

NORTHCARE NETWORK

POLICY TITLE: Transition from Inpatient Psychiatric Services	CATEGORY: Utilization Management/Access	
EFFECTIVE DATE: 10/3/12	BOARD APPROVAL DATE: 10/3/12	
REVIEWED DATE: 3/7/23	REVISION(S) TO POLICY STATEMENT: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OTHER REVISION(S): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RESPONSIBLE PARTY: UM Coordinator	CEO APPROVAL DATE: 3/7/23 Megan Rooney, Interim CEO	

APPLIES TO

NorthCare Network Personnel
Member CMHSPs
Inpatient Psychiatric Service Providers (IPSP)

POLICY

It is the policy of NorthCare Network to require adequate planning for the discharge of individuals screened and approved for inpatient psychiatric hospitalization by Member CMHSPs and/or NorthCare Network.

PURPOSE

The purpose of this policy is to outline requirements for the safe transition from community inpatient hospitalization to home/community for individual's approved through NorthCare Network's Preadmission Screening Process. NorthCare Network requires adequate transition and discharge planning, including but not limited to, follow-up appointments scheduled within 7 days of discharge and outreach by CMHSP/IPSPs to ensure follow-up appointments are kept.

DEFINITIONS

N/A

REFERENCES

- MDHHS Contract
- Medicaid Provider Manual
- Mental Health Code

HISTORY

REVISION DATE: 8/2/16, 1/6/20

REVIEW DATE: 4/3/13, 1/6/14, 12/3/14, 11/18/15, 8/2/16, 7/27/17, 6/1/18, 4/1/19, 1/6/20, 2/2/21, 2/28/22, 3/7/23

CEO APPROVAL: 9/14/12; 3/27/13, 1/6/14, 12/3/14, 12/1/15, 8/3/16, 8/1/17, 6/5/18, 5/6/19, 1/7/20, 2/2/21, 3/1/22, 3/7/23

BOARD APPROVAL: 10/3/12

PROCEDURES

Discharge planning begins at time of admission to an IPSP. The discharge plan should be continually reevaluated during the inpatient stay to determine the effectiveness that the plan will have in meeting the consumers' needs as they transition from one level of care to another.

Because a mental health/preadmission screening is a mental health service under MCL 330.1209a and 330.1209b(1) NorthCare Network requires adequate prerelease/post release planning for all individuals, screened by a network provider. The Member CMHSP/network provider shall coordinate with the hospital a documented plan for community placement and aftercare services that is sufficient to meet the needs of the individual. The Hospital Discharge planner provides a complete list of all medications prescribed at discharge from inpatient care. Any lack of available community services necessary to implement the plan shall also be documented.

A. OPEN MEMBER CMHSP CONSUMERS

1. Member CMHSP primary case holder is included in the "send copy to" function of the PAS.
2. Primary case holder must be actively involved in discharge planning activities.
3. Discharge planning activities are to be documented in ELMER at time of activity and no later than 48 hours after activity.
4. A follow-up appointment with the primary case holder must be provided within 7 days of hospital discharge.
5. A follow-up appointment with the psychiatrist must be provided prior to discharge medications running out.
6. A Crisis Alert must be added to ELMER at the time of discharge, for all persons readmitted to inpatient care, identifying a suggested course of action should the consumer request readmission within the next 30 days. It is recommended that consultation with an Emergency Services supervisor occur prior to readmission within the 30-day period.

B. CONSUMERS WHO ARE NOT OPEN WITH MEMBER CMHSP AT TIME OF ADMISSION, BUT FOLLOW-UP w/CMHSP UPON DISCHARGE

1. Member CMHSP Hospital Liaison/Discharge planner must be actively involved in discharge planning activities.
2. Discharge planning activities are to be documented in ELMER at time of activity and no later than 48 hours after activity.

3. Consumers approved for Member CMHSP services must be scheduled for a follow-up appointment to occur within 7 days of discharge (Intake Assessment must be scheduled within 14 days).
4. A Crisis Alert must be added to ELMER at the time of discharge, for all persons readmitted to inpatient care, identifying a suggested course of action should the consumer request readmission within the next 30 days. It is recommended that consultation with an Emergency Services supervisor occur prior to readmission within the 30 day period.

C. CONSUMERS WHO DO NOT FOLLOW-UP WITH MEMBER CMHSP SERVICES

1. Follow-up appointments with alternative providers must be documented for consumers who are not approved for or not requesting Member CMHSP services.
2. If an individual refuses a follow-up appointment with an alternative provider or with a Member CMHSP this must also be documented.