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PROGRAM INTEGRITY

Treatment Planning Guide

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Community Behavioral Health

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1. INTRODUCTION

The CBH Program Integrity Department has been tasked with ensuring that our providers adhere to documentation standards presented in state regulations, bulletins, CBH contractual documents, OMHSAS-approved service descriptions, etc. Complying with rules and regulations related to treatment planning remains a significant concern and accounts for a large portion of overpayments identified in Program Integrity Department audits.

Effective treatment plans are crucial to providing a construct for effective treatment and successful outcomes. Additionally, treatment plans are required for behavioral health services to be reimbursed through Pennsylvania Medicaid. Over time, different "levels of care" have developed specific requirements regarding treatment plans, including:

- when initial plans should be completed,
- deadlines for updates,
- requirements for who must participate in the development of the plans, and
- required signatures on the plans.

Historically, this information has been scattered across various regulations, bulletins, and CBH correspondence. The CBH Program Integrity Treatment Planning Guide attempts to bring this information into one easy to access and review location.

It is important to note that, at times, CBH will have more stringent requirements than state requirements. We have provided references to state regulations, bulletins, etc. to give you a foundation from which we set each standard. Providers are ultimately responsible to ensure they are providing services in compliance with the most current applicable regulations and guidelines. We sincerely hope that this will assist our provider network in their own internal quality review and compliance processes.

1.1. General Considerations

All providers must develop a policy and procedure on the development and construction of treatment plans. The policy must indicate how the provider will adhere to the following general requirements:

- Reflect input from all disciplines involved in the member's care and the member (interdisciplinary treatment plan development)
- Document the admission date, the date of the initial treatment plan, the date of the current treatment plan, and the due date of the subsequent treatment plan
- Document the expected duration of the treatment
- Demonstrate medically necessary care

- Reflect behaviorally defined problem statements
- Goals related to behavioral health needs are to be realistic, objective, stated in measurable terms, developmentally appropriate, behaviorally based, and related to the member's life
- Formulated from a strengths-based perspective and identifying the strengths/barriers of the individual on all treatment plans
- Be based on the diagnostic evaluation of the member
- Reflect a complete diagnosis based on the current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Reflect the methods of treatment to be utilized
- Reflect specific planned interventions and action steps
- Reflect discharge planning
- Identification of persons responsible for the implementation of interventions
- Require documentation of progress (or lack thereof) towards goal attainment in updated plans
- Statement of understanding on treatment plans (initial and updated) be signed by the member (if capable)
- Require treatment plans to be legible
- ***For children's services only:*** Identify how the educational needs of the member are to be met when treatment causes an absence from school

1.2. Additional Information

- ***For children's services only***: Active participation and signature(s) of the parent(s) or legal guardian and/or member under 14 years of age as established in ***OMHSAS-23-01 Act 65 of 2020: Consent to Mental Health Treatment for Minors***. This bulletin advises minors from 14 to 17 years of age can consent without parental consent. It also indicates a parent can consent if the minor from 14 to 17 does not.
- ***For Certified Registered Nurse Practitioner (CRNP)***: CRNPs may not sign treatment plans in lieu of the psychiatrist for Inpatient Psychiatric (IP) and Residential Treatment Facility (RTF) levels of care.

Program Integrity analysts will review documentation to ensure treatment plans are present, completed, updated within required timeframes, and contain all required elements and signatures. Treatment plans included in the records must have original signatures. Treatment plans completed electronically as part of a

provider's electronic health record (EHR) may be signed electronically. Methods for electronic signature may include, but are not limited to:

- signature pads,
- affixing of signatures via secure log-in,
- attestation using personal identifying information, and
- biometric signatures.

