



In-service for Acute Psych and PRTF-  
documentation

Presented by APS BH Staff

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# Objectives and Agenda

- To provide assistance with documentation**
- To review forms and the information required to complete the review**
  
- Documentation**
  - Review General Reminders
  - Review Acute and PRTF admissions
  - Review Continued Stay Reviews
  - Review Discharge Form
  - Review Retrospective Reviews

# CFR-Code of Federal Regulation

- <http://ecfr.gpoaccess.gov>
- **441.150-Basic and purpose**
- **441.151-General requirements**
- **441.152-Certification of need for services**
- **441.153-Team certifying need for services**
- **441.154-Active treatment**
- **441.155-Individual plan of care**
- **441.156-Team developing individual plan of care**

# General Reminders

- Provider manual: criteria for admission**
  - located on our website at [www.wyhealthytogether.com](http://www.wyhealthytogether.com)
- Complete the form (admission or CSR) in its entirety**
- Voluntary vs. involuntary admission**
  - Circle the appropriate status
  - If all or a portion of the IP stay is involuntary, attach the consent form
- Changing Involuntary to Voluntary Status**
- Viable Discharge Plan**
  - Discharge planning is a part of your admission process
- Important names, addresses and phone numbers**
- Use DSM IV-Axis I-V ICD-9 codes**

# Acute and PRTF Admission Requests

## PRTF: required documentation (not required for Acute)

### Psychiatric Evaluation

#### Partnership Access Line (PAL)

if local psychiatrist is not available

1-877-501-7257 OR [www.WyomingPAL.org](http://www.WyomingPAL.org)

Referral can be made by physicians or therapists

### MD order

Pediatrician

Psychiatrist

Facility doctor

### Viable discharge plan

Contact information for PCP and OP therapist

### Completed admission request form

# Admission Requests Continued

- Facility UR Rep**
  - Utilization Reviewers contact person at the facility
- DFS custody**
  - If the DFS case worker is the legal guardian be sure to provide the case worker's name, address and phone number.
- Treatment History**
  - Treatment history is part of the consideration of medical necessity criteria for a PRTF admission
  - Be sure to include length of time the client has been seeing their OP therapist
- Appropriate clinical; specific to the youth being admitted**
- Last page of admission request**
  - Please make sure each of the questions on this page have been addressed in the admission request form

# Continued Stay Review Documentation

- Facility contact information
- Update any changes to Axis I diagnoses
- Provide current clinical documentation; updates week to week
- Rationale for continued stay
- Admission behaviors or symptoms; remain the same or have been resolved-please give details
- Updated and/or resolved treatment objectives
- Client progress
- Review for Medical Necessity Criteria
- Weekly Family Therapy-did parents attend sessions and how long we they there
- Onsite visits

# Discharge Planning

- Discharge Planning begins at admission**
- Monitor gaps in coverage**
- Children's Mental Health Waiver**
  - Hi Fidelity Wrap Around
    - FCC assigned to work with parents and youth
    - Family voice, family choice
    - Community resources and supports to help the youth succeed within their homes and communities

# Discharge Form

- Complete the form and fax it to APS**

# Retro Documentation

- Must meet 1 of the 3 Criteria to submit a Retrospective Review**
  - Client was made eligible retrospectively
  - Facility became an enrolled provider retrospectively
  - Primary insurance maxed out
- Documentation confirming 1 of the above criteria**
- Received within 30 days of facility notification**
- Entire medical record/chart must be received**
- Signed consent**

# Contact information

- Visit us at [www.wyhealthytogether.com](http://www.wyhealthytogether.com) to download the forms and obtain the Provider manual
- Call 1-888-545-1710 for further questions



# Questions and Answers