



**2008 LEVEL
OF CARE
GUIDELINES:
MENTAL
HEALTH**

Home Health

Home health consists of assessment and treatment services that are provided in the member's home by UBH/USBHPC/PBH providers of all disciplines for the care of a mental health condition.

Any one of the following criteria must be met...

1. The member is homebound, secondary to either a medical condition or a severe psychiatric disability.
2. The member's current condition or circumstances temporarily prevent an office-based or facility-based treatment.
3. In-home services are needed to assess likely causes and/or identify signs of deterioration.
4. There is repeated failure to comply with the recommended treatment plan and in-home services are required to facilitate compliance.
5. The member has demonstrated a pattern of hospitalization and/or emergency room visits associated with a failure to follow up with outpatient treatment within the last six months.
6. The member has a history of recent discharge from a more restrictive level of care with a significant risk for de-compensation without home health services.
7. The member requires an emergent evaluation due to possible risk of harm to self or others, or for an assessment of their functioning and living conditions when the member is seriously deteriorating and cannot be transported.

AND the member's psychosocial functioning is impaired due to symptoms/behaviors caused by a behavioral health condition.