Payment for all services provided during a period without a valid treatment plan will be retracted. Treatment plans may be considered invalid for the following reasons:

- Missing required signatures and corresponding dates
- Missing treatment plans/treatment plan updates
- Late signatures from required individuals
- Duplicated plans—either from plan to plan for the same member or between members
- Failure to include all treatment modalities provided (e.g., medication management)

2. MENTAL HEALTH

2.1. Per Diem Services

2.1.1. 23-Hour Crisis Stabilization (23-Hour Bed)

Initial Treatment Plan Due	Documentation of, "ongoing assessment (beyond the initial emergency psychiatric evaluation), intervention, and clinical determination for level of care." Documentation is to reflect, "continued evaluation over an extended period of time beyond the initial emergency psychiatric evaluation to further evaluate for the most appropriate level of care."
Treatment Plan Updates Due	Documentation of, "level of care determination."
Signature Requirements	As required for clinical documentation
References	CBH Guidance – 23-Hour Crisis Stabilization (23-Hour Bed)

2.1.2. Inpatient Psychiatric Services, Sub-Acute Inpatient Programs (SAIP)

Initial Treatment Plan Due	Within 72 hours
Treatment Plan Updates Due	At minimum every seven days ***Note:*** *CBH exceeds state minimums for treatment plan due dates.*
Signature Requirements	Member, parent/legal guardian (if applicable), interdisciplinary team of professionals including attending psychiatrist ***Note:*** *CBH exceeds state minimums for signature requirements.*
References	➡ 55 Pa. Code § 1151.65(a) ➡ § 1151.66(a) ➡ § 5100.2 ➡ § 5100.13 ➡ § 5100.15

2.1.3. Extended Acute Care (EAC)

Initial Treatment Plan Due	By 30 days
Treatment Plan Updates Due	At least once every 30 days
Signature Requirements	Member, interdisciplinary team of professionals including psychiatrist ***Note:*** *CBH exceeds state minimums for signature requirements.*
References	➡ 55 Pa. Code § 5100.2 ➡ § 5100.13 ➡ § 5100.15 ➡ §5100.16

2.1.4. Crisis Residence

Initial Treatment Plan Due	A medical examination and diagnosis is required for members housed over 24 hours. Initial treatment plan developed as outlined in provider policy; recommend within seven days. Policies should be available for auditors to review.
Treatment Plan Updates Due	When clinically indicated and as outlined in provider policy; recommend review at a minimum of every seven days
Signature Requirements	Member, parent/legal guardian (if applicable), mental health worker/professional, psychiatrist
References	➡ Proposed Regulations Pa. Code 5240.144 (Proposed regulations different than IBHS) ➡ PA Bulletin, Vol. 23, No. 10, March 6, 1993

2.1.5. Residential Treatment Facility For Adults (RTFA)

Initial Treatment Plan Due	By 30 days	
Treatment Plan Updates Due	At least once every 30 days	
Signature Requirements	Member, interdisciplinary team of professionals including psychiatrist *Note: CBH exceeds state minimums for signature requirements.*	
References	➡ 55 Pa. Code § 5100.2 ➡ § 5100.13	➡ § 5100.15 ➡ §5100.16

2.1.6. Psychiatric Residential Treatment Facilities (PRTF) – Child/Adolescent

Initial Treatment Plan Due	Member shall have a written health and safety assessment within 24 hours of admission. An Individual Service Plan (ISP) shall be developed for each child within 30 calendar days of the member's admission.	
Treatment Plan Updates Due	A review of each member's progress on the ISP, and a revision of the ISP if necessary, shall be completed at least every six months.	
Signature Requirements	The ISP shall be developed by the member, the member's parent and legal guardian (if applicable and available), any person invited by the member and parent/legal guardian, childcare staff persons, a contracting agency representative, and other appropriate professionals. Persons who participated in the development of the ISP shall sign and date the ISP, except for the member and parent/legal guardian, who shall be given the opportunity to sign the ISP.	
References	➡ 55 Pa. Code § 3800.224 ➡ § 3800.225 ➡ § 3800.141	➡ § 3800.142 ➡ § 3800.224

2.1.7. Long Term Structured Residential (LTSR)

Initial Treatment Plan Due	Initial plan within 72 hours, comprehensive treatment plan within 10 days of admission	
Treatment Plan Updates Due	At least every 30 days or more frequently as the member's condition changes	
Signature Requirements	Member, interdisciplinary treatment team	
References	➡ 55 Pa. Code § 5320.51	➡ § 5320.52

