

Connect Nevada: Strengthening Youth, Empowering Families

Intensive Home-Based Treatment (IHBT)

H2015 1 unit = 15 minutes (MST, MDFT, FFT, FCT, FCU, PAT, PCIT)

IHBT supports youth and their families who are experiencing emotional, behavioral, and social needs. IHBT offers a wide array of services and treatment models that meet the needs of these individuals and families in their homes, schools, and communities. IHBT includes intensive outpatient services targeting youth at risk of out of home placement or returning home from placement.

IHBT can include a wide array of evidence-based treatment (EBT) models with demonstrated fidelity and outcomes. The EBT's listed here are recommended, however this is not an exhaustive list and other EBTs may be considered for approval. Each EBT modality has different targeted populations and expectations of delivery. Providers will need to demonstrate fidelity to the specific model provided. The average duration of treatment is typically 3-5 months. IHBT should not occur with other services such as Intensive Outpatient (IOP), Partial Hospitalization (PHP), or traditional outpatient therapy. However, other less intensive outpatient services can occur at the same time as IHBT for example medication management, respite, and peer support.

The EBTs listed here are recommended, however this is not an exhaustive list and other EBTs may be considered for approval:

[Multisystemic Therapy \(MST\)](#)

[Multidimensional Family Therapy \(MDFT\)](#)

[Functional Family Therapy \(FFT\)](#)

[Family Centered Treatment \(FCT\)](#)

[Family Check-up \(FCU\)](#)

[Parents as Teachers \(PAT\)](#)

[Parent-Child Interaction Therapy \(PCIT\)](#)

Admission Criteria

All of the following criteria must be met:

- A. Youth must qualify for enrollment in the Care Management Entity (CME) model.
- B. The IHBT service request must be included on the plan of care. The IHBT treatment plan is informed by and in harmony with the plan of care as established in the Child and Family Team meeting.
- C. At least one adult caregiver is available to provide support and is willing to be involved in treatment.
- D. The age of the youth must be within the eligibility criteria of the program.

- E. Within the last thirty (30) calendar days, the youth has demonstrated at least one of the following putting the youth at risk of out of home placement.
 - a. Increasing and persistent symptoms of emotional distress. Symptoms may include irritability, severe change in sleep and/or eating patterns, panic attacks, hypervigilance, dissociation, and self-harm.
 - b. Repeated attempts to harm others, such as aggressive behaviors toward family, school personnel, or others that could or has led to legal charges.
 - c. Substance use that is interfering with daily functioning and relationships.
 - d. Youth is returning from out of home placement and IHBT services will support successful integration back to community.
- F. The youth, family or other caregivers have the intellectual ability to benefit from IHBT services.
- G. Youth's presenting problem is not limited to sexually harmful or dangerous behavior in absence of other externalizing behaviors.
- H. IHBT service is limited to 480 units or 32 hours per month.

Continued Services Review Criteria

- A. The youth's symptoms/behavior and functional impairment continue to meet admission criteria.
- B. Progress toward treatment goals is evident and documented, however not all treatment goals have been met.
- C. Youth is not a danger to self or others and does not require a higher level of care for safety.
- D. IHBT provider makes every effort to participate in regularly scheduled Child and Family Team meetings with the child/youth and family/natural supports as best practice and has at minimum monthly contact with the care coordinator working with the youth and family.