

Beacon NMNC 6.603.04 Psychiatric Visiting Nurse (Home Health Services) (Child/Adolescent)

Psychiatric Visiting Nursing/Home Health Services is a short-term treatment delivered in the member's home or living environment to treat a *DSM* or corresponding ICD diagnosis with psychiatric medication management. This is most common at points of care transition from more intensive levels of care where there is a high risk for decompensation and readmission, a history of treatment non-adherence, or difficulties ambulating, which present a barrier for attending outpatient medical and psychiatric care. Psychiatric visiting nurses may administer medications, including long acting, injectable antipsychotic medications, obtain weekly blood work for a member, provide education, psycho-education and motivational interviewing, and provide other psychiatric nursing services for which they are licensed.

ADMISSION CRITERIA

All of the following criteria must be met:

1. Member must have a *DSM* or corresponding ICD diagnosis
2. Services are for assistance with psychiatric medication management (e.g., pharmacy, adherence, medication reconciliation, medication side effects), education about chronic disease management, coordination of care and care transition management, nutrition and hydration management, emergency plan management)
3. Member can be adequately and safely maintained in the home
4. Member is willing and motivated to receive psychiatric nursing/home care services
5. Outpatient/community-based medication management services are not adequate to stabilize the member or maintain current level of functioning due to at least *one* of the following:
 - a. member has complex co-morbidity resulting in difficulty ambulating and attending community health treatment; or
 - b. member requires long-term injectable medication and/or regular bloodwork to maintain stability on current medication regimen.
6. Member does not require a level of structure beyond the scope of psychiatric home care/visiting nursing services
7. Without psychiatric visiting nurse/home services, the member would be at high risk of requiring a higher level of care

CONTINUED STAY CRITERIA

All of the following criteria must be met:

1. Member continues to meet admission criteria
2. A less intensive level of care would not be adequate to administer care
3. Treatment is still necessary to reduce symptoms and improve functioning
4. Member's progress is monitored regularly, and the treatment plan modified, towards a set of clearly defined and measurable goals
5. There is evidence of progress and the member appears to be benefitting from services
6. Member is participating in the treatment plan
7. Intensity and frequency of services is scheduled to occur/or is occurring at a rate appropriate for the member's current psychiatric symptoms
8. Continuation of psychiatric visiting nurse /home care services is necessary to prevent decompensation of symptoms and placement in a more restrictive treatment setting
9. Coordination of care and active discharge-planning is ongoing, with the goal of transitioning the member to a less intensive level of care

DISCHARGE CRITERIA

Any *one* of the following must be met: 1, 2 or 3; criteria 4 and 5 are recommended, but optional:

1. Member no longer meets admission criteria and/or meets criteria for another level of care, either more or less intensive, and that level of care is sufficiently available; or
2. Guardian withdraws consent for treatment or the member withdraws consent for treatment, and it is determined that the individual has the capacity to make an informed decision and involuntary treatment or guardianship is not being pursued; or.
3. Member does not appear to be participating in the treatment plan despite multiple documented efforts to engage the member
4. Member's individual treatment plan and goals have been met
5. Member's support system is in agreement with the aftercare treatment plan

EXCLUSIONS

Any *one* of the following criteria is sufficient for exclusion from this level of care:

1. Member requires a level of structure and supervision beyond the scope of Psychiatric Visiting Nurse services; or
2. Member is receiving community-based medication management services without contraindication/service interruption; or
3. Intervention is requested for primary medical diagnosis

REFERENCES

Beacon's Medical Necessity Criteria incorporate generally accepted standards of behavioral health practice. In the course of reviewing the criteria annually there is an extensive literature search conducted and each of the following sources are consulted to determine if there is any relevant research or update:

1. Professional societies: American Psychiatric Association (APA); American Academy of Psychiatrists in Alcoholism and Addictions (AAPAA); American Academy of Child and Adolescent Psychiatry (AACAP)
2. National care guideline and criteria entities: American Society of Addiction Medicine (ASAM); MCG Behavioral Health Care Guidelines (formerly known as Milliman Care Guidelines); Change Healthcare's InterQual ® Behavioral Health Criteria
3. National health institutes: National Institutes of Health (NIH); National Institute on Alcohol Abuse and Alcoholism (NIAAA); National Institutes of Drug Abuse (NIDA); Substance Abuse and Mental Health Services Administration (SAMHSA)
4. Professional publications and psychiatric texts
5. Federal/state regulatory and industry accreditation requirements, including CMS's National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs)
6. National industry peer organizations, including managed care organizations (MCOs) and behavioral health organizations (BHOs)