2.1.8. Community Residential Rehabilitation (CRR)

Initial Treatment Plan Due	The community residential rehabilitation service (CRRS) staff shall develop with each member an individualized written residential service plan upon the member's enrollment in the CRRS.
Treatment Plan Updates Due	The CRRS staff shall evaluate the member's adjustment to the program within 30 days of enrollment and modify the service plan as needed. The residential service plan must be reviewed and updated every 60 days thereafter.
Signature Requirements	Member and CRR staff
References	55 Pa. Code § 5310.33

2.1.9. Community Rehabilitation Residence-Host Home (CRR-HH)

Initial Treatment Plan Due	Upon the member's enrollment, an individualized written client residential service plan shall be developed by the community residential rehabilitation service (CRRS) staff with the member's parent, the agency having custody of the child, if applicable, and the member when the member is 14 years of age or older. When the member is under 14 years of age the member may be included in the development of the individual residential service plan, as appropriate.	
Treatment Plan Updates Due	The CRRS staff shall evaluate the member's adjustment to the program within 30 days of enrollment and modify the service plan as needed. The residential service plan must be reviewed and updated every 60 days thereafter.	
Signature Requirements	CRR staff with the member's parent, the agency having custody of the member, if applicable, and the member when the member is 14 years of age or older	
References	➡ 55 Pa. Code § 5310.33	➡ § 5310.123

2.2. Ambulatory Services

2.2.1. Outpatient Psychiatric Services, Psychiatric Outpatient Clinics and Satellites

Initial Treatment Plan Due	Within 30 calendar days of intake
Treatment Plan Updates Due	At least every 180 days or as may otherwise be required by law
Signature Requirements	➡ For Initial Treatment Plans: Member, guardian or parent of member under 14 years of age, MHP or MHW under supervision of MHP. If the member is receiving psychotherapy and other clinical services, the psychiatrist or advanced practice professional must sign. If the member is receiving medication management services only, the individual responsible for prescribing and monitoring the medications must sign (e.g., psychiatrist, physician, or CRNP). ➡ For Treatment Plan Updates: Member, every individual providing treatment services to the member (e.g., MHP or MHW under supervision of MHP, and/or CRNP). The psychiatrist or advanced practice professional must review and sign treatment plans on an annual basis.

	➡ For Treatment Plans Involving Members Under an Involuntary Outpatient Commitment: Updates to occur every 30 days and signed by the Member, MHP or advanced practice professional providing treatment services, and psychiatrist.	
References	➡ 55 Pa. Code § 1153.52	➡ § 5200.31

2.2.2. Independent Practitioners

Initial Treatment Plan Due	An independent practitioner is defined by CBH as a sole practitioner or practitioner in a group practice providing services to CBH members, who possesses and is paid on their own tax identification number. Independent practitioners are not responsible for completing separate treatment plans with each person receiving service. The goal(s) can be devised during the session and documented within the progress note.
Treatment Plan Updates Due	Elements of treatment plans should be contained within the progress notes. Behavioral health goals, interventions, and the plan for the next session should be evident in each progress note. In addition, there needs to be a rationale for treatments, including medications, documented within the progress note. Simply documented plans such as "the member will return in one week" will not be sufficient.
Signature Requirements	For ongoing behavioral health services, it is recommended for the member/guardian and clinician to sign off on treatment goals to indicate their understanding and agreement.
References	CBH Provider Manual, Section 5.18.10: Clinical Documentation Requirements – Independent Practitioner

2.2.3. Acute Partial Hospitalization – Adult

Initial Treatment Plan Due	Within the first five days of service	
Treatment Plan Updates Due	When clinically indicated; At a minimum of once every 20 days of service to the member	
Signature Requirements	Member, treatment team (consists of a treatment team leader, a psychiatrist when the treatment team leader is not a psychiatrist and other appropriate staff)	
References	➡ 55 Pa. Code § 5210.23	➡ § 5210.25

2.2.4. Acute Partial Hospitalization – Child/Adolescent

Initial Treatment Plan Due	Within the first five days of service
Treatment Plan Updates Due	A minimum of once every 20 days of service

Signature Requirements	Member/guardian, psychiatrist, treatment team	
References	➡ 55 Pa. Code § 5210.33	➡ § 5210.35

