



INPATIENT EATING DISORDERS SERVICES

PURPOSE

Performance specifications are intended to enhance MassHealth Enrollee experience and outcomes by promoting transparency and consistency across Plans and providers. Performance specifications are expectations imposed on providers who contract for these specific and related services. Information contained in this document is based on publicly available documents, Plan expectations, your contract, and MassHealth guidance. This information should be and will look materially like any other MassHealth contracted Plan. Performance specifications, your provider manual, and other requirements can be found at providerexpress.com.

Providers contracted for this level of care or service are expected to comply with applicable regulations set forth in the Code of Massachusetts Regulations, and all requirements of these service-specific performance specifications. In addition, providers of all contracted services are held accountable to the General Performance Specifications. Where there are differences between the service-specific and General Performance Specifications, the service-specific specifications take precedence.

OVERVIEW

Inpatient Eating Disorders Services represent the most intensive level of psychiatric care for adults and adolescents with eating disorder diagnoses. In addition to all clinical service components provided within Inpatient Mental Health Services, the program provides a structured treatment milieu, clinical expertise, intervention, and evidence-based approaches specifically tailored to the treatment of eating disorders. The goal of these services is to avoid eating disordered behaviors such as food restricting, purging, over-exercising, or use of laxatives/diet pills/diuretics, to avoid imminent serious harm due to medical consequences or co-morbid medical or psychiatric complications such as complications of refeeding syndrome.

The following Inpatient Eating Disorders Services performance specifications are a subset of the Inpatient Mental Health Services performance specifications. As such, Inpatient Eating Disorders Services providers agree to adhere to both the Inpatient Mental Health Services performance specifications and to the Inpatient Eating Disorders Services performance specifications contained within. Where there are differences between the Inpatient Mental Health Services and Inpatient Eating Disorders Services performance specifications, these Inpatient Eating Disorders Services specifications take precedence.

SERVICE COMPONENTS

1. The provider ensures that all service components required in the Inpatient Mental Health Services performance specifications are provided to Enrollees enrolled in Inpatient Eating Disorders Services. Additionally, the provider ensures the following required service components are provided:

- a) Medical services provided by physicians who are internists with a specialty in eating disorders
 - b) Peer support and/or other recovery-oriented services
 - c) Integrated treatment, discharge, and aftercare planning
 - d) Eating disorder and recovery model milieu
 - e) Nutritionist services
2. The provider admits and has the capacity to treat Enrollees who have dual psychiatric and eating disorder diagnoses.

STAFFING REQUIREMENTS

1. The provider complies with the staffing requirements of the applicable licensing body, the staffing requirements in the Plan service-specific performance specifications and the credentialing criteria outlined in your provider manual that can be found at providerexpress.com.
2. The provider ensures that the attending psychiatrist has previous training, experience, and demonstrated expertise in treating individuals with eating disorders, with a minimum of five years' experience in the direct treatment of individuals with eating disorders.
3. The program utilizes a multi-disciplinary staff with established skills, training, and/or expertise in the integrated treatment of eating disorders, and including adequate psychiatric, nursing, social work, credentialed nutritionist and counseling staff, and clinical assistant/nurses' aide staff to ensure that all required services are provided, and performance specifications are met.
4. The provider ensures that mandatory training related to the clinical needs of this specialty population are available for all staff directly responsible for providing any treatment components during an Enrollee's stay to ensure clinical competency among the treatment team. Trainings include but are not limited to the assessment and treatment of eating disorders and co-occurring psychiatric and eating disorders; phases of the recovery process (acute stabilization, engagement, active treatment to maintain stabilization, and wellness and recovery); integrated treatment approaches including integration with primary care; and family systems issues related to the treatment of eating disorders.

SERVICE, COMMUNITY AND OTHER LINKAGES

None

PROCESS SPECIFICATIONS

Assessment, Treatment Planning and Documentation

1. At the time of admission, a nursing assessment is completed.
2. All required assessments include the assessment of the Enrollee's eating disorder, co-occurring psychiatric and eating disorders, and potential medical complications.
3. Arrangements are made to obtain appropriate laboratory tests and cardiac monitoring, when indicated, and physicians are available for consultation relative to medical complications, if any.

4. The provider assigns each Enrollee a primary clinician and/or treatment team that develops a treatment and a rehabilitation and recovery program and coordinates ongoing treatment interventions for his or her eating disorder(s).
5. All treatment plans and treatment plan reviews and updates include goals and interventions specific to the Enrollee's eating disorder, co-occurring psychiatric and eating disorders, and potential medical complications.
6. A comprehensive, structured treatment program is in operation, which, at a minimum, includes three hours or more per day of psycho-educational groups on the psychological and medical effects of eating disorders, related mental health issues, and the complications associated with dual recovery.

Discharge Planning and Documentation

1. The provider ensures that all discharge planning activities address eating disorder recovery issues, and that the discharge and/or aftercare plan includes aftercare services that address eating disorder recovery.
2. The provider specifically ensures that the Enrollee's primary care clinician (PCC) is involved in discharge planning and is provided with a copy of the discharge summary (or other such document(s) that contain the required elements) within required timeframes.

QUALITY MANAGEMENT

1. The provider will develop and maintain a quality management plan that is consistent with their contractual responsibilities to Optum, and which utilizes appropriate measures to monitor, measure, and improve the activities and services it provides.
2. A continuous quality improvement process is utilized and may include outcome measures and satisfaction surveys to measure and improve the quality of care and services delivered to Enrollees, including youth and their families.
3. Clinical outcomes data must be made available to Optum upon request and must be consistent with the performance specifications of this service.
4. Providers must report any adverse incidents and other reportable events that occur to the relevant authorities.