

Memorandum

To: The Provider Community
From: The Utilization Management Unit
Title: Transfer and Discharge Procedures
Date of Original Document: 03/16/04
Date Revised: 08/07/06

TRANSFER PROCEDURES

A. Whereby the consumer is leaving one provider and another provider will be taking over the case:

The agency wanting to **TRANSFER** services with the consumer must do the following:

1. Discuss provider choice with the consumer, and obtain a signed release of information for the new provider. A copy of the signed release of confidential information should be forwarded also to the UM Unit. Follow-through by expediting the transfer of the medical records and notify the “new” agency that the transfer is being requested from the UM Unit.
2. Update the service plan as needed to reflect the services being recommended or requested at the new provider.
3. Complete required authorization documentation indicating the new provider and services requested.
4. The provider cannot transfer the case, until the Utilization management (U.M.) Unit has approved the transfer.
5. After approval of the transfer from UM, the UM Reviewer will fax the authorization letter to the “new” agency. The UM Reviewer will fax both the transferring and “new” agency a message making them aware of the authorization, and urging step 6 to be completed. Copy Janice Stroud in Quality Management on the email for NC TOPS requirement.
6. The current provider is responsible for completing the transition, scheduling a meeting with both agencies and the consumer; and sending copies of relevant medical record documentation to the "new" agency.
7. If step 6 is not completed in 3 days, the “new” agency is to call Customer Service at The Durham Center for follow-up.

In summary, the documents which must be sent to the UM Unit are:

1. Required authorization documentation
2. Service plan and service order OR PCP
3. Signed Release of Confidential Information (to the new provider)
4. Discharge Summary (from the transferring provider) – recommended not required



B. Whereby the consumer is to remain with the provider but needs a referral for an additional service to another provider.

1. If a consumer already has a provider, it is the provider's responsibility to submit required authorization documentation for the new service for the new provider, once the consumer makes a choice about a provider for the new service and signs a Release of Information form for that provider.
2. If the consumer does not have Community Support Services, the primary clinician serving the consumer will initiate the required authorization documentation for the new service, including the service plan and service order OR PCP and release of confidential information form.
3. Authorization must occur for any service that is to be provided by a provider who contracts with The Durham Center for state or local funds, and who bills for that service through the Durham Center. Authorization is necessary to assure payment of services provided by that "new" provider.
4. The service plan or PCP should be updated as needed to reflect goals and interventions for the new service.
5. It is the responsibility of the primary provider to assure that the consumer is connected with the additional services once they have been authorized. This includes contacting the new provider agency, assisting with appointment scheduling, and providing relevant clinical information.

DISCHARGE PROCEDURES

A. If all services to the consumer are ending, the Provider authorized for services is responsible for the following:

1. Discussing the discharge with the consumer, and notifying any other providers of the upcoming discharge and projected date.
2. The provider must send the required discharge documentation to UM. The Provider may complete a written summary of treatment outlining client's progress toward goals, and interventions used that were useful/successful that support the recommendation for discharge from your service. This summary should include the reason for the discharge from treatment. Or the provider may submit the required authorization documentation ensuring the discharge section is fully completed.
3. After approval for the discharge from UM, you will be notified that the case has been discharged from the Durham Center.

B. If the consumer is being discharged from a specific service, but not from treatment as a whole, the Provider authorized for the service is responsible for the following:

1. The provider must send the required discharge documentation to UM. The Provider may complete a discharge summary for the particular service, which should include information about progress towards goals, what interventions were useful/successful, reason for discharge, any recommendations, and the specific date, which that treatment ended. Or the provider may submit the required authorization documentation ensuring the discharge section is fully completed.
2. A copy of the discharge summary should be forwarded to the UM Manager who has been working with the consumer's case for disposition. Such discharges are normally to be planned with the involvement of the consumer and any such upcoming events are to be discussed in the telephone conference with the UM manager.
3. After approval for the discharge from UM, you will be notified that the case has been discharged from the Durham Center.