2.2.5. Family-Based Mental Health Services (FBMHS)

Initial Treatment Plan Due	Within five days of the first day of service	
Treatment Plan Updates Due	A comprehensive treatment plan is to be developed with the family and completed within the first 30 days of the initiation of services. This treatment plan must be updated at least every 30 days throughout the treatment period and treatment plan reviews must be documented.	
Signature Requirements	Parent or legal guardian (if member under 14 years), member and/or parent or legal guardian (if member 14-17 years), member (if member 18 years or older), program director, and clinical consultant (if applicable). Best practice is for team members to also sign (MHPs, MHW).	
References	➡ Proposed Rulemaking 55 Pa. Code § 5260.43	➡ OMHSAS-23-01 Act 65 of 2020: Consent to Mental Health Treatment for Minors ➡ OMH-91-19 Transmittal of General Family Based Mental Health Services Program Issues

2.2.6. Targeted Case Management: Blended Case Management, Intensive Case Management, Resource Coordination

Initial Treatment Plan Due	Within 30 days of the admission date	
Treatment Plan Updates Due	Monthly Review. Comprehensive update every six months	
Signature Requirements	Member/guardian, case manager, and case management supervisor	
References	➡ 55 Pa. Code § 5221.31 ➡ § 5221.33	➡ OMHSAS-12-03 ➡ OMHSAS-10-03 Attachment D. Blended Case Management Guidelines

2.2.7. Non-Fidelity Act (NFA) / Community Treatment Team (CTT)

Initial Treatment Plan Due	Within 30 days of the admission date

Treatment Plan Updates Due	Monthly review. Comprehensive update every six months
Signature Requirements	Member, case manager, case management supervisor, treatment team members

2.2.8. Assertive Community Treatment (ACT)

Initial Treatment Plan Due	An initial assessment and initial treatment plan (initial community support plan) shall be done the day of the admission to ACT by the team leader or the psychiatrist, with participation by designated treatment team members.
Treatment Plan Updates Due	Treatment plans (community support /treatment plans) shall be developed within eight weeks of admission and then at least every six months thereafter.
Signature Requirements	Member, service coordinator, individual treatment team members, psychiatrist (required to sign the initial treatment plan), all ACT team members
References	OMHSAS-08-03

2.2.9. Psychiatric Rehabilitation Services (PRS), Mobile Psychiatric Rehabilitation Services (MPRS)

Initial Treatment Plan Due	The individual rehabilitation plan (IRP) is due by day 20 of attendance but no more than 60 calendar days after initial contact.	
Treatment Plan Updates Due	Every 90 days and when: 1. A goal is completed 2. No significant progress is made 3. A member requests a change An IRP update must include a comprehensive summary of progress.	
Signature Requirements	Dated signatures of the member, the staff working with the member and the PRS/MPRS director	
References	➡ 55 Pa. Code § 5230.62	➡ Philadelphia Mobile Psychiatric Rehabilitation Services Performance Standards (11.13.2014)

2.2.10. Certified Peer Specialist (CPS) (AKA Peer Support Services)

Initial Treatment Plan Due	Individual service plan (ISP) due within one month of enrollment
Treatment Plan Updates Due	At least every six months

Signature Requirements	Dated signatures of the member, CPS, and MHP
References	~~OMHSAS-19-05~~ Peer Support Services – Revised

2.2.11. Federally Qualified Health Centers (FQHC)

Initial Treatment Plan Due	FQHC behavioral health service is a consultative model. Treatment plans do not necessarily need to be developed independently; the goal(s) can be devised during the session and documented within the progress note.
Treatment Plan Updates Due	The goal(s) for ongoing behavioral health services should be developed during the session and documented within the "Plan" section of the progress note. There is no delineated timeframe, as the chart may never technically close, and clients do not necessarily come in for regularly scheduled visits.
Signature Requirements	For ongoing behavioral health services, it is recommended for the member and behavioral health consultant to sign off on treatment goals to indicate their understanding and agreement.

