

Effective Date: 5/29/2009
Revised Date: 1/27/2016
Review Date: 1/27/2016

North Sound Behavioral Health Organization

Section 1500 – Clinical: Evaluation and Treatment Facility Authorization

Authorizing Source: RSN - E&T Facility Payment Agreements

Cancels:

See Also:

Providers must comply with this policy and may develop individualized implementation guidelines as needed

Responsible Staff: Deputy Director

Approved by: Executive Director

Date: 2/1/2016

Signature:

POLICY #1575.00

SUBJECT: EVALUATION AND TREATMENT FACILITY AUTHORIZATION

PURPOSE

To provide rapid and appropriate authorization and certification, if applicable, for medically necessary mental health services at freestanding Evaluation and Treatment (E&T) facilities for which there is a pre-existing agreement between North Sound Behavioral Health Organization and the appropriate Regional Support Network (RSN) or freestanding E&T. This may apply to:

1. Eligible North Sound residents for whom admission is being sought at an out-of-region, freestanding E&T; and
2. Out-of-region residents at North Sound Behavioral Health Organization regional, freestanding E&Ts.

This policy and procedure applies only to freestanding E&T admissions where there is a previously signed payment agreement between North Sound Behavioral Health Organization and the particular RSN or E&T. Look under Provider Resources on North Sound Behavioral Health Organization's website (http://nsmha.org/Providers/EnT_Facility_Agreements.html) for a current list of those RSNs and E&Ts with which North Sound Behavioral Health Organization has agreements.

DEFINITIONS

Authorization – Acknowledgement by the RSN that, based on the information provided, the individual for whom E&T admission is being sought appears to reside in that RSN's region and for voluntary admissions, meets the requirements of medical necessity for this level of care. This acknowledgement is indicated by the assignment of an authorization number or some other identifier that must be submitted with a claim in order for payment to be considered. Authorization does not guarantee payment. Residency and financial eligibility have to be verified. Volunteers of America (VOA) conduct the authorization process for North Sound Behavioral Health Organization.

POLICY

When attempting to involuntarily detain or voluntarily admit an individual to inpatient care, Designated Mental Health Professionals (DMHP) or other Mental Health Professionals (MHP) shall, when the individual's residence is known, attempt to have the individual admitted to a bed within the individual's region of residence. However, there may be times when these attempts are unsuccessful and the individual may need to be admitted to an E&T outside his/her region of residence. DMHPs may seek admission to an out-of-region E&T or detain an out-of-region individual to a North Sound region E&T without an authorization from VOA and without regard to funding status. However, all parties involved shall be aware, for the RSN (either North Sound Behavioral Health Organization or another RSN) or E&T to be paid for an E&T stay by the individual's RSN of residence, a previously signed payment agreement must exist between North Sound Behavioral Health Organization and the specific RSN or E&T.

Most individuals for whom admission to a freestanding E&T is being requested will be on involuntary legal status. The involuntary psychiatric care must be in accordance with the admission criteria specified in chapters 71.05 and 71.34 RCW and North Sound Behavioral Health Organization's Policy 1542.00.

In the infrequent instances that admission is being sought for a voluntary admission to an E&T or an individual has been converted to voluntary status during an admission, the voluntary care for the individual **must** be:

1. Medically necessary as defined in WAC 182-500-0005 and also include the following:
 - a. Ambulatory care resources available in the community do not meet the treatment needs of the individual; AND
 - b. Proper treatment of the individual's psychiatric condition requires services at an E&T; AND
 - c. Services can reasonably be expected to improve the individual's level of functioning or prevent further regression of functioning; AND
 - d. The individual has been diagnosed as having an emotional/behavioral disorder or a severe psychiatric disorder (as defined in the current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association) which is considered a principal covered diagnosis (see the Washington Apple Health Inpatient Hospital Services Provider Guide, Inpatient Hospital Psychiatric Admissions section at: http://www.hca.wa.gov/medicaid/billing/pages/hospital_inpatient.aspx) and warrants extended care in the most intensive and restrictive setting; OR
 - e. The individual was evaluated and met the criteria for emergency involuntary detention (Chapter 71.05 or 71.34) but agreed to inpatient care.
2. Approved (ordered) by the professional in charge of the facility; and
3. For North Sound residents going to an out-of-region E&T, an admission must be authorized by North Sound Behavioral Health Organization's delegate for Inpatient Utilization Management, VOA.

