



Medical Necessity Criteria for Child and Adolescent Short-Term RTF - Acute Stabilization and Diversion Unit

Short-Term RTF — Acute Stabilization and Diversion is a voluntary, temporary therapeutic residential treatment facility environment in a community setting. Utilizing the CASSP principles, the program diverts the need for acute inpatient care or longer term RTF by providing immediate treatment interventions to individuals experiencing, or at risk of an exacerbation, of the symptoms of their illness. Short-Term RTF - Acute Stabilization and Diversion services may also be used to help individuals succeed in their transition between levels of acute inpatient care to a home/community setting. Psychiatric services are offered on site and will be coordinated with an existing psychiatrist in the child/adolescent's treatment team. The Short-Term RTF Acute Stabilization Unit also coordinates care with existing treatment services and makes referrals/linkages to any additional services or supports recommended by the psychiatrist and treatment team.

Short-Term RTF — Acute Stabilization and Diversion services are short term in nature, with length of stay based on individual need. It is expected that the individual can move to a less restrictive level of care within a reasonably short period of time. Care management staff will determine, based upon continued stay and discharge criteria, when transition to a different level of care might be indicated. Consultation and review will be provided by a professional advisor in those cases where medical necessity criteria may not be clear.

In addition to psychiatric care, the Short-Term RTF — Acute Stabilization and Diversion program offers individual, group and family therapy, nursing services, case management services, and a therapeutic milieu designed to stabilize a child/adolescent's psychiatric symptoms and facilitate a smooth plan to return the child/adolescent to his/her home environment with appropriate community-based treatment services in place. This admission is not to substitute a CYF or JPO placement.

I. Admission Criteria

Must meet criteria A, B, C and D

- A. The child/adolescent must have a primary Axis I diagnosis of serious emotional disturbance.
- B. Based on the child/adolescent's current condition and past history there is a reasonable expectation that continuation of a less intense level of care will result in the need for the person to be treated in an acute level of care.
- C. The child/adolescent and their family agree to be actively involved in family therapy and disposition plans.
- D. The child/adolescent's Interagency Team, including their attending psychiatrist, are in agreement that admission to Short-Term RTF — Acute Stabilization and Diversion services is necessary to divert the need for acute inpatient or long-term RTF care.



II. Continued Stay Criteria

Must meet criteria A, B and C

- A. The child/adolescent continues to need the treatment and support as defined under the admission criteria, and is recommended by their attending psychiatrist¹.
- B. The child/adolescent and their family continue to be willing to be actively involved in family therapy and disposition plans.
- C. The child/adolescent's Interagency Team has met and are in agreement with continued care in order to facilitate a smooth transition to home/community with appropriate behavioral health services and supports.

III. Discharge Criteria

Must meet one of the criteria A, B, or C

- A. The child/adolescent no longer meets criteria as defined by Admission and Continued Stay criteria and improvement will not be compromised with treatment being given at a less intensive level of care.
- B. The child/adolescent can safely move to a less restrictive setting with appropriate linkages in place that must include living arrangements and follow-up care.
- C. The child/adolescent's psychiatric and/or medical condition is such that he/she can no longer be treated safely or effectively at this level of care and needs a more restrictive setting.

¹ Please note: In the rare circumstance when a child/adolescent does not have an assigned/attending psychiatrist overseeing their care in the community, the Short-Term RTF Acute Stabilization Unit psychiatrist will evaluate the child/adolescent, make aftercare treatment recommendations and serve as their attending psychiatrist until their first appointment with the community psychiatrist.