3. INTENSIVE BEHAVIORAL HEALTH SERVICES

3.1.1. IBHS Individual Services

Initial Treatment Plan Due	Individual Treatment Plan (ITP) must be completed within 30 days of initiation of services
Treatment Plan Updates Due	Within six months of the previous ITP. A new ITP should be completed whenever clinically indicated.
Signature Requirements	Parent or legal guardian (if member under 14 years), member and/or parent or legal guardian (if member 14-17 years); member (if member 18 years or older); staff person completing ITP, clinical director
References	➡ 55 Pa. Code § 1155 ➡ § 5240.22 ➡ OMHSAS-23-01 Act 65 of 2020: Consent to Mental Health Treatment for Minors ➡ CBH IBHS Performance Standards

3.1.2. IBHS ABA Services

Initial Treatment Plan Due	ITP must be completed within 45 days of initiation of services by an individual qualified to provide behavior analytic services or behavior consultation
Treatment Plan Updates Due	Within six months of the previous ITP. A new ITP should be completed whenever clinically indicated.
Signature Requirements	Parent or legal guardian (if member under 14 years), member and/or parent or legal guardian (if member 14-17 years); member (if member 18 years or older); staff person completing ITP/ITP updates, clinical director

References	➡ 55 Pa. Code § 1155 ➡ § 5240.86	➡ OMHSAS-23-01 Act 65 of 2020: Consent to Mental Health Treatment for Minors ➡ CBH ABA Performance Standards 3.0

3.1.3. IBHS Group Services

Initial Treatment Plan Due	ITP must be completed within 30 days of initiation of services by a graduate-level professional	
Treatment Plan Updates Due	Within six months of the previous ITP. A new ITP should be completed whenever clinically indicated.	
Signature Requirements	Parent or legal guardian (if member under 14 years), member and/or parent or legal guardian (if member 14-17 years); member (if member 18 years or older); staff person completing ITP, clinical director	
References	➡ 55 Pa. Code § 1155 ➡ § 5240.96	➡ OMHSAS 18-01 ➡ CBH IBHS Performance Standards

3.1.4. Functional Family Therapy (FFT)

Initial Treatment Plan Due	ITP must be completed within 30 days of initiation of services	
Treatment Plan Updates Due	Within six months of the previous ITP	
Signature Requirements	Parent or legal guardian (if member under 14 years), member and/or parent or legal guardian (if member 14-17 years); member (if member 18 years or older); staff person completing ITP, clinical director	
References	➡ 55 Pa. Code § 1155 ➡ § 5240.22	➡ OMHSAS-23-01 Act 65 of 2020: Consent to Mental Health Treatment for Minors

4. SUBSTANCE USE

4.1. Per Diem Services

4.1.1. Medically Managed Intensive Inpatient Services Withdrawal Management (ASAM 4.0 WM)

Initial Treatment Plan Due	Within 24 hours of admission

Treatment Plan Updates Due	Treatment and rehabilitation plans shall be reviewed and updated at least every 15 days	
Signature Requirements	Member, counselor, and physician	
References	➡ 28 Pa. Code § 709.122 ➡ § 710	➡ § 715.6 (b)(3) ➡ § 715.23 (d) (1) (2)

4.1.2. Medically Managed Intensive Inpatient Services (ASAM 4.0)

Initial Treatment Plan Due	Within 24 hours of admission
Treatment Plan Updates Due	Treatment and rehabilitation plans shall be reviewed and updated at least every 15 days
Signature Requirements	Member and counselor
References	28 Pa. Code § 710.42 (c)

4.1.3. Medically Monitored Inpatient Withdrawal Management (ASAM 3.7 WM)

Initial Treatment Plan Due	Within 24 hours of admission		
Treatment Plan Updates Due	Ongoing, at a frequency relevant to the patient's level of stability and severity of illness		
Signature Requirements	Member, counselor, and physician		
References	➡ 28 Pa. Code §709.42	➡ §709.62	➡ The ASAM Criteria, 3rd Ed., p. 140

4.1.4. Medically Monitored Intensive Inpatient Services (ASAM 3.7)

Initial Treatment Plan Due	Within 15 days of admission
Treatment Plan Updates Due	Treatment and rehabilitation plans shall be reviewed and updated at least every 15 days.
Signature Requirements	Member and counselor at minimum

