



Required Clinical Documentation for Mental Health Services

Adequate medical documentation offers a means for measuring the type, frequency and duration of patient care provided. Under TRICARE and in accordance with oversight and accreditation organizations, providers are required to keep sufficient clinical records to substantiate that the care provided was actually and appropriately furnished and medically or psychologically necessary.



Mental Health Provider Types

These mental health provider types must maintain sufficient clinical records:

- Acute care psychiatric hospital
- Intensive outpatient program (IOP)
- Inpatient/residential substance use disorder (SUD) rehabilitation facility
- Opioid treatment program (OTP)
- Outpatient mental health and SUD treatment provider
- Partial hospitalization program (PHP)
- Psychiatric residential treatment center (RTC)
- Psychiatric units within acute care institution

Oversight and Accreditation Committees

These organizations oversee medical record quality and adherence to guidelines:

- The Joint Commission
- Commission on Accreditation of Rehabilitation Facilities (CARF)
- Council on Accreditation (CoA)
- Other accrediting organizations approved by the Director, Defense Health Agency (DHA)

Clinical Documents

Refer to *TRICARE Operations Manual*, Appendix A, Definitions. Clinical documentation falling under these guidelines includes, but is not limited to:

- Psychiatric evaluations
- Psychological evaluations
- Physician orders
- Treatment plans
- Physician and/or integrated progress notes
- Discharge summaries

Standardized Measures

In addition, across all mental health settings (outpatient mental health and SUD treatment, OTPs, IOPs, PHPs, psychiatric RTCs, psychiatric hospitals, and inpatient/residential SUD rehabilitation facilities), the evaluation report must include assessments using standardized measures for the diagnosis of post-traumatic stress disorder (PTSD), generalized anxiety disorder (GAD) and major depressive disorder (MDD). The required standardized measures, which must be performed at treatment baseline, 60–120 day intervals and at discharge, include:

- **PTSD:** PTSD Checklist (PCL)
- **GAD:** GAD-7 and
- **MDD:** Patient Health Questionnaire – 9 (PHQ-9)

Notifying Referring Military Hospitals and Clinics

As a reminder, providers must notify the referring military hospital or clinic when, in the provider's clinical judgement, a TRICARE beneficiary meets any of these criteria:

- Is a potential harm to self, others or mission;
- Is admitted or being discharged from any inpatient mental health or SUD treatment facility;
- Is experiencing an acute medical condition or involved in treatment that interferes with duty; and/or
- Has entered or is being discharged from a SUD treatment program.