

 <p>SPOKANE COUNTY Regional Support Network Prepaid Inpatient Health Plan</p>	Policy Title: Resource Management		Policy # CS-36
	Signature: Signature on file	Revised:	
	Christine Barada, Director Community Services, Housing and Community Development	Reviewed: Date 8/30/07	
	Signature Date: 8/30/07	Signing by authority of Res. No. 2007-0038	

Applies to: Internal External

References

WAC 388-865-0225

Scope

SCRSN/PIHP and its contracted providers.

Policy

SCRSN/PIHP must establish mechanisms which maximize access to and use of age and culturally competent mental health services, and ensure eligible consumers receive appropriate levels of care. The SCRSN or designee must authorize admission, transfers and discharges for eligible consumers into and out of inpatient evaluation and treatment services. The SCRSN or designee will ensure that services are provided according to the consumer's individualized service plan. It may not require preauthorization of emergency services and transportation for emergency services that are required by an eligible consumer. The SCRSN will identify any resource management duties delegated to a subcontracted network provider.

Procedures/Mechanisms

1. The SCRSN or designee authorizes access to residential, community support and inpatient psychiatric services. The process for inpatient authorizations will be documented with the initial certification form and the authorization worksheet. (See attachments 1 & 2)
Note: Residential Services Policy RD -1 , Outpatient Authorization Policy CSO-1.
2. The SCRSN or designee authorizes access to out of network provider services or other exception resource requests according to the mental health treatment needs identified in the screening or as outlined in the consumer's individualized service/treatment plan;
3. When individuals are already enrolled in services with a Mental Health Care Provider (MHCP) the individuals will be assured there is coordinated continuity of care for those individuals who have been receiving care in facilities or from entities outside of their geographic service area or are transferring their care to another provider either within or outside of the SCRSN. The SCRSN or designee may facilitate compliance with this requirement.

4. The assigned MHCP will ensure that there is effective collaboration and communication with other health care providers or plans that are also providing care for their Medicaid enrolled consumers.
5. Contracted providers will designate a Mental Health Professional (MHP) who will function as that agency's hospital liaison for individuals who have not been enrolled with their agency for services, but will be seeking services, and there has been a preliminary determination that they will be eligible for SCRSN/PIHP mental health benefits upon discharge. The MHP will participate in treatment utilizing rehab-case management and discharge planning efforts at the hospital, either in person or by other means and shall ensure that the hospitalized patient's outpatient services are initiated within 3 days of discharge from the hospital, unless the patient requests an extension. The consumer will be authorized into care per SCRSN's Policy and Procedure on Authorization to Outpatient and Inpatient Care.
6. The SCRSN or designee may become involved with discharge planning if the patients care needs indicate this level of involvement.

Monitoring

This policy will be monitored through the annual contracted provider monitoring, with the appropriate recommendations, findings and/or corrective actions required in performance improvement projects.

Reference:

Residential Services Policy
Administrative Policy in ITA

Attachments:

Attachment 1 Initial Certification
Attachment 2 Inpatient Worksheet