

Ancillary Inpatient Mental Health Services

Issue Date: December 29, 1982

Authority: 32 CFR 199.4(b)(1), (b)(6), and (c)(3)(ix)(B)(2)

Revision: C-1, March 10, 2017

1.0 POLICY

1.1 Itemized mental health services, other than individual and group therapy, which are provided as an incidental part of an inpatient treatment plan may be covered. This would include miscellaneous ancillary therapy modalities such as recreational therapy, and art therapy.

1.2 Other therapy sessions such as family therapy, social services group therapy, adapt groups and occupational therapy may be covered when rendered as part of treatment related to an otherwise covered inpatient stay and when provided by an authorized individual provider.

Note: Under 32 CFR 199.4(c)(3)(ix) individual and group psychotherapy provided by a qualified professional (psychologist, psychiatrist, etc.) is generally limited to no more than five one-hour therapy sessions in any seven day period. Additional sessions can be covered based upon a finding of medical or psychological necessity.

1.3 Initial evaluations are considered as other medical services and may be authorized. They must be directly related to the diagnosis and/or definitive set of symptoms and rendered by a member of the institution's medical and/or professional staff (either salaried or contractual) and billed for by the hospital.

1.4 Other ancillary services such as pharmacy, x-rays, and laboratory charges are payable and customarily billed separately on the institutional claim form.

Note: Therapeutic programs or regimens, which may include those services outlined in the policy section above, when provided by authorized individual providers who are employees of the institution, are not subject to the Regulation limitations for inpatient psychotherapy.

2.0 EXCLUSION

Leisure time programs, outings, and movies.

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