

**TITLE 42--PUBLIC HEALTH
CHAPTER IV--HEALTH CARE FINANCING ADMINISTRATION,
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**PART 441--SERVICES: REQUIREMENTS AND LIMITS APPLICABLE TO
SPECIFIC SERVICES—**

**Subpart D--Inpatient Psychiatric Services for Individuals Under Age 21 in
Psychiatric Facilities or Programs**

Sec. 441.150 Basis and purpose.

This subpart specifies requirements applicable if a State provides inpatient psychiatric services to individuals under age 21, as defined in Sec. 440.160 of this subchapter and authorized under section 1905 (a)(16) and (h) of the Act.

Sec. 441.151 General requirements.

Inpatient psychiatric services for recipients under age 21 must be provided--

(a) Under the direction of a physician;

(b) By--

(1) A psychiatric hospital or an inpatient psychiatric program in a hospital, accredited by the Joint Commission on Accreditation of Healthcare Organizations; or

(2) A psychiatric facility which is accredited by the Joint Commission on Accreditation of Healthcare Organizations, the Commission on Accreditation of Rehabilitation Facilities, the Council on Accreditation of Services for Families and Children, or by any other accrediting organization, with comparable standards that is recognized by the State.

(c) Before the individual reaches age 21 or, if the individual was receiving the services immediately before he or she reached age 21, before the earlier of the following--

(1) The date the individual no longer requires the services; or

(2) the date the individual reaches 22; and

(d) Certified in writing to be necessary in the setting in which it will be provided (or is being provided in emergency circumstances) in accordance with Sec. 441.152.

[43 FR 45229, Sept. 29, 1978, as amended at 63 FR 64198, Nov. 19, 1998]

Sec. 441.152 Certification of need for services.

(a) A team specified in Sec. 441.154 must certify that--

(1) Ambulatory care resources available in the community do not meet the treatment needs of the recipient;

(2) Proper treatment of the recipient's psychiatric condition requires services on an inpatient basis under the direction of a physician; and

(3) The services can reasonably be expected to improve the recipient's condition or prevent further regression so that the services will no longer be needed.

(b) The certification specified in this section and in Sec. 441.153 satisfies the utilization control requirement for physician certification in Secs. 456.60, 456.160, and 456.360 of this subchapter.

[43 FR 45229, Sept. 29, 1978, as amended at 61 FR 38398, July 24, 1996]

Sec. 441.153 Team certifying need for services.

Certification under Sec. 441.152 must be made by terms specified as follows:

(a) For an individual who is a recipient when admitted to a facility or program, certification must be made by an independent team that--

(1) Includes a physician;

(2) Has competence in diagnosis and treatment of mental illness, preferably in child psychiatry; and

(3) Has knowledge of the individual's situation.

(b) For an individual who applies for Medicaid while in the facility of program, the certification must be--

(1) Made by the team responsible for the plan of care as specified in Sec. 441.156; and

(2) Cover any period before application for which claims are made.

(c) For emergency admissions, the certification must be made by the team responsible for the plan of care (Sec. 441.156) within 14 days after admission.

Sec. 441.154 Active treatment.

Inpatient psychiatric services must involve "active treatment", which means implementation of a professionally developed and supervised individual plan of care, described in Sec. 441.155 that is--

(a) Developed and implemented no later than 14 days after admission; and

(b) Designed to achieve the recipient's discharge from inpatient status at the earliest possible time.

Sec. 441.155 Individual plan of care.

(a) "Individual plan of care" means a written plan developed for each recipient in accordance with Secs. 456.180 and 456.181 of this chapter, to improve his condition to the extent that inpatient care is no longer necessary.

(b) The plan of care must--

- (1) Be based on a diagnostic evaluation that includes examination of the medical, psychological, social, behavioral and developmental aspects of the recipient's situation and reflects the need for inpatient psychiatric care;
 - (2) Be developed by a team of professionals specified under Sec. 441.156 in consultation with the recipient; and his parents, legal guardians, or others in whose care he will be released after discharge;
 - (3) State treatment objectives;
 - (4) Prescribe an integrated program of therapies, activities, and experiences designed to meet the objectives; and
 - (5) Include, at an appropriate time, post-discharge plans and coordination of inpatient services with partial discharge plans and related community services to ensure continuity of care with the recipient's family, school, and community upon discharge.
- (c) The plan must be reviewed every 30 days by the team specified in Sec. 441.156 to--
- (1) Determine that services being provided are or were required on an inpatient basis, and
 - (2) Recommend changes in the plan as indicated by the recipient's overall adjustment as an inpatient.
- (d) The development and review of the plan of care as specified in this section satisfies the utilization control requirements for--
- (1) Recertification under Secs. 456.60(b), 456.160(b), and 456.360(b) of this subchapter; and
 - (2) Establishment and periodic review of the plan of care under Secs. 456.80, 456.180, and 456.380 of this subchapter.

[43 FR 45229, Sept. 29, 1978, as amended at 46 FR 48560, Oct. 1, 1981; 61 FR 38398, July 24, 1996]

Sec. 441.156 Team developing individual plan of care.

- (a) The individual plan of care under Sec. 441.155 must be developed by an interdisciplinary team of physicians and other personnel who are employed by, or provide services to patients in, the facility.
- (b) Based on education and experience, preferably including competence in child psychiatry, the team must be capable of--
 - (1) Assessing the recipient's immediate and long-range therapeutic needs, developmental priorities, and personal strengths and liabilities;
 - (2) Assessing the potential resources of the recipient's family;
 - (3) Setting treatment objectives; and
 - (4) Prescribing therapeutic modalities to achieve the plan's objectives.
- (c) The team must include, as a minimum, either--
 - (1) A Board-eligible or Board-certified psychiatrist;
 - (2) A clinical psychologist who has a doctoral degree and a physician licensed to practice medicine or osteopathy; or

(3) A physician licensed to practice medicine or osteopathy with specialized training and experience in the diagnosis and treatment of mental diseases, and a psychologist who has a master's degree in clinical psychology or who has been certified by the State or by the State psychological association.

(d) The team must also include one of the following:

(1) A psychiatric social worker.

(2) A registered nurse with specialized training or one year's experience in treating mentally ill individuals.

(3) An occupational therapist who is licensed, if required by the State, and who has specialized training or one year of experience in treating mentally ill individuals.

(4) A psychologist who has a master's degree in clinical psychology or who has been certified by the State or by the State psychological association.