

## **Group Services**

### **DESCRIPTION OF GROUP SERVICES**

Intensive Behavioral Health Services (IBHS) can be delivered using group services. Group services are therapeutic interventions provided primarily in a group format through psychotherapy; structured activities, including Applied Behavior Analysis (ABA) services; and community integration activities that address a child's, youth's or young adult's identified treatment needs. Group services can be provided in a school, community setting or community like setting. A community like setting is a setting that simulates a natural or normal setting for a child, youth or young adult.

Group services can be delivered by graduate level professionals and individuals who meet the qualifications to provide behavioral health technician (BHT) services or BHT-ABA services. A graduate level professional may provide individual, group and family psychotherapy; design of psychoeducational group activities; clinical direction of services to a child, youth or young adult; creation and revision of the individual treatment plan (ITP); oversight of the implementation of the ITP and consultation with the child's, youth's or young adult's treatment team regarding the ITP. An individual who is qualified to provide BHT services or BHT-ABA services may assist with conducting group psychotherapy, facilitate psychoeducational group activities and implement the child's, youth's or young adult's ITP.

### **INITIATION REQUIREMENTS FOR GROUP SERVICES**

A written order that complies with 55 Pa. Code § 1155.34(a)(1) is required for group services to be initiated. If services are to begin prior to completion of an assessment and ITP, a treatment plan is also required

### ***MEDICAL NECESSITY GUIDELINES FOR INITIATION OF GROUP SERVICES***

When evaluating whether the order contains clinical information to support the need for an assessment and ITP to be completed or the medical necessity of the group services ordered, the following must be taken into account:

- A. 1. The use of group services is reasonably expected to reduce or ameliorate the child's, youth's or young adult's identified therapeutic needs and increase the child's, youth's or young adult's coping strategies.

or

The use of group services is necessary to support skill development to promote positive behaviors that will assist the child, youth or young adult with achieving or maintaining maximum functional capacity.

2. The child's, youth's or young adult's behaviors do not pose a risk to the safety of the child, youth or young adult or others that cannot be managed while in the community and the child, youth or young adult does not require a more restrictive level of care, such as inpatient treatment or a psychiatric residential treatment facility.
3. The number of hours of services prescribed are necessary for an assessment to be conducted and an ITP completed or are reasonably expected to reduce or ameliorate the behavioral or developmental effects of the child's, youth' or young adult's behavioral health disorder diagnosis; enable the child, youth or young adult to achieve or maintain maximum functional capacity; or acquire the skills needed to maximize functioning within the child's, youth's or young adult's home, school or community.

OR

- B. If the written order does not support the above, group services must be otherwise medically necessary to meet the behavioral health needs of the child, youth or young adult.

#### **CONTINUED CARE REQUIREMENTS FOR INDIVIDUAL SERVICES**

The following documentation is required for group services to continue:

1. A written order that complies with 55 Pa. Code § 1155.34(a)(6).
2. An updated assessment that complies with 55 Pa. Code § 5240.95(b)
3. An updated ITP that complies with 55 Pa. Code § 5240.96(b)-(e) and (g).

#### ***MEDICAL NECESSITY GUIDELINES FOR CONTINUATION OF GROUP SERVICES***

An evaluation of the medical necessity of continued group services must take into account whether the required documentation indicates the following:

- A. 1. The child, youth or young adult shows measured improvement and/or demonstrates alternative/replacement behaviors.

or

There is a reasonable expectation that continuation of group services will reduce or ameliorate the child's, youth's or young adult's identified therapeutic needs and increase the child's, youth's or young adult's coping strategies.

or

There is a reasonable expectation that continuation of group services is necessary to support skill development to promote positive behaviors that will assist the child, youth or young adult with achieving or maintaining maximum functional capacity.

2. The child's, youth's or young adult's behaviors do not pose a risk to the safety of the child, youth or young adult or others that cannot be managed while in the community and the child, youth or young adult does not require a more restrictive level of care, such as inpatient treatment or a psychiatric residential treatment facility.
3. The group services are needed to maintain the child's, youth's or young adult's maximum functional capacity and the benefit of continuing the group services is not outweighed by the risk that continuing the services will impede the child's, youth's or young adult's progress toward achieving his or her highest functional level.
4. The number of hours of services prescribed are reasonably expected to reduce or ameliorate the behavioral or developmental effects of the child's, youth' or young adult's behavioral health disorder diagnosis; enable the child, youth or young adult to achieve or maintain maximum functional capacity; or acquire the skills needed to maximize functioning within the child's, youth's or young adult's home, school or community.

OR

- B. If the required documentation does not support the above, continued group services must be otherwise medically necessary to meet the behavioral health needs of the child, youth or young adult.

### **DISCHARGE AND SERVICE TRANSITION**

A provider may discharge a child, youth or young adult who is receiving group services for any of the following reasons:

1. The prescriber, with the participation of the treatment team, has determined that the child, youth or young adult has completed the goals and objectives identified in the ITP and no new goals or objectives have been identified and that group services are no longer necessary.
2. The prescriber, with the participation of the treatment team, has determined that the child, youth or young adult is not progressing towards the goals identified in

the ITP within 180 days for the initiation of group services and other clinical services are being provided.

3. The prescriber, with the participation of the treatment team, has determined that the child's, youth's or young adult's needs are better served in a more restrictive setting and other clinical services are being provided.
4. The parent or legal guardian of a child or youth who provided consent for the child or youth to receive group services agrees that services should be discontinued.
5. The youth or young adult agrees that group services should be discontinued.
6. The child, youth or young adult failed to attend scheduled group services for 45 consecutive days without any notification from the youth, young adult or the parent, legal guardian or caregiver of the child or youth. Prior to discharge, the IBHS agency made at least three attempts to contact the youth, young adult or the parent, legal guardian or caregiver to discuss past attendance, ways to facilitate attendance in the future and the potential discharge of the child, youth or young adult for lack of attendance.