Levels of Mental Health Care Descriptions (Lowest to Highest)

The decision to enter treatment can be difficult. Sometimes, people seek out treatment on their own, and at other times, treatment may be forced upon someone who is unable to make the choice for themselves. Treatment begins with a full evaluation of the person's current mental health and safety concerns. After this evaluation, a mental health professional will recommend what type of treatment will be most helpful for the person to return to their normal level of functioning.

Outpatient Care

12-Step Programs (Community-based and free)

- Includes programs such as Depressed Anonymous, Emotions Anonymous and the National Alliance on Mental Illness (NAMI)
- Typically, very useful when trying to achieve optimal mental health
- Allows opportunity for contact with individuals with many years of recovery
- Offers support and strategies for a successful recovery

Routine Outpatient Care (ROC)

- Consists of three types of care:
 - o **Individual counseling –** includes counseling sessions with a therapist
 - Medication evaluation and management includes visits with a psychiatrist or nurse practitioner to determine if medication would be helpful
 - o **Group therapy** includes weekly group sessions with other people with mental health issues. In group therapy, people often learn from one another's experiences.

Intensive Outpatient Program (IOP)*

- Structured treatment that teaches how to manage stress, and better cope with emotional and behavioral issues
- May include group, individual, and family therapy when appropriate
- Consists of frequent visits (usually 3-5 days per week) and an average of 3-4 hours of treatment per day for a set period (often 4-6 weeks, depending on the program)
- Many programs are structured so individuals may work and continue with normal daily routines
- The advantage of this type of program is that people have the support of the program, along with other people working on similar issues

Partial Hospitalization*

- Intense structured program
- Typically consists of 5-7 days per week for 6 hours each day
- Similar to IOP, includes group, individual, and family therapy when appropriate
- Often includes an evaluation by a psychiatrist, who may prescribe or adjust medications
- Often recommended for those who have actively participated in lower levels of care, yet continue to experience serious emotional and behavioral problems
- Beneficial for those at risk of hospitalization, or as a step-down for those who have been hospitalized

Inpatient Care

Inpatient Acute Care*

- Intended for people who need 24-hour care and daily doctor visits in a hospital setting to stabilize psychiatric issues
- Often recommended for people who aren't able to care for themselves, or may be a risk to the safety and well-being of themselves or others
- Can last for a few days
- Goal is to stabilize a crisis
- Includes group therapy and meeting with a team of professionals, including a psychiatrist
- A family session is important prior to discharge to discuss aftercare plans

Inpatient Residential*

- Should only be considered when all available and appropriate outpatient approaches, including intensive outpatient treatment and partial, have been tried first
- Intended to be a short-term placement to stabilize the person until they can return to the community
- Treatment should be as close to the person's home as possible
- Intended for people who do not need medical attention
- · Not appropriate for people who are unmotivated for change and recovery
- Primary treatment offered is group, individual, and family therapy in a supportive environment f Should include weekly family therapy
- Cigna does not authorize "programs", but rather appropriate clinical care that is indicated based on medical necessity criteria. Wilderness programs are not a covered service.

Expectations of Treatment

Treatment expectations vary from program to program and from person to person. An inpatient level of care is to help resolve an urgent and life-threatening crisis situation.

The best way for treatment to be effective is to be involved in your treatment. When people are motivated for treatment and committed to working on their mental health issues, results tend to be more positive.

The insurance will work with treatment facilities and programs to make sure that clients are receiving the most appropriate and best treatment possible.

Family Dynamics

In addition to facing the challenges of daily life, it's common for family and loved ones of people with a mental illness to experience feelings of depression and hopelessness. They may also try to cope with the situation in unhealthy ways. In almost all cases, these patterns of behavior are accompanied by the best of intentions, as loved ones want to help the person.

Family members may have to take on a role for which they are not prepared. They may be concerned for the person's safety and want them to be in a protective environment where they know they are safe. In addition, beliefs about the causes, symptoms, and treatment of mental illness often vary.

Programs often include family components in the typical course of treatment. Family involvement is important to educate relatives, learn new ways of operating within the family, help them cope better with the person's illness, and to discuss role changes within the family.

When to Consider a Higher Level of Care

A higher level of care should be considered in the following situations:

- When a current lower level of care (such as outpatient treatment) isn't able to address the needs of the person receiving treatment
- If a person's level of functioning continues to decrease, even though they have been actively participating in a lower level of care