Department of Behavioral Health

TRANSMITTAL LETTER

SUBJECT **Discharge of Child/Youth Consumers from a Core Services Agency**		
POLICY NUMBER **DBH Policy 525.1**	DATE APR 22 2014	TL# 246

Purpose. To update the procedures a core services agency (CSA) must follow to obtain Department of Behavioral Health (DBH) approval to discharge a child/youth consumer from a CSA's enrollment when the consumer is not participating in active treatment. Significant changes include:

- Eliminating the previous category of "Inactive Status",
- Adding a new category for administrative discharge, and
- Adjusting outreach requirements.

Applicability. Applies to all DBH-certified CSAs who serve children/youth. This policy is not applicable to children/youth in Residential Treatment Facilities (RTCs) or Psychiatric Residential Treatment Facilities (PRTFs).

Policy Clearance. Reviewed by affected responsible staff and cleared through appropriate Behavioral Health Authority offices.

Implementation Plans. **Specific staff should be designated to carry out the implementation and training as required, and program managers are responsible for following through to ensure compliance.**

Policy Dissemination and Filing Instructions. Managers/supervisors of DBH and DBH contractors must ensure that staff are informed of this policy. Each staff person who maintains policy manuals must ensure that this policy is filed in the DBH Policy and Procedures Manual, and contractors must ensure that this policy is maintained in accordance with their internal procedures.

ACTION

REMOVE AND DESTROY	INSERT
DMH Policy 525.1, Designation of "Inactive/ Discharge Status" for Child/Youth Consumers who are not in Active Treatment in a CSA	DBH Policy 525.1, Discharge of Child/Youth Consumers from a CSA

Stephen T. Baron
Director, DBH

GOVERNMENT OF THE DISTRICT OF COLUMBIA **DEPARTMENT OF BEHAVIORAL HEALTH**	**Policy No.** 525.1	**Date** APR 2 2 2014	**Page 1**
	Supersedes: **DMH Policy 525.1, Designation of "Inactive/Discharge Status" for Child/Youth Consumers who are not in Active Treatment in a CSA, dated December 20, 2004**		

Subject: Discharge of Child/Youth Consumers from a Core Services Agency

1. **Purpose**. It is the policy of the District of Columbia Department of Behavioral Health (DBH) to ensure that all consumers receiving mental health treatment who are assigned to a core services agency (CSA) are engaged in active treatment and that the CSA has taken steps to provide that treatment. A CSA may not discharge a consumer from its rolls for lack of participation unless and until it can demonstrate that efforts to engage the consumer have failed, or a justification for administrative discharge has been requested and approved by DBH as described in Section 8 below.

This policy sets forth the procedures a CSA must follow to obtain DBH approval to discharge a child/youth from a CSA's enrollment when the consumer is not participating in active treatment.

This policy does not limit a child/youth's parent/guardian's right to request that a child/youth be discharged from a CSA. See Section 5e below.

2. **Applicability**. These procedures are applicable to all DBH-certified CSAs who serve children/youth. This policy is not applicable to children/youth in Residential Treatment Facilities (RTCs) or Psychiatric Residential Treatment Facilities (PRTFs).

3. **Authority**. Department of Behavioral Health Establishment Act of 2013.

4. **Definitions**. For purposes of this policy:

4a. Active Child/Youth - A consumer who is enrolled with a CSA who is receiving treatment and services in accordance with his/her agreed upon Individualized Plan of Care (IPC) as identified in the individual's IPC.

4b. Outreach Services - *For children/youth*, a series of activities undertaken by the CSA to locate the child/youth or family/guardian when the child/youth has not appeared for services over a designated period of time as outlined in Section 6a below. The CSA performs these outreach services in the community in search of the consumer and makes contact(s) with a variety of programs, individuals, and agencies in order to locate and re-engage the consumer in active treatment. The CSA is required to document all outreach service activities as provided in Section 6b herein, and is required to send that documentation to the DBH Division of Care Coordination Access Helpline (AHL) for review and approval.

4c. CSA Discharge - Removal of a consumer from the CSA's enrollment, as approved by DBH.

5. **Policy**.

5a. DBH may approve a CSA discharge action request when a child/youth who is not assigned to a Community Based Intervention (CBI) team:

- Has relocated out of state for more than ninety (90) days except for children/youth relocated to RTCs or PRTFs out of the District of Columbia or children/youth in the foster care system;
- Is deceased;
- Has refused all mental health services from the CSA, and the child/youth's (and/or his/her legal guardian's) refusal and the CSA's efforts to explain the benefits of services have been documented in the consumer's clinical record;
- Has failed to participate in their planned and agreed upon IPC for ninety (90) days;
- Does not have a mental health diagnosis or does not have current symptoms that cause clinically significant distress or impairment in social, occupational, or other important areas of functioning, as verified in writing by a child psychiatrist or approving qualified practitioner (AQP) that can diagnose;
- Has not been located following numerous documented outreach efforts to locate the consumer as described in Section 6a below; or
- When a justification for administrative discharge has been requested by a provider as described in Section 8 below.

5b. DBH may approve a discharge for a child/youth assigned to a Community Based Intervention (CBI) Provider when the consumer:

- Is deceased;
- Has permanently relocated out of the District of Columbia;
- Cannot be located for one-hundred eighty (180) days, and the CSA has documented its efforts to locate the consumer;
- Is incarcerated more than six (6) months; or
- Is no longer in need of services as verified in writing by a child psychiatrist or AQP that can diagnose.

The CSA may submit documentation from the CBI team affiliated with the CSA that provided the services.

