



community setting there is clinical evidence that PRP services will be necessary to prevent clinical deterioration and support successful transition back to the community, or avert the need to initiate or continue a more intensive level of care.

**Diagnoses:**

Primary Diagnosis \_\_\_\_\_ Code \_\_\_\_\_ ; Secondary Diagnosis: \_\_\_\_\_ Code \_\_\_\_\_  
Tertiary Diagnosis \_\_\_\_\_ Code \_\_\_\_\_

Substance use? Yes  No  Trauma or traumatic experiences? Yes  No

Additional diagnostic information:

Check all that apply:

**Recommended Frequency and Modality of Service**

Outpatient PRP Services (once weekly)  LTASP (twice weekly)  One-on-one  In-home  With peers

The child is currently in active treatment?  Yes  No Frequency: \_\_\_\_\_ /week

The family has been involved with and agrees to this referral?  Yes  No

**Additional Information:**

Therapist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Therapist Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Continuing Authorization Criteria (All required)**

- The participant continues to meet admission criteria.
- Clinical evidence indicates that the therapeutic re-entry into a less intensive level of care would result in exacerbation of the symptoms of the participant's mental disorder.
- Progress in relation to specific symptoms/impairments/dysfunction is clearly evident and can be described in objective terms, but goals of treatment have not been achieved or adjustments in the treatment plan to address the lack of progress are evident and/or a second opinion on the treatment plan has been considered. (There should be daily progress notes that document treatment and the participant's response to treatment.)
- The IRP and written crisis plan are complete and the IRP has been signed by at least two licensed mental health professionals who have collaborated regarding the IRP. The IRP is being carried out in accordance with the Child and Adolescent PRP regulations (COMAR 10.21.29).
- There is evidence that the participant, family, caretaker or significant other is involved in treatment in the frequency and manner indicated by the treatment plan.
- There is documented active planning for transition to a less intensive level of care.