Private Room Exception

Agencies that contract with Community Behavioral Health (CBH) are expected to provide a treatment milieu that affords reasonable accommodations and privacy for members. They are also expected to provide oversight of treatment such that persons are not exposed to discrimination, bullying, or hostile environments. It is understood that CBH members who need treatment in certain levels of care can, as part of their illness, exhibit behaviors and symptoms that can be a danger to themselves or others. The treatment protocols and policies of provider agencies are expected to demonstrate response strategies to these behaviors in a timely fashion to protect CBH members and other persons receiving treatment at the facility. Agencies are also expected to manage their bed occupancy, room assignments, and milieu to minimize adverse exposures and experiences as part of their rate and contract.

CBH recognizes that there is variability in the provider network regarding facilities’ access to private rooms. On occasion, CBH members admitted to a bed-based level of care will exhibit symptoms that may require a private room. When an individual cannot otherwise access a private room to receive the medically necessary treatment in that facility, or when pursuing a lateral transfer to a facility that can accommodate a single room would lead to significant disruption in treatment, CBH will consider authorizing a private room exception utilizing the following criteria.

Medical Necessity

Admission Criteria

[Must meet criterion A.1. OR A.2. AND A.3. through A.7. OR meet criterion B]

A. A mental health professional has determined a private room exception is appropriate and there is potential for benefit from a private room exception due to the following:

1. The person exhibits active behavior that exposes others to physical, sexual, or psychological risk, either directly or via observing the behavior in close quarters, such that there is a likelihood for harm to a room cohabitant.

   a. That harm is likely to be experienced, within reason, to any individual cohabitant in that room and is not due to a particular roommate’s vulnerabilities or values.

OR

2. The person is vulnerable to physical, sexual, or psychological harm due to age, developmental stage, gender identity, emotional/behavioral dysregulation or cognitive functioning such that there is likelihood for harm by having a room cohabitant.

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3. The provider agency demonstrates that they cannot otherwise accommodate room assignments for managing the behaviors or risks in question.

4. The provider agency demonstrates that pursuing a lateral transfer to a facility able to accommodate the person in a private room would be harmful or significantly disruptive to the person’s treatment or that a lateral transfer cannot be secured in a timely fashion.

5. The clinical or developmental status in question cannot be equally or better managed solely via one-to-one observation.

6. The request is not made solely due to the person being of an identified population (race, class, sexual orientation, gender identity, culture, disability).

7. The request is not made solely due to the person having preference for a private room.

OR

B. The person has a communicable disease that would reasonably expose a room cohabitant to risk of acquiring that disease.

Continued Stay Criteria [Must meet both criterion A and B]

A. The person continues to meet admission criteria.

AND

B. The person meets criteria for continued stay to the level of care for which the private room exception was initially requested.

Discharge Criteria [Must meet criterion A or B]

A. The person no longer meets continued stay criteria.

OR

B. The person no longer meets criteria for continued stay to the level of care for which the private room exception was initially requested.