

CENTENE ADVANCED BEHAVIORAL HEALTH – CLINICAL TRAINING

Treatment Planning for Mental Health Diagnoses

Microlearning



Documentation Best Practices

- ☐ Symptoms must match diagnosis(es)
- ☐ Document frequency, duration, and severity of symptoms
- ☐ Treatment modalities must align with symptomology and diagnoses
- ☐ Progress notes should be tied to treatment goals
- ☐ Focus on what interventions or techniques were used and how the member responded





Documentation Best Practices

- ☐ State what the plans are for ongoing treatment. Be specific.
- ☐ Include exact start and stop times vs. appointment times.
- ☐ Document progress in measurable or observable terms.
- ☐ Identify treatment barriers and how these barriers are being addressed.

Is Treatment Medically Necessary?

- Do the services provided represent least restrictive level of care available that can safely address the member's needs?
- Is there adequate documentation that member is making progress in treatment, as evidenced by reduction in symptoms and improvement in psychosocial functioning?
- Does the clinical information provided clearly document the severity of the functional impairments the member is experiencing as a result of their mental health diagnosis(es)?
- Are services being titrated in a manner that supports a planned termination and individualized aftercare/follow-up plan?

***For children and adolescents, remember to document the involvement of at least one adult caregiver throughout the treatment process.**

SMART Goals

SPECIFIC

Mary will decrease anger outbursts from daily to 2 times a week.

MEASURABLE

Mary will report a PHQ9 score of 7 compared to 12 currently.

ACHIEVABLE

Mary will practice deep breathing techniques 3 times a week (versus daily)

RELEVANT

Mary will journal her anxiety symptoms at least 3x week and will process journal entries during weekly sessions

TIME BOUND

Over the next 6 months, Mary's anger outbursts will decrease to 1x week for at least 3 consecutive weeks.

Treatment Plan Best Practices

DO's

- Develop it collaboratively with the member.
- Document date goals were initiated (open date needs to remain the same throughout the course of treatment).
- Document how goals show incremental progress or regression.

DON'Ts

- Avoid acronyms or too much clinical jargon.
- Avoid too many goals at once.
- Avoid percentages or things that are difficult to measure
- Do not include physical health goals unless relevant to MH diagnosis.

Reasons for Titrating Services

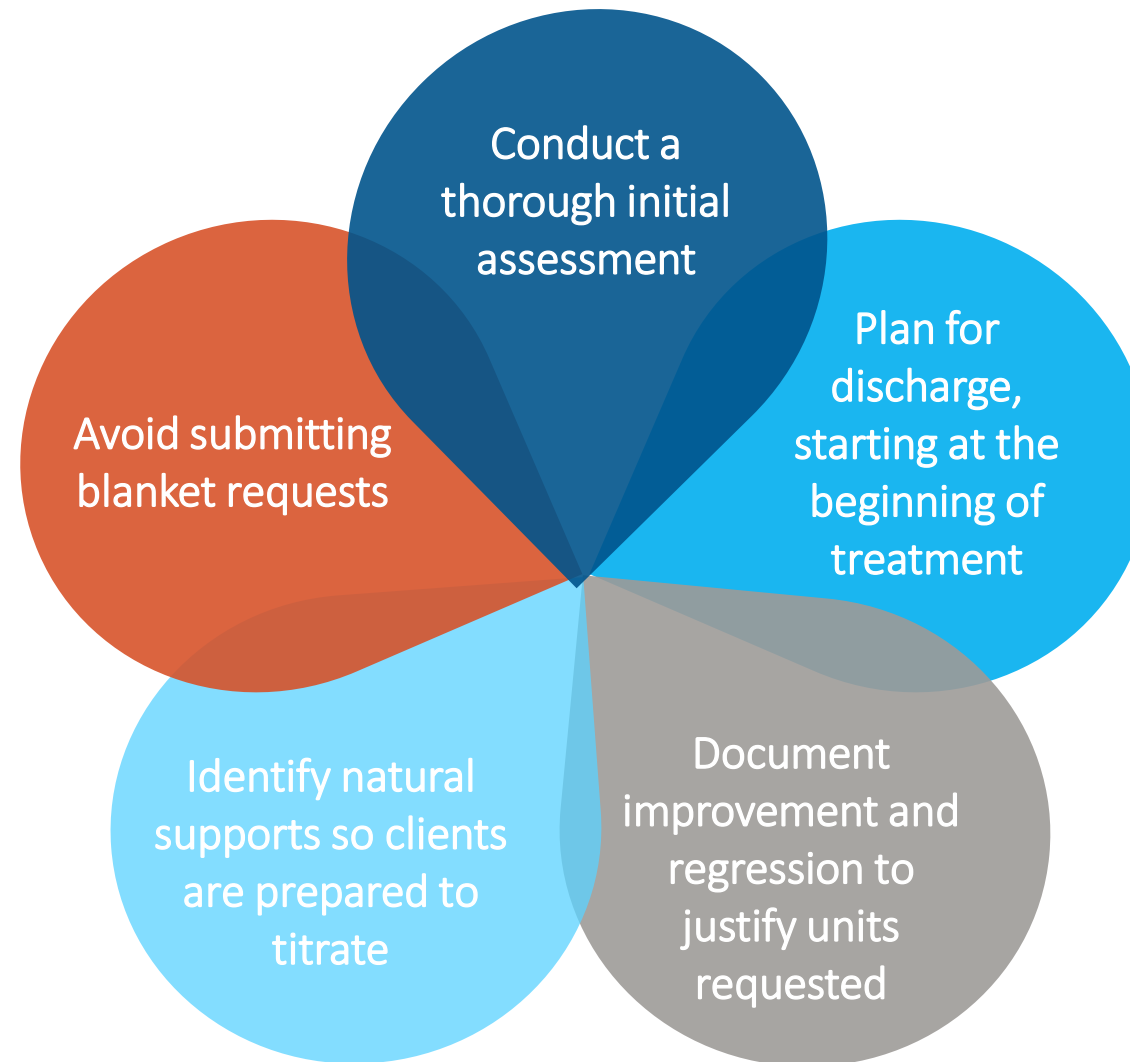
Helps promote independence

Helps ensure individualized treatment

Helps discourage unhealthy attachments to providers

Prevents over utilization of services

Best Practices for Titrating Services



Barriers to Titrating Services

Member

- Fear that symptoms will get worse
- Become accustomed to a routine
- Miss the support from providers

Environmental

- Pandemic
- Financial problems
- Death or loss
- Separation or divorce
- Medical issues
- Crisis

Provider

- Feelings of countertransference
- Productivity requirements (i.e. billable hours)



Thank You!

CENTENE ADVANCED BEHAVIORAL HEALTH

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