



# COUNTY OF YOLO

## HEALTH AND HUMAN SERVICES AGENCY

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### POLICIES AND PROCEDURES

#### SECTION 5, CHAPTER 5 POLICY 005

#### DAY TREATMENT INTENSIVE AND DAY REHABILITATION

- A. PURPOSE:** To inform Yolo County Health and Human Services Agency (HHSA) staff and its' subcontracted providers of the requirements for Day Treatment Intensive and Day Rehabilitation Services.
- B. FORMS REQUIRED/ATTACHMENTS:** N/A
- C. DEFINITIONS:** N/A
- D. POLICY:** Providers shall be required to request payment authorization for day treatment intensive and day rehabilitation services: 1) in advance of service delivery when day treatment intensive or day rehabilitation will be provided for more than five days per week; 2) at least every three months for continuation of day treatment intensive; 3) at least every six months for continuation of day rehabilitation; and 4) shall also request authorization for mental health services, as defined in California Code of Regulations, title 9, section 1810.227, provided concurrently with day treatment intensive or day rehabilitation, excluding services to treat emergency and urgent conditions as defined in California Code of Regulations, title 9, sections 1810.216 and 1810.253. These services shall be authorized with the same frequency as the concurrent day treatment intensive or day rehabilitation services.

Additionally, day treatment intensive and day rehabilitation providers shall be required to meet the requirements of Title 9, CCR Sections 1840.318, 1840.330, 1840.350 and 1840.352.

Payment authorization functions shall not be delegated to providers.

**E. PROCEDURES:**

1. Providers shall, at minimum, follow the day treatment intensive and day rehabilitation service components:
  - a. Community meetings. These meetings shall occur at least once a day to address issues pertaining to the continuity and effectiveness of the therapeutic milieu, and shall actively involve staff and beneficiaries. Relevant discussion items include, but are not limited to: the day's schedule, any current event, individual issues that beneficiaries or staff wish to discuss to elicit support of the group and conflict resolution. Community meetings shall:
    - i. For day treatment intensive, include a staff person whose scope of practice includes psychotherapy.

- ii. For day rehabilitation, include a staff person who is a physician, a licensed/waivered/registered psychologist, clinical social worker, or marriage and family therapist; and a registered nurse, psychiatric technician, licensed vocational nurse, or mental health rehabilitation specialist.
- b. Therapeutic milieu. This component must include process groups and skill-building groups. Specific activities shall be performed by identified staff and take place during the scheduled hours of operation of the program. The goal of the therapeutic milieu is to teach, model, and reinforce constructive interactions by involving beneficiaries in the overall program. For example, beneficiaries are provided with opportunities to lead community meetings and to provide feedback to peers. The program includes behavior management interventions that focus on teaching self-management skills that children, youth, adults and older adults may use to control their own lives, to deal effectively with present and future problems, and to function well with minimal or no additional therapeutic intervention. Activities include, but are not limited to, staff feedback to beneficiaries on strategies for symptom reduction, increasing adaptive behaviors, and reducing subjective distress.
- c. Process groups. These groups, facilitated by staff, shall assist each beneficiary to develop necessary skills to deal with his/her problems and issues. The group process shall utilize peer interaction and feedback in developing problem-solving strategies to resolve behavioral and emotional problems. Day rehabilitation may include psychotherapy instead of process groups, or in addition to process groups.
- d. Skill-building groups. In these groups, staff shall help beneficiaries identify barriers related to their psychiatric and psychological experiences. Through the course of group interaction, beneficiaries identify skills that address symptoms and increase adaptive behaviors.
- e. Adjunctive therapies. These are therapies in which both staff and beneficiaries participate. These therapies may utilize self-expression, such as art, recreation, dance, or music as the therapeutic intervention. Participants do not need to have any level of skill in the area of self-expression, but rather be able utilize the modality to develop or enhance skills directed toward achieving beneficiary plan goals. Adjunctive therapies assist the beneficiary in attaining or restoring skills which enhance community functioning including problem solving, organization of thoughts and materials, and verbalization of ideas and feelings. Adjunctive therapies provided as a component of day rehabilitation or day treatment intensive are used in conjunction with other mental health services in order to improve the outcome of those services consistent with the beneficiary's needs identified in the client plan.
- f. Day Treatment Intensive shall additionally include:
  - i. Psychotherapy. Psychotherapy means the use of psychological methods within a professional relationship to assist the beneficiary or beneficiaries to achieve a better psychosocial adaptation, to acquire a greater human realization of psychosocial potential and adaptation, to modify internal and external conditions that affect individual, groups, or communities in respect



the total time (number of hours and minutes) the beneficiary actually attended the program that day. In cases where absences are frequent, it is the responsibility of HHSA to ensure that the provider re-evaluates the beneficiary's need for the day rehabilitation or day treatment intensive program and takes appropriate action.

4. **Documentation Standards.** HHSA shall ensure day treatment intensive and day rehabilitation documentation meets the documentation standards in accordance to federal and state requirements. The documentation shall include the date(s) of service, signature of the person providing the service (or electronic equivalent), the person's type of professional degree, licensure or job title, date of signature and the total number of minutes/hours the beneficiary actually attended the program. For day treatment intensive these standards include daily progress notes on activities and a weekly clinical summary reviewed and signed by a physician, a licensed/waivered/registered psychologist, clinical social worker, or marriage and family therapist, or a registered nurse who is either staff to the day treatment intensive program or the person directing the services.
5. HHSA shall ensure that day treatment intensive and day rehabilitation service providers have at least one contact per month with a family member, caregiver or other significant support person identified by an adult beneficiary, or one contact per month with the legally responsible adult for a beneficiary who is a minor. This contact may be face-to-face, or by an alternative method (e.g., e-mail, telephone, etc.). Adult beneficiaries may decline this service component. The contacts should focus on the role of the support person in supporting the beneficiary's community reintegration. HHSA shall ensure that this contact occurs outside hours of operation and outside the therapeutic program for day treatment intensive and day rehabilitation.
6. **Written Program Description.** A written program description for day treatment intensive and day rehabilitation shall be required by providers. The written program description must describe the specific activities of each service and reflects each of the required components of the services as described in this section. Yolo County HHSA shall review the written program description for compliance with this section with prior to the date the provider begins delivering day treatment intensive and day rehabilitation.
7. **Continuous Hours of Operation.** HHSA shall ensure that the provider applies the following when claiming for day treatment intensive and day rehabilitation services:
  - a. A half day shall be billed for each day in which the beneficiary receives face-to-face services in a program with services available four hours or less per day. Services must be available a minimum of three hours each day the program is open.
  - b. A full-day shall be billed for each day in which the beneficiary receives face-to-face services in a program with services available more than four hours per day.
  - c. Although the beneficiary must receive face to face services on any full-day or half-day claimed, all service activities during that day are not required to be face-to-face with the beneficiary.

- d. The requirement for continuous hours of operation does not preclude short breaks (for example, a school recess period) between activities. A lunch or dinner may also be appropriate depending on the program's schedule. HHSA shall not conduct these breaks toward the total hours of operation of the day program for purposes of determining minimum hours of service.

**F. REFERENCES:**

1. 9 C.C.R. §1810.227
2. 9 C.C.R. §1810.216
3. 9 C.C.R. §1810.253
4. 9 C.C.R. §1840.318
5. 9 C.C.R. §1840.330
6. 9 C.C.R. §1840.350
7. 9 C.C.R. §1840.352.

Approved by:



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Karen Larsen, Director  
Yolo County Health and Human Services Agency

2/13/18

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Date