

Level of Care V: Enhanced Support Services

<p>I. Principles for Medical Necessity Criteria: Enhanced Support Services are short-term, in-home, one-to-one services to provide supervision and assistance to an individual experiencing an increase or instability of psychiatric symptoms, or individuals transitioning from an inpatient level of care. This service is only provided by a provider of psychiatric rehabilitation services (PRP), residential rehabilitation services (RRP) or mobile treatment services.</p>	
<p>II. Admission Criteria:</p>	<p><i>All of the following criteria are necessary for admission:</i></p> <ul style="list-style-type: none"> A. The consumer is included in a MA, PMHS-eligible Medicare, or Uninsured Eligible has a PMHS specialty mental health DSM-IV diagnosis which requires, and is likely to respond to, therapeutic intervention. C. The consumer's functioning is seriously disrupted and threatens the safety of the individual, family, community, or in-home placement. D. The consumer/family has the capacity and is willing to actively participate in this intervention. E. There are multiple systemic problems that may require in-home intervention up to several hours per week.
<p>III. Severity of Need and Intensity of Service</p>	<p>Enhanced Support Services will be reimbursed for a maximum of <i>ten days per episode/30 days per calendar year</i>. Enhanced Support Services <i>cannot</i> be authorized in conjunction with Respite Services.</p>
<p>IV. Continued Stay Criteria:</p>	<p><i>All of the following criteria are necessary for continuing treatment at this level of care:</i></p> <ul style="list-style-type: none"> A. The consumer continues to meet admission criteria but has not reached the maximum episodic or annual limitations. 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 treatment plan to address the lack of progress are evident. C. There is documented active planning for transition to a less intensive level of care