

# Clinical program requirements

## For behavioral health feeding and eating disorder partial hospitalization and intensive outpatient programs

For Blue Cross commercial, Medicare Plus Blue<sup>SM</sup>,  
Blue Care Network commercial and BCN Advantage<sup>SM</sup>

August 2025

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This document shows the specifications for behavioral health feeding and eating disorder partial hospitalization programs, or PHPs, and intensive outpatient programs, or IOPs, for providers treating any of the members listed below with health plan benefits that cover the treatment of mental health disorders:

- Blue Cross and Blue Shield of Michigan commercial members
- Medicare Plus Blue members
- Blue Care Network commercial members
- BCN Advantage members

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## Partial hospitalization programs

A partial hospitalization program provides daily psychosocial milieu treatment that includes group therapy, individual therapy, family therapy, expressive therapies, psychoeducational training and other types of therapy, as appropriate, as the primary treatment modalities.

### Where partial hospitalization treatment takes place

A partial hospitalization program to treat members with mental health or substance use disorders or both is provided in a hospital or in a freestanding state-licensed and accredited outpatient psychiatric care facility.

**Important:** Before providing partial hospitalization treatment services for Blue Cross or BCN members, providers must do or have done one of these:

- Must have been approved by Blue Cross or BCN as a hospital
- For members with mental health disorders: Must meet the Blue Cross and BCN requirements to qualify as an outpatient psychiatric care facility. For information about those requirements, refer to the document [General Outpatient Psychiatric Care Facilities information](#) at [bcbsm.com](http://bcbsm.com).

### General requirements for providing PHP treatment

Blue Cross and BCN require that PHP treatment take place a minimum of 5 days a week for 5-6 hours a day.

Note: It's recommended that PHP treatment for eating disorders take place a minimum of 5 days/week for 8 hours/day.

The facility must be able to provide supervision and treatment as outlined below:

- Psychiatric evaluation within 24 hours of admission (face to face or virtual)
- Psychosocial assessment on day 1
- Substance use evaluation within the first 2 days, if indicated
- Medication reconciliation on day 1
- Medication review advised frequency: daily (1 time per week, at minimum)
- Clinical assessment/review at least daily
- Individual therapy: 1 session per day

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- Group therapy: 2 sessions per day
- Family therapy: 1 to 2 times weekly (could be substituted for individual therapy)
- Expressive/mindfulness/activities therapy: 1 session per day
- Toxicology screen and self-help/12-step/education groups, as needed
- Care coordination with other care providers and social services

PHP services can be provided at different levels, as follows:

- Intensive level (0913): Services are provided for 21 hours or more per week, on 5 days per week for 5-6 hours per day
- Less intensive level (0912): Services are provided for 20 hours or less per week, on 5 days per week for 4 hours per day

### **Specialty requirements for providing PHP treatment for feeding and eating disorders**

Note: All services listed below are included in the reimbursement of PHP treatment.

In addition to the general requirements for providing PHP treatment, for the treatment of feeding and eating disorders, the facility must be able to provide supervision and treatment as outlined below:

- Physical care:
  - Intake physical examination (the facility will accept an exam by the member's primary care provider)
  - Physiological monitoring by a registered nurse
  - Continuous physiological monitoring devices
- Nutritional care:
  - Intake nutritional assessment with a registered dietitian (ordered by the member's primary care provider)
  - Meal delivery - exposure therapy/monitoring
  - Nutritional onboarding for meal planning
  - Ongoing nutritional sessions with a registered dietitian

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- Behavioral counseling, exposure therapy - supported meals daily
- Therapy:
  - Biopsychosocial (BPS) assessment
  - Intake individual therapy session
  - Weekly individual therapy sessions
  - Ongoing group therapy sessions - 50+ groups
  - Intake family therapy
  - Ongoing family therapy

### **Ancillary services to supplement PHP treatment**

The following ancillary services are designed to support the member during and after PHP treatment:

- Complex chronic care management:
  - Partnership meeting with the member's family
  - Collaboration and coordination between providers and support staff (does not include the member)
  - Case management
- Psychotherapy and medical reviews:
  - Evaluation and management (E/M) with "add on" code for psychotherapy
  - Psychiatric diagnostic evaluation with medical services (procedure code \*90792)
  - Specialty psychotherapy that's not included in PHP services (e.g., ERP, DBT, EMDR)
  - Psychological testing
- Peer support services:
  - Mentorship and advocacy for the member
  - Assisting the member with system navigation, coping strategies and resource connection while working alongside treatment clinicians

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### Prior authorization requirements for PHP treatment

For PHP treatment, Blue Cross and BCN require providers to submit prior authorization requests electronically or by phone:

- For members whose care is managed by Blue Cross Behavioral Health<sup>SM</sup>, refer to the document [Blue Cross Behavioral Health: Frequently asked questions for providers](#) for information about requesting prior authorization.

