

Behavioral Health Residential Criteria

Member has a diagnosed behavioral health condition which reflects the symptoms and behaviors necessary for a request for residential treatment. The behavioral health condition causing the significant functional and/or psychosocial impairment shall be evidenced in the assessment by the following:

A. At least one area of significant risk of harm within the past three months as a result of:

- i. Suicidal/aggressive/self-harm/homicidal thoughts or behaviors without current plan or intent,
- ii. Impulsivity with poor judgment/insight,
- iii. Maladaptive physical or sexual behavior,
- iv. Inability to remain safe within environment, despite environmental supports (i.e. informal supports), or
- v. Medication side effects due to toxicity or contraindications.

AND

B. At least one area of serious functional impairment as evidenced by:

- i. Inability to complete developmentally appropriate self-care or self-regulation due to behavioral health condition(s),
- ii. Neglect or disruption of ability to attend to majority of basic needs, such as personal safety, hygiene, nutrition, or medical care,
- iii. Frequent inpatient psychiatric admissions, or legal involvement due to lack of insight or judgment associated with psychotic or affective/mood symptoms or major psychiatric disorders,
- iv. Frequent withdrawal management services, which can include but are not limited to, detox facilities, MAT, and ambulatory detox,
- v. Inability to independently self-administer medically necessary psychotropic medications despite interventions such as education, regimen simplification, daily outpatient dispensing, and long-acting injectable medications, or
- vi. Impairments persisting in the absence of situational stressors that delay

recovery from the presenting problem.

- C.** A need for 24 hour behavioral health care and supervision to develop adequate and effective coping skills that will allow the member to live safely in the community,
- D.** Anticipated stabilization cannot be achieved in a less restrictive setting,
- E.** Evidence that appropriate treatment in a less restrictive environment has not been successful or is not available, therefore warranting a higher level of care, and
- F.** Member agrees to participate in treatment. In the case of those who have a Health Care Decision Maker (HCDM), including minors, the HCDM also agrees to, and participates as part of, the treatment team.
- G.** Agreement to participate in treatment is not a requirement for individuals who are court ordered to a secured BHRF.
- H.** Member's outpatient treatment shall be a part of the pre-admission assessment and treatment plan formulation. This includes when documentation is created by another provider. Exception to this exists when member is evaluated by a crisis provider, Emergency Department, or Behavioral Health Inpatient Facility, and
- I.** BHRF shall notify the member's outpatient treatment of admission to the BHRF. This shall occur prior to creation of BHRF treatment plan.