



Section: Clinical Practices	Policy Name: Discharge Planning & Follow Up	Policy Number: 12.05
Owner: Manager of UM & Call Center	Reviewed By: Director of SAPT Manager of UM & Call Center	Total Pages: 5
Required By: <input type="checkbox"/> BBA <input type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input checked="" type="checkbox"/> Other (please specify): Michigan Mental Health Code 330.1712	Final Approval By: <i>Clyde D. Givins</i>	Date Approved: 4-25-2019
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input checked="" type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input checked="" type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify):	Line of Business: <input checked="" type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): <input checked="" type="checkbox"/> Healthy Michigan <input checked="" type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> SUD Medicaid <input type="checkbox"/> MI Health Link	Effective Date: 4/11/2019

Policy: It shall be the policy of Southwest Michigan Behavioral Health (SWMBH) to provide/assure that Discharge Planning and follow up services meet the contractual and regulatory requirements of the Michigan Department of Health and Human Services (MDHHS) contract and Center for Medicare and Medicaid Services (CMS) Code of Federal Regulations (CFR) and the Public Health Code and advance the recovery and/or independence of SWMBH customers. This will be accomplished by establishing collaborative, planning relationships among Community Mental Health Service Providers (CMHSP), behavioral health, substance use disorder and medical health care providers.

Purpose: Discharge Planning is considered an integral part of treatment, particularly in higher/short-term levels of care. Consideration of the continuum of care and long-term recovery needs of the customer will be considered at every step of treatment planning. Discharge Planning and Follow Up intends to improve the quality of care, improve outcomes and control costs by assuring plan coordination in which primary and specialty mental health, substance use disorder and health providers inform each other regarding their treatment of an individual and collaboration regarding the needs of the patient/individual and acting together to develop an integrated health aftercare plan and implement ongoing aftercare in a manner that eliminates barriers to and duplication of services.

Scope: To describe a clear method for notifying SWMBH of and implementing member discharges from Substance Use Disorder (SUD) providers and assuring proper eligibility



determination and due process notification is provided to the member as applicable by appropriate staff.

Responsibilities:

CMHSPs and SWMBH contracted providers will ensure appropriate discharge planning and that follow-up care is coordinated within appropriate timespans. If treatment is terminated prior to completion for any reason, providers will notify customers and coordinate SWMBH for authorization determinations, appeal/grievance rights, and/or other treatment referrals, if necessary.

SWMBH UM and Member Service staff will assure providers follow discharge procedures and all documentation and determinations have been followed and uploaded to the customer file.

Definitions: None

Standards and Guidelines:

- A. Discharge Planning will occur according to identified Best Practice Guidelines, the Medicaid Provider Manual, SWMBH policy and participant CMHSP and provider organization's admission and discharge criteria/policy.
- B. SWMBH will review discharge plans of all customers receiving short term/long term Substance Use Disorder residential services and will ensure that appropriate follow-up care is arranged for customers being discharged from those services.
- C. SWMBH contracted providers, CMHSP's and their provider networks will ensure that all customers receiving mental health services and any substance use outpatient services are discharged appropriately from their care.
- D. Aftercare services are incorporated into the treatment plan by the treating provider at the onset of treatment. Other identified needs (i.e. mental health, substance use, physical health, etc.) may be addressed concurrently or incorporated into discharge planning and referral process. With the customer's approval, appointments will be scheduled for further treatment as it relates to these identified needs. Follow up substance abuse services will be obtained no more than 7 days after discharge from a detox/residential facility. For a person hospitalized for less than 7 days, a preliminary treatment plan will be developed prior to discharge.
- E. To assure integrated health care planning, notification of a service discharge will be provided to all relevant participants of the Person-Centered /Treatment Planning process and the primary care physician as sharing of information is allowed. (Note: At minimum, this should include all service providers.)
- F. Notification of service transition/discharge provided to customers will comply with the applicable SWMBH Grievance and Appeals policy and contractual and regulatory mandates.
- G. SWMBH is concerned with customer satisfaction as it relates to services rendered by SWMBH and its contracted providers. SWMBH will elicit feedback via Member Services as well as satisfaction surveys as necessary.



Procedures:

A. Provider responsibilities:

1. Any change to amount, scope, or duration requires a treatment plan amendment with proper notice.
2. Any discharge that occurs outside of completion of the treatment plan as written requires a discharge letter from the provider to the member.
 - a. The discharge letter should be mailed to the member and uploaded to the SWMBH SmartCare 4.0 member record.
 - b. The discharge letter shall either be the template (attachment P12.05.01.A) or contain the following language:
 - i. Because your substance use disorder benefits are managed by SWMBH, you may have treatment options or alternative available to you. If you would like to discuss continuation of services, alternative services or provider options, please contact SWMBH at 1-800-781-0353. SWMBH will talk with you about what benefits you may qualify for at this time and assist you with connecting with those services. Please contact SWMBH Customer Service at 1-800-890-3712 if you have any questions or concerns.
3. Thru the SWMBH SmartCare 4.0, Provider will select and message Customer Services SWMBH of the member discharge.

B. SWMBH Responsibilities

1. SWMBH staff will review all messages related to discharge to determine risk.
2. If the information indicates continuation of the services are not medically necessary and the individual does not meet criteria or results in a reduction, suspension, termination or denial, Utilization Management (UM) staff shall:
 - a. Make a determination for services within scope of practice or consult with the senior practitioner, who will, within his/her scope of practice, review all pertinent and relevant documentation and render a service determination decision.
 - b. Assure that the Service Determination denial and notification letter are provided to the member and provider.
 - c. Clearly document and maintain all decisions along with justification in the EHR/MCIS to be available to the individual at their request.
 - d. Notify the SWMBH Customer Services department to initiate any applicable Grievance and Appeals notification process.
3. If the information indicates continuation of the services are medically necessary and the individual continues to meet criteria or there is no reduction, suspension, termination or denial, UM staff contact to discuss continued eligibility and service/provider options.

C. Sub-capped Substance Use Disorder Services.

1. CMHSP's providing SUD services to members with BG, Healthy Michigan Plan or Medicaid under a sub-cap shall follow SWMBH policy 6.4



Effectiveness Criteria:

By ensuring the discharge process for substance use disorder services align with the eligibility determination and grievance and appeals standards while supporting and enhancing the overall goal of improving care under the standards of best practice and adhering to regulatory requirements and contractual obligations.
All treatment plans, discharge letters, service determination denial and notification letters, and all clinical documentation supporting discharge have been completed and uploaded to client file.

References:

Michigan Mental Health Code
Medicaid Provider Manual, Behavioral Health and Intellectual and Developmental Disability Supports and Services
MDHHS/PIHP Managed Specialty Supports and Services Contract

Attachments:

P12.05.01A Discharge Letter Template

Note:

This policy covers both Clinical Practices and Substance Abuse Treatment and Prevention

Date

Customer address

Dear (insert member name),

Due to (insert reason for discharge), it was determined you will no longer be able to receive (insert list of services) with (insert agency name). When you entered services, you signed an agreement acknowledging that (insert the type of behavior) could lead to discharge from services. Due to (insert dates of incidents), you will now be discharged from (insert agency name). Your discharge is effective on (insert date).

Because your substance use disorder benefits are managed by Southwest Michigan Behavioral Health (SWMBH), you may have treatment options or alternative providers available to you. If you would like to discuss continuation of services, alternative services or provider options, please contact SWMBH at 1-800-781-0353. SWMBH will talk with you about what benefits you may qualify for at this time and assist you with connecting with those services. Please contact SWMBH Customer Service at 1-800-890-3712 if you have any questions or concerns.

Thank you,