5c. For children/youth in the Child and Family Services Agency (CFSA) Foster Care System, Department of Youth Rehabilitation Services (DYRS) Juvenile Justice System, or children/youth with special needs in the D.C. Public School System (DCPS):

- Final consent to discharge will be directed in writing via mail, email, or fax to the AHL by the referring agency (e.g., CFSA, DYRS, DCPS).
- In cases where the child/youth is no longer receiving services from a CSA and is enrolled with a Health Services for Children with Special Needs (HSCSN) or another managed care organization (MCO), the child/youth should be discharged from the CSA in collaboration with the MCO and AHL.
- For children/youth in the D.C. Foster Care System, once the CSA has notified the CFSA Behavioral Services Unit (BSU) of the planned discharge from the CSA, the BSU will notify AHL within ten (10) working days if the discharge is to move forward.

5d. All participating parents, families or guardians shall be notified of discharge planning.

5e. If a parent or legal guardian requests that a child/youth be discharged from a CSA, the CSA must document the reason(s) given by the parent/guardian, document that a diligent effort was made to engage the child/youth if they believe treatment is still necessary, and submit the request to discharge to AHL.

6. **Procedures**. The following actions must be taken in order for a CSA to obtain DBH approval to discharge the consumer, unless an administrative discharge is being requested as outlined in Section 8 below:

6a. Outreach Activities. The CSA shall undertake outreach for consumers who reside in the community as set forth below. Outreach begins from the date of the first missed appointment.

(1) For new children/youth who have never been seen by the CSA.

- Telephone call to parent, family, or guardian, and/or referring agency (e.g., CFSA, DYRS, DCPS) within forty-eight (48) hours after the first missed appointment.
- Home visit if unable to locate with a telephone call or if rescheduled appointment is missed.
- If no contact is made, certified letter (return receipt requested) to parent, family, or guardian to try to engage the consumer and notification to the referring agency. The letter should also state that a request to discharge will be submitted if no response is received.
- If no response is received, recommendation to the referring agency to discharge the child/youth from DBH/CSA.

(2) For children/youth receiving treatment who are not enrolled in CBI.

- Telephone call or home visit within seventy-two (72) hours after the first missed appointment.
- Notification to referring agency after second missed appointment or inability to locate child/youth and/or family or guardian.
- Visits to home or any known day treatment program every two (2) weeks for thirty (30) days.
- 31-60 days, letter if no contact is made and no information received that child/youth has moved.
- 61-89 days, if no response and 1st letter was not returned, certified letter (return receipt requested) to parent, family, or guardian to try to engage the consumer and notification to the referring agency. The letter should also state that a request to discharge will be submitted if no response is received.
- 90 days, recommendation to the referring agency to discharge the child/youth from DBH/CSA if no contact is made.

(3) For children/youth who are Homeless.

- Attempt to locate a child/youth within seventy-two (72) hours after first missed appointment by contacting or calling relatives/guardian or acquaintances and/or visiting shelters or frequented locations.

- Thereafter, make monthly attempts to locate the consumer for ninety (90) days.

6b. Documentation/Notification. For children/youth who reside in the community, the CSA shall document the following in the clinical record, and provide a copy of the documentation to the AHL when seeking approval to discharge:

- Date of last appointment, if applicable.
- Date, time, and summary/results of all outreach efforts, to include persons contacted.
- If the consumer or legal guardian is located and refuses treatment, the reasons given and the CSA's response to engage the consumer.
- All required MHRS documentation including a summary progress note and discharge summary.

6c. The CSA's request to discharge a child/youth must be approved in writing by an AQP who can diagnose before being submitted to AHL for DBH approval.

6d. The AHL shall review the CSA discharge request and documentation and compare to eCura. AHL will request additional information if necessary (e.g., outreach efforts need more detail or may need clarification regarding services reflected in eCura), and notify the CSA in writing of approval/denial within ten (10) business days of receipt of required documentation.

7. **Designation of Discharge (Dis-enrollment) in eCura**.

7a. If AHL approves the discharge request, AHL will complete the dis-enrollment event screen in eCura.

7b. The AHL will remove the consumer's name from the CSA's assignment in eCura, and set the end date of the MHRS insurance span to the date of dis-enrollment.

8. **Administrative Discharge**. Providers may request that the AHL administratively dis-enroll the following categories of consumers. All requests for administrative disenrollment must be reviewed and approved by the AHL. This does not apply to children/youth as described in Section 5c of this policy.

8a. Consumers who have been identified by DBH as not receiving a service for more than one (1) year or more.

8b. Consumers designated by the Division of Provider Relations in collaboration with Office of Programs and Policy during a provider closure or roll clean-up.

8c. Consumers enrolled with a CSA who have not been seen by the CSA/CBI Provider or hospitalized within six (6) months based on billing and claims data. Provider must attest that they have made a minimum of four (4) attempts to engage the consumer and there has been no report of dangerous behavior. All attempts must be documented in the consumer's record.

9. **Failure to Follow this Policy**. If DBH determines that a CSA has discharged a child/youth without DBH approval or has not followed the procedures outlined in this policy, DBH shall require

the CSA to engage in the outreach activities set forth herein, and shall consult with the Office of Accountability as needed, and impose any and all other remedial action it deems necessary.

10. **Inquiries**. Any questions regarding this policy may be addressed to the Director, Division of Provider Relations at (202) 671-3155 or the Director, Division of Care Coordination at (202) 671-3105.

Approved By:

Stephen T. Baron
Director, DBH

4-22-14

(Signature) (Date)