educational needs, including access to education at the appropriate developmental level to facilitate transition back to the child/adolescent's previous school setting upon discharge; **AND**
- 3.3 The treatment should be family-centered with the patient and family included in care, unless this is clinically contraindicated or would not be in compliance with existing federal or state laws.

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- 4.0 In addition to meeting the criteria of 1.0 or 2.0 and 3.0 if applicable, **ALL** of the following criteria should be met if the Residential treatment is related to substance abuse (alcohol and other drug abuse, AODA):
- 4.1 Signs or symptoms of withdrawal requiring acute management, if they are present, are manageable at the Residential Treatment facility; **AND**
 - 4.2 The member and/or family are made aware of the Medication Assisted Treatments, if available; **AND**
 - 4.3 Active substance abuse is a substantial contributor to the current treatment episode; **AND**
 - 4.4 There is documentation of ongoing active medical issues secondary to the substance use disorder **OR** the member has symptomatology related to substance use disorder which requires daily monitoring and nursing care.
- 5.0 The following services/expenses are considered **not medically necessary** and therefore not covered (this is not an all-inclusive list):
- 5.1 Biofeedback
 - 5.2 Family counseling for non-medical and/or non-psychiatric reasons
 - 5.3 Therapeutic group homes
 - 5.4 Wilderness camps, boot camps, boarding school, academy-vocational programs, and/or Outward Bound programs
 - 5.5 Halfway houses
 - 5.6 Hypnotherapy
 - 5.7 Long-term or maintenance therapy
 - 5.8 Marriage counseling
 - 5.9 Phototherapy
 - 5.10 Residential Treatment for purposes of convenience, alternative to incarceration, respite or housing
 - 5.11 Residential Treatment for the provision of a safe and structured environment due to a lack of external support or housing, when criteria in (1.0) or (2.0) are not otherwise met
 - 5.12 Custodial care.

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