Section: **Clinical Practices**	Policy Name: **Emergent, Urgent & Post-Stabilization Behavioral Health Services**	Policy Number: **MHL 12.10**
Owner: **Manager of UM & Call Center**	Reviewed By: **Manager of UM & Call Center** **Medical Director** D.K. Bum 5/14/19	Total Pages: **4**
Required By: ☐ **BBA** ☐ **MDHHS** ☒ **NCQA** ☐ **Other (please specify):** _____	Final Approval By: Elizabeth Hughes	Date Approved: 5-17-2019
Application: ☒ **SWMBH Staff/Ops** ☒ **Participant CMHSPs** ☐ **SUD Providers** ☒ **MH/IDD Providers** ☐ **Other (please specify):** _____	Line of Business: ☐ **Medicaid** ☐ **Healthy Michigan** ☐ **SUD Block Grant** ☐ **SUD Medicaid** ☒ **MI Health Link** ☐ **Other (please specify):** _____	Effective Date: **1/1/15**

Policy: It shall be the policy of Southwest Michigan Behavioral Health (SWMBH) that emergency services including crisis intervention and triage, screening, evaluation, consultation and referral shall be available without prior approval for all SWMBH MI Health Link (MHL) customers residing in SWMBH service area who, based on the assessment of a prudent layperson acting reasonably, have urgent or emergent needs as a result of a mental illness, substance use disorder or intellectual/developmental disability. Subsequent claims payment for emergency services shall not be based on discharge diagnosis alone and shall consider other contributing factors.

Purpose: To ensure availability and provision of emergent or urgent assessment, treatment recommendations and crisis intervention services to customers of SWMBH by a qualified, clinically competent, licensed clinician 24 hours per day, 365 days per year.

Scope: SWMBH Utilization Management (UM) and Call Center master's degree licensed staff, are available 24/7 to provide crisis intervention, screening, evaluation, and referral services to provide urgent, emergent, and post-stabilization for behavioral health, substance use

Responsibilities: SWMBH UM and Call Center staff will triage calls and appropriately triage and refer to necessary services with coordinating Community Mental Health Service Providers (CMHSP), Prepaid Inpatient Health Plans (PIHP), emergency services, etc.

Definitions: Please refer to the policy manual definitions index.

Standards and Guidelines:

A. Response to request for urgent or emergent behavioral health and substance use disorder services for individuals, families or associated others who are in a crisis episode as defined by the customer, family or other authorized representative shall be expedient and occur without prior approval and in accordance with the National Council for Quality Assurance (NCQA), Public Health Code, Michigan Mental Health Code, and Integrated Care Organization (ICO) and Michigan Department of Health and Human Service (MDHHS) contractual requirements.

B. SWMBH will cover post-stabilization services, as defined in Medicaid managed care regulations at 42 CFR 438.118(e), without requiring authorization, and regardless of whether the member obtains the services within or outside of the participating provider network if any of the following situations exist:

1. The post-stabilization services were pre-approved by SWMBH.
2. The post-stabilization services were not pre-approved by SWMBH because SWMBH did not respond to the provider's request for these post-stabilization services within one (1) hour of the request.
3. The post-stabilization services were not pre-approved by SWMBH because SWMBH could not be reached by the provider to request pre-approval for these post-stabilization services.

C. Triage and prioritization will occur when multiple requests for emergent or urgent service requests present simultaneously.

D. Based on screening and triage, including verification of eligibility, PIHP Care Management staff will:

1. Assess lethality, provide telephonic crisis intervention if necessary and determine the type of referral needed based upon symptom intensity or the presenting circumstances and documents all decisions.
2. Based upon the assessment and consistent with the Michigan Mental Health Code (MHC), triage and coordinate via warm transfer when able:
    a. Referral to local emergency department or county pre-admission screening unit for customers who seemingly need acute care or inpatient care.
    b. Referral to the CMHSP for those currently receiving a specialty behavioral health CMHSP service.
    c. Referral to other applicable PIHP provider network services.
    d. Referral to community-based resources.
    e. Referral to the ICO where a level I assessment has not yet been completed.
3. Authorize identified level of medically necessary care.
4. Provide applicable enrollee rights notice.
5. Provide an authorization confirmation to the customer and service provider as indicated.
6. Notify the Integrated Care Team (ICT) through an upload through the Carebridge all referral, authorization and assessment information.

E. Urgent requests shall be responded to and disposition secured within 48 hours.

F. Emergent requests shall be responded to and disposition secured within 3 hours.

G. Assessment requested for an individual who is intoxicated shall occur after the individual's clinical and behavior presentation has been determined by the clinician to be appropriate for ability to

participate in the clinical interview/evaluation. Assessment will not be denied based on an arbitrary measure, such as a BAC of a given number.

H. Services provided and recommended are expected to correspond to assessed clinical needs and medical necessity, utilizing the least restrictive intervention to assure individual and public safety.

I. A licensed mental health professional shall be available through SWMBH at all times of the day, each day of the year.

J. Timely and thorough documentation of all service activities shall occur, within 24 hours of the contact including all documentation into the Carebridge.

K. Emergent and Urgent triage, screening and referral staff are supervised by a Licensed Masters Level clinician with 5 years post graduate experience and along with the Medical Director, overseeing screening and referral decisions.

References:

Michigan Medicaid Provider Manual 2.5.A
MDCH/PIHP Contract
NCQA Standards: UM 4, 5, 12
ICO/PIHP Contract
Michigan Mental Health Code

Attachments: None

Southwest Michigan BEHAVIORAL HEALTH

Revision History

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
Initial	4/26/2019	Scope & Responsibilities	Not in previous version	E. Guisinger