References	➡ 28 Pa. Code § 710.42	➡ The ASAM Criteria, 3rd Ed. p. 270

4.1.5. Clinically Managed, High-Intensity Residential Services (ASAM 3.5)

Initial Treatment Plan Due	Treatment plan and biopsychosocial assessment are due by the 10th day of participation in the program	
Treatment Plan Updates Due	Treatment and rehabilitation plans shall be reviewed and updated at least every 30 days. For those projects whose client treatment regime is less than 30 days, the treatment and rehabilitation plan, review and update shall occur at least every 15 days.	
Signature Requirements	Member and counselor at minimum	
References	➡ 28 Pa. Code § 709.52	➡ The ASAM Criteria, 3rd Ed., p. 253

4.1.6. Clinically Managed Low-Intensity Residential Services (ASAM 3.1)

Initial Treatment Plan Due	Within 24 hours of admission
Treatment Plan Updates Due	Treatment and rehabilitation plans shall be reviewed and updated at least every 30 days. For members whose treatment regimen is less than 30 days, the treatment and rehabilitation plan shall be reviewed and updated every 15 days.
Signature Requirements	Member and counselor
References	28 Pa. Code § 711.52 (d)

4.2. Ambulatory Services

4.2.1. Outpatient Substance Use (ASAM 1)

Initial Treatment Plan Due	Within 15 days following intake, the clinic's supervisory physician shall review and verify each member's level of care assessment, psychosocial evaluation, and initial treatment plan prior to the provision of any treatment beyond the 15th day following intake.	
Treatment Plan Updates Due	60 days following the date of the initial treatment plan and at the end of every 60-day period during the duration of treatment, the clinic's supervisory physician shall review and update each patient's treatment plan.	
Signature Requirements	Each review and update shall be dated, documented, and signed into the member's record by the clinic's supervisory physician and member.	
References	➡ 55 Pa. Code § 1223.52	➡ 28 Pa. Code § 709

4.2.2. Methadone (ASAM OTP, NTP)

Initial Treatment Plan Due	Following intake and prior to the provision of any services, the clinic's supervisory physician shall perform a comprehensive medical examination on each member to determine the member's diagnoses, initial treatment plan and identify any medical conditions.
Treatment Plan Updates Due	Sixty days following the date of the initial treatment plan and at the end of every 60-day period during the duration of treatment, the clinic's supervisory physician shall review and update each member's treatment plan.
Signature Requirements	Physician, counselor, and member ***Note:*** *It is recommended that all involved in the direct care of the member participate in and sign plans.*
References	➡ 55 Pa. Code § 1223.52 ➡ 32 Pa. B. 5638 ➡ 28 Pa. Code § 715

4.2.3. Intensive Outpatient (IOP, ASAM 2.1)

Initial Treatment Plan Due	Within 15 days following intake, the clinic's supervisory physician shall review and verify each patient's level of care assessment, psychosocial evaluation and initial treatment plan prior to the provision of any treatment beyond the 15th day following intake.
Treatment Plan Updates Due	Sixty days following the date of the initial treatment plan and at the end of every 60-day period during the duration of treatment, the clinic's supervisory physician shall review and update each patient's treatment plan.
Signature Requirements	Each review and update shall be dated, documented, and signed in the patient's record by the Member, counselor, and clinic's supervisory physician.

4.2.4. Substance Use Partial Hospitalization Program (ASAM 2.5)

Initial Treatment Plan Due	Within 30 days
Treatment Plan Updates Due	Treatment and rehabilitation plans should be reviewed and updated at least every 30 days
Signature Requirements	Member and staff
References	28 Pa. Code § 711.82

4.2.5. Substance Use Intensive Case Management

Initial Treatment Plan Due	Within 30 days of the admission date
Treatment Plan Updates Due	Monthly review, comprehensive update every six months
Signature Requirements	Member/guardian, case manager, and case management supervisor
References	*Note: There is not specific guidance for SU ICM, please use the following as guidance:* ➡ 55 Pa. Code § 5221.31 ➡ § 5221.33 ➡ OMHSAS-10-03 Attachment D. Blended Case Management Guidelines

4.2.6. Certified Recovery Specialist (CRS)

Initial Treatment Plan Due	Recovery plan is due within 30 days of written consent of member
Treatment Plan Updates Due	Updated plan is due every six months
Signature Requirements	Member, CRS, recovery support supervisor