

**GROUP PSYCHOTHERAPY  
PP: 90853**

<b>Provider:</b>		<b>Member ID:</b>	
<b>Review Date:</b>		<b>Reviewer Name:</b>	

1.	Is there a behavioral health condition that establishes medical necessity for this service? <b>(Note: If Question #1 scores zero, the entire tool scores zero.)</b>	1	0		
2.	Is there an identifiable treatment strategy for group therapy that reflects the current clinical presentation/symptoms/issues of the member? <b>(Note: If this question scores 0 then questions # 3, # 4, and #7 also score 0.)</b>	3	1.5	0	
*3.	Is the treatment strategy being implemented based on assessed need?	3	2	1	0
4.	Are group therapy treatment strategies modified when significant changes in the member's clinical status are documented?	3	0		
*5.	Does service documentation include: <ul style="list-style-type: none"> <li>• Practitioner Signature with appropriate Credentials</li> <li>• Service start and stop times</li> <li>• Date</li> <li>• Location of service</li> <li>• Code and/or descriptor?</li> </ul> <b>(Note: If there is no signature by an approved clinician, questions #5 through #11 score zero for those notes.)</b>	3	2	1	0
*6.	Are group therapy interventions grounded in a specific and identifiable theoretical base within the service note and related to the member's identified behavioral health condition? <b>(Note: If this question scores 0 then questions 3, 7 and 11 also score 0.)</b>	3	2	1	0
*7.	Does the content of the group therapy service notes identify a topic and does the content and topic relate back to the treatment strategy and assessed need?	3	2	1	0
*8.	Is the member's individualized response to treatment interventions clearly documented?	3	2	1	0
*9.	Is pertinent interval history documented including changes in symptoms and functioning and addressing appropriate high-risk factors?	3	2	1	0
*10.	Does the documentation include a plan for continued group therapy?	3	2	1	0
*11.	Are services consistent with best practice standards and are they provided at a frequency commensurate with assessed need?	3	2	1	0
12.	Does a comprehensive review of the current clinical status substantiate that medical necessity is met for continued stay?	3	0		

**Total Score = \_\_\_\_\_ [Possible 34]**

- \* The scoring for these questions is as follows:
- 3 – 100% of the documentation meets this standard
  - 2 – 99% to 75% of the documentation meets this standard
  - 1 – 74% to 50% of the documentation meets this standard
  - 0 – Under 50% of the documentation meets this standard