Services provided shall be:

1. Culturally and linguistically competent;
2. Working towards recovery and resiliency; and
3. Appropriate to the age and developmental stage of the individual.

PROCEDURE

Admission of North Sound Residents to Out-of-Region E&Ts

The North Sound Behavioral Health Organization will contract with VOA to staff and operate a team, on a 24 hour basis, to authorize or ***deny**** out-of-region E&T admissions for individuals with Washington Apple Health and other individuals eligible for publicly funded mental health services who reside within North Sound Behavioral Health Organization's region. This includes individuals eligible for both Medicare and Washington Apple Health who have exhausted their lifetime Medicare benefits at admission or during the course of the stay. It also includes individuals with primary commercial or private insurance and who have secondary Washington Apple Health coverage when their primary insurance has been exhausted at admission or during the course of the stay. Requests for authorization shall be directed to VOA at 1-800-707-4656.

E&T admissions shall follow all procedures outlined in North Sound Behavioral Health Organization's Policy #1571.00 – *Inpatient Certification and Authorization* for involuntary or voluntary admissions dependent on the individual's legal status. This policy outlines procedures for authorization for the E&T facility, as well as, VOA. Only the following items are not applicable to the E&T authorization process:

1. Administrative days are not utilized for E&T stays; and
2. E&T providers do not have the same dispute rights as inpatient psychiatric hospitals (i.e., there is no State-level, formal dispute process for freestanding E&Ts).

Concerns regarding an E&T stay in the North Sound region should be directed to the E&T and/or North Sound Behavioral Health Organization.

Questions regarding the individual's county of residence and which RSN should be involved with the authorization may be resolved by referring to the flow chart from the Community Psychiatric Inpatient Instructions and Requirements (see North Sound Behavioral Health Organization's Policy Attachment #1571.01). If the appropriate RSN still cannot be determined, VOA will make a determination to authorize or ***deny**** the request but the requesting E&T must realize that North Sound Behavioral Health Organization may not be the appropriate RSN and the authorization number does not guarantee payment.

If VOA is contacted for authorization of an E&T stay by an RSN or out-of-region E&T for which a payment agreement does not exist, the requestor shall be notified that authorization cannot be provided without a previous payment agreement and shall be directed to contact North Sound Behavioral Health Organization directly with any questions.

For North Sound residents admitted to an out-of-region E&T facility, coordination of care between the E&T and outpatient services shall follow the procedure outlined for outpatient service requirements related to inpatient utilization in North Sound Behavioral Health Organization's Policy #1572.00 – *Inpatient Continuity of Care*. If it appears that an individual needs admission to Western State Hospital (WSH) or Children's Long-Term Inpatient Program (CLIP), the E&T shall contact North Sound Behavioral Health Organization.

Once the E&T receives the final authorization for admission form, the RSN or E&T shall submit its bill to North Sound Behavioral Health Organization for payment within timeframes required by the specific contract.

****Denials apply only to voluntary admissions.***

Admission to E&Ts in North Sound Behavioral Health Organization's Region

The North Sound E&T has the ability to accept individuals who are residents of other regions. When a resident of another region is admitted in a North Sound facility, the E&T staff shall notify the individual's RSN of residence or its contracted provider when one (1) of their region's residents is involuntarily detained and admitted within one (1) business day of the individual's admission. E&T staff shall work with the RSN staff or its contracted provider to facilitate care coordination and discharge planning. This includes, but is not limited to:

1. Providing documents related to an individual's detention;
2. Providing all necessary civil commitment court proceedings and support for Involuntary Treatment Act (ITA) hearing;
3. Identification of the county of residence/RSN of responsibility of an out-of-region resident sent to WSH by the E&T; and/or
4. Transferring the individual from the E&T to a hospital-based ITA bed as soon as one is available.

North Sound Behavioral Health Organization shall obtain information from either the Consumer Information System (CIS) and/or directly from the providers on E&T admissions in order to facilitate billing to the other RSN within timeframes required by the specific contract.

ATTACHMENTS

None