<table>
<thead>
<tr>
<th>Service Name</th>
<th>CRISIS OUTPATIENT PSYCHOTHERAPY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting</td>
<td>Outpatient crisis services are rendered in a professional office, clinic, home, or other appropriate environment conducive to the provision of psychotherapy service.</td>
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<td>Facility License</td>
<td>As required by DHHS Division of Public Health</td>
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<td>Basic Definition</td>
<td>Crisis outpatient individual or family therapy is an immediate, short-term treatment service provided to an individual.</td>
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| Service Expectations | - Limited to two sessions. If services are to continue, the provider shall complete an IDI and develop a treatment plan if one has not already been completed.  
- Includes active family involvement unless contraindicated.  
- Services will be trauma informed and sensitive to potential personal safety risks such as suicidal intention.  
- The therapist/provider will coordinate care with the individual’s primary medical provider and the therapy provider if ongoing therapy is authorized.  
- The intervention/safety plan identifies the crisis with steps for further resolution, outlines an individualized safety plan for the individual and/or family, and identifies additional formal and informal supports. The clinician will assist in making appropriate referrals.  
- All staff are to be educated/trained in recovery principles and trauma informed care. |
| Length of Service | An individual is eligible to receive crisis outpatient services of no more than two sessions per episode of crisis. |
| Staffing          | The following providers may provide this service:  
- Physician/ Psychiatrist  
- Physician Assistant  
- Advanced Practice Registered Nurse (APRN)  
- Licensed Psychologist  
- Provisionally Licensed Psychologist  
- Licensed Independent Mental Health Practitioner (LIMHP)  
- Licensed Mental Health Practitioner (LMHP)  
- Provisionally Licensed Mental Health Practitioner (PLMHP) |
| Desired Individual Outcome | - The individual is able to remain stable in the community without this treatment.  
- The individual will receive services to address safety and crisis resolution. |
| Admission guidelines | - The individual demonstrates symptomatology consistent with a DSM (current edition) diagnosis which requires and can reasonably be expected to respond to therapeutic intervention.  
- Presenting behavioral, psychological, and/or biological dysfunction and functional impairment are consistent and associated with the DSM (current edition) and/or reports a precipitating event. |