

Region 5 Systems

Network Management Procedures

CARF Standard 13

206 NAC 6-005 and Behavioral Health Adult Service Definitions

Revised: RA 9/21/17

■ Entry / Access, Transitions, & Exit / Discharge Procedures

The following procedures are established for Region 5 Systems (the Network) and its Provider Network when addressing entry/access, transitions, and Exit/Discharge criteria.

Region 5 Systems' Provider Network is considered the safety net for consumers who are uninsured, underinsured, or have no other means to pay for behavioral healthcare.

Persons served must be screened by the Network Provider to determine eligibility for services in the Provider Network. The Network Provider shall screen and/or assess each consumer to determine if he/she meets all of the following criteria.

1. **Clinical** eligibility criteria for services according to the established service definitions and utilization guidelines (see "Title 206: Behavioral Health Services and Utilization Guidelines").
 - a. For authorized services as specified in the Network Provider contract, the Network Provider must obtain prior authorization for enrollment into the service through the centralized data system (CDS); and
 - b. If enrolled into an authorized or non-authorized service, the consumer must be registered in the CDS.
2. **Financial** eligibility criteria (see Region 5 Systems' "Financial Eligibility Policy" and "Financial Eligibility Procedures").
3. **Citizenship** eligibility criteria (see Region 5 Systems' "SAVE Policy" and "SAVE Procedures")

NOTE: When a consumer also meets state and/or federal priority population criteria, the Network Provider shall be required to give the consumer priority access to services.

Region 5 Systems' Provider Network has multiple points of entry for service provision. Each Network Provider has established intake protocols, which shall include requirements as outlined in these procedures.

Persons Denied/Ineligible for Services

The Network Provider shall establish written procedures to follow when it denies access to or deems an individual ineligible for services after the formal screening/assessing process has been completed. At a minimum, procedures shall include:

- Notification to the person/referral source with the reason he/she was denied services/found ineligible and recommendations for alternative services.
- Monthly notification to Region 5 Systems of denials / persons found ineligible for services.

Standard 13.b.c. Transitions Within the Network and Exit/Discharge from the Network

Region 5 Systems recognizes that transition planning is critical to the success of the person served as a part of the exit/discharge process.

Network Providers shall ensure that transition planning:

- Occurs at the earliest point as deemed appropriate.
- Includes active involvement of the person served. As the person served moves toward completing the goals and achieving the outcomes identified in the Treatment Plan, the Network provider shall work with the person served to begin developing a transition plan.
- Considers length of stay that is individualized according to the person served's needs, the person served's response to treatment and recovery (see "Title 206: Behavioral Health Services and Utilization Guidelines").
- Documentation of the transition plan and discharge summary, including referral and/or transition to additional services/supports or community resources, shall be present in the record of the persons served.