Blue Cross Behavioral Health uses medical necessity criteria to make determinations on prior authorization requests. Providers can access these criteria in the Behavioral Health Services section of these webpages at [bcbsm.com](http://bcbsm.com):

- Commercial: [Services That Need Prior Authorization](#)
- Medicare Advantage: [Medicare Advantage Prior Authorization](#)
- For Blue Cross commercial members whose behavioral health care is managed by an entity other than Blue Cross Behavioral Health, refer to the list of [Utilization Management and Care Management Opt-outs](#).

Note: Some groups administer their substance use disorder treatment benefit under a managed care program that requires the use of network providers.

Requests must meet the criteria for medical necessity, use and quality.

If prior authorization is not obtained:

- Participating or in-network facilities that provide the care cannot bill the member for the cost of the admission and services.
- Nonparticipating or out-of-network facilities that provide the care may require the member to pay for the admission and services.

### Intensive outpatient programs

Intensive outpatient programs provide treatment that's more intensive than traditional outpatient therapy but not as intensive as that provided through a partial hospitalization level of care.

### General requirements for providing IOP treatment

An IOP typically provides treatment at least 3 days a week for 3 hours a day.

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IOPs provide treatment for individuals with moderate to severe behavioral health disorders (mental health disorders or substance use disorders or both) and related impairments who require interventions associated with improvement in level of functioning, skill building and symptom management.

An IOP must be able to provide supervision and treatment as outlined below:

- Psychosocial assessment at first visit
- Substance use evaluation by second visit
- Medication reconciliation at first visit
- Individual therapy: 1 session per week
- Group therapy: 3 sessions per week
- Family therapy: 1 session per week (could be substituted for individual therapy)
- Psychoeducation: 3 sessions per week
- Expressive therapies/mindfulness/activities at least 1 time per week
- Psychiatric or medication evaluation as needed
- Toxicology screen and self-help/12-step/education groups, as needed
- Care coordination with other providers and social services

### **Specialty requirements for providing IOP treatment for feeding and eating disorders**

Note: All services listed below are included in the reimbursement of IOP treatment.

In addition to the general requirements for providing IOP treatment, for the treatment of feeding and eating disorders, the IOP must be able to provide supervision and treatment as outlined below:

- Physical care:
  - Intake physical examination (the IOP will accept an exam by the member's primary care provider)
  - Physiological monitoring by a registered nurse
  - Continuous physiological monitoring devices

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- Nutritional care:
  - Intake nutritional assessment with a registered dietician (ordered by the member's primary care provider)
  - Meal delivery – exposure therapy/monitoring
  - Nutritional onboarding for meal planning
  - Ongoing nutritional sessions with a registered dietician
  - Behavioral counseling, exposure therapy - supported meals daily
- Therapy:
  - Biopsychosocial (BPS) assessment
  - Intake individual therapy session
  - Weekly individual therapy sessions
  - Ongoing group therapy sessions - 50+ groups
  - Intake family therapy
  - Ongoing family therapy

### **Ancillary services to supplement IOP treatment**

The following ancillary services are designed to support the member during and after IOP treatment:

- Complex chronic care management:
  - Partnership meeting with the member's family
  - Collaboration and coordination between providers and support staff (does not include the member)
  - Case management
- Psychotherapy and medical reviews:
  - Evaluation and management (E/M) with “add on” code for psychotherapy
  - Psychiatric diagnostic evaluation with medical services (procedure code \*90792)
  - Specialty psychotherapy not included in PHP services (e.g., ERP, DBT, EMDR)

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- Psychological testing
- Peer support services:
  - Mentorship and advocacy for the member
  - Assisting the member with system navigation, coping strategies and resource connection while working alongside treatment clinicians

### Prior authorization requirements for IOP treatment

Intensive outpatient program treatment doesn't require prior authorization.

