



Patient presents with symptoms consistent with eating disorder. Do validated screen. CCA or diagnostic evaluation. Does patient meet DSM5-TR criteria for eating disorder? Has the patient received comprehensive H+P by their physical health provider. If not an MD, has provider contacted the PCP or made referral if pt doesn't have PCP.

Pt meets criteria for eating d/o. Is there another co-occurring MH or PH condition? Has patient been deemed to be moderate to severely malnourished? If non-med provider is evaluating, contact PCP for recommendations. Assess for safety.

Member doesn't meet criteria for eating d/o. Is there another BH/PH being considered. Treat accordingly.

Pt not deemed to be moderate or severely malnourished by medical provider. And is not a safety risk. CBT-ED IPT, DBT, Acceptance and Commitment Therapy see link for further detail: <https://psychcentral.com/eating-disorders/therapy-for-eating-disorders?form=MG0AV3#therapy-options-for-eating-disorders> Med Management if indicated. Ensure PCP is involved.

Patient deemed to be moderate or severely malnourished. Does the patient meet criteria for inpatient admission? After discharge from ED or hospital are they seen within 7 days (HEDIS). Is patient eligible for eating disorders program? Addition guidance refer to link. <https://www.nice.org.uk/guidance/ng69/chapter/Recommendations> https://www.connecticutchildrens.org/sites/default/files/2023-09/clinical_pathway_-_eating_disorder_-_8.28.23.pdf