## Annual reporting of PHP and IOP services for feeding and eating disorders

Blue Cross and BCN use information documented by providers to compile annual reports that address the results of treatment received through PHP and IOP programs. The following information is used:

- Members served:
  - Volume
  - Diagnosis
  - Age range
  - Average length of stay (ALOS)
  - Disposition/aftercare
- Member reported outcomes:
  - Eating disorder symptoms (e.g., Eating Disorder Examination-Questionnaire (EDE-Q) or similar)
  - Quality of life impact (e.g., Eating Disorder Quality of Life (EDQOL) or similar)
  - Risk assessment (Columbia Suicide Severity Rating Scale (C-SSRS) or similar)
  - Impact on depressive symptoms (PHQ-9)
  - Impact on anxiety symptoms (GAD-7, State Trait Anxiety Inventory (STAI) or similar)



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- Patient satisfaction (feedback related to the following care: medical, nursing, dietary, therapy)
- Weight restoration/loss:
  - Impacts on weight, BMI:
    - Starting BMI
    - Percentage of members making progress in obtaining stabilized weight within one standard deviation of normal (minimum 21.25 and maximum 35.26 BMI)

## Eligibility for reimbursement

For partial hospitalization program and intensive outpatient program services to be eligible for reimbursement by Blue Cross or BCN:

- For providers in Michigan: The provider must participate with Blue Cross or BCN or both.
- For providers outside of Michigan: The provider must participate with their local Blue Cross Blue Shield plan.

Providers must always check a member's coverage to see if it includes PHP or IOP treatment benefits for mental health or substance use disorders. Providers should use our provider portal ([availity.com](https://availity.com)\*) to check each member's benefits and eligibility and to understand specific policy limitations.

## Services that are covered

The program services listed below are eligible for reimbursement under the mental health and substance use disorder treatment benefits:

- Services provided by facility staff
- Individual psychotherapeutic treatment
- Family counseling for members of a member's family
- Group psychotherapeutic treatment
- Prescribed drugs given by the facility in connection with the member's treatment plan

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### Services that aren't covered

Blue Cross and BCN don't pay for the following services under mental health and substance use disorder treatment benefits:

- Staff consultations required by a facility's or program's rule
- Marital counseling
- Services provided by a facility or other provider located in Michigan that does not participate with Blue Cross or BCN
- Services provided by a facility or other provider located outside of Michigan that does not participate with its local Blue Cross Blue Shield plan
- A PHP admission that has not received prior authorization before the admission occurs
- Services that are not focused on improving the member's functioning
- Services that are primarily for the purpose of maintaining long-term gains made by the member while in another treatment program
- Services, treatment or supplies that are court ordered or related to a court order
- Milieu therapies, such as wilderness programs, supportive housing or group homes
- Custodial care
- Diversional therapy
- Treatment or programs for sex offenders or perpetrators of sexual or physical violence
- Services to hold or confine a member under chemical influence when the member does not require medical treatment
- Dispensing methadone or testing urine specimens, unless therapy, counseling or psychological testing is provided
- Services provided beyond the period necessary for care and treatment
- Extra charges for:
  - Group psychotherapy or counseling that lasts more than 90 minutes
  - Individual therapy or counseling that lasts more than 90 minutes

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- Repeated services (such as a redundant didactic presentation or physical exam when the report of one performed within three months is available and with no reason to expect a change in the member's condition)
- Continued stay in a rehabilitation program without documentation of a thorough evaluation, individualized treatment and convincing justification
- Services or continued stay after the physician discharges the member from a treatment program
- Admission or continued stay in rehabilitation when participation is initiated or prolonged solely for socioeconomic, domestic or housing purposes
- Services provided when the member fails to be engaged or is not participating, or both, after a reasonable period of time
- Nonmedical services including, but not limited to, enrichment programs, dance therapy, art therapy, music therapy, equine therapy, yoga and other movement therapies, ropes courses, guided imagery, consciousness raising, socialization therapy, social outings and educational or preparatory courses or classes.

Note: These services may be paid as part of a treatment program. They are not payable separately.

## Information about other types of behavioral health treatment

Information about the clinical program requirements for other types of treatment can be found in these documents:

- [Adult intensive and child intensive services](#)
- [Urgent care and crisis services](#)
- [Opioid treatment programs](#)
- [Residential psychiatric treatment services](#)
- [Residential treatment for substance use disorders](#)

Use this document to access links to all requirements documents: [Various behavioral health programs and services](#).

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## Additional behavioral health resources

For more behavioral health resources, refer to these webpages on **[ereferrals.bcbsm.com](https://ereferrals.bcbsm.com)**:

- [Blue Cross Behavioral Health](#)
- [BCN Behavioral Health](#)

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