

Effective Date: 2/29/2004
Revised Date:
Review Date:

North Sound Mental Health Administration

Section 1500 – Clinical: Coordination of Care with External Health Care Providers

Authorizing Source: WAC 388-865-0456; NSMHA

Cancels:

See Also:

Providers are required to have a “policy consistent with” this policy

Responsible Staff: Quality Manager

Approved by: Executive Director

Date: 7/7/2008

Signature:

POLICY #1517.00

SUBJECT: COORDINATION OF CARE WITH EXTERNAL HEALTH CARE PROVIDERS

PURPOSE

To define the process utilized by clinicians in referring mental health consumers with health conditions that may result from or contribute to the consumer’s mental health status, but cannot or should not be treated by mental health providers.

To define expectations and guidelines for ongoing interface and collaboration with North Sound Mental Health Administration (NSMHA) provider network mental health care providers (MHCPs) and external health care providers to maximize coordination of care for NSMHA consumers.

DEFINITIONS

Consumer

A person, who has applied for, is eligible for, or who has received mental health services. For a child under the age of thirteen or for a child age thirteen or older whose parents/legal caregivers or legal guardians are involved in the treatment plan, the definition of consumer includes parents/legal caregivers or legal guardians.

Health Care

Per WAC 246-15-010 health care means any care, service, or procedure provided by a health care facility or a health care provider: (a) to diagnose, treat, or maintain a patient’s physical or mental condition; or (b) that affects the structure or function of the human body.

Health Care Provider

Per WAC 246-15-010 a health care provider, health care professional, professional, or provider means a person who is licensed, certified, registered or otherwise authorized by the law of this state to provide health care in the ordinary course of business or practice of a profession.

Mental Health Care Provider (MHCP)

A clinical staff member of a NSMHA network provider assigned with the primary responsibility to implement a consumer’s mental health individualized service plan and point person for continuity of care.

Primary Care Provider (PCP)

Health care provider designated to be in charge of a person’s primary medical needs.

POLICY

NSMHA is committed to ensuring that timely communication and coordination of care occurs between NSMHA’s provider network MHCPs and other health care providers external to the mental health system,

including but not limited to primary care providers (PCP), regarding a consumer's mental health and medical care and treatment.

NSMHA's provider agencies shall refer consumers to their PCP or other appropriate providers when, through the assessment and treatment process, the need for health care beyond the scope of mental health services is identified. Examples of health care services other than mental health may include, but are not limited to:

- Auditory
- Chemical Dependency
- Dental
- Developmental Disabilities
- Medical/Surgical
- Optical
- Reproductive Services, including family planning and/or treatment and prevention of sexually transmitted diseases (STDs)

PROCEDURES*

At the initial intake evaluation, consumers shall be asked about the existence of any co-morbid conditions. In addition, the clinician will request the name and telephone number for each consumer's PCP and will record them in the appropriate fields on the screening and intake evaluation documents. The PCP's contact information (name and contact numbers) shall be reviewed and updated at least annually or as changes occur.

The consumer's consent for collaboration between the NSMHA network provider and the PCP, as well as other health care providers as applicable, shall be obtained in writing as soon as it is therapeutically appropriate during the intake evaluation process, or as early in the treatment episode as possible, preferably during the first face-to-face contact. The attempt to obtain the Authorization for Release(s) of Information (ROI) will be documented in the consumer's clinical record.

If the consumer and/or provider identify' need for additional services and supports for health care, the MHCP will make appropriate referrals and provide assistance in access and linkage. Referrals and assistance will be documented in the consumer's clinical record. Please refer to NSMHA Policy #1550.00 Early and Periodic Screening, Diagnosis and Treatment (EPSDT) regarding specific requirements for referrals to and from PCPs for consumers under age 21.

For adults, if consent is given, the NSMHA network providers are required to communicate with the consumer's PCP to coordinate physical and mental health care needs, or attempt to link consumers to a PCP for medical care. Communication may be in writing or by telephone and shall be documented in the consumer's clinical record. The NSMHA network providers' MHCPs are expected to only release information authorized by the consumer and as allowed by confidentiality laws.

The level of disclosure that a consumer may indicate may include but not be limited to:

1. Release of any applicable information to and from the PCP;
2. Release of EPSDT screening findings only (for youth);
3. Release of medication information only to and from the PCP; or
4. No release of information to or from the PCP.

Applicable information might include, but not be limited to:

1. Diagnosis;
2. Individualized Service Plan/Treatment Plan;
3. Medication and its effects;
4. Results of lab tests and consultations;
5. Psychological testing results and consultations;
6. Information on how the PCP can contact the NSMHA network provider and MHCP;
7. HIV/AIDS or STDs; and/or
8. Alcohol or drug abuse treatment by federally assisted alcohol or drug abuse programs.

To facilitate continuity of care if consent is given, the NSMHA network providers' MHCPs are expected to communicate with the PCP when any of the following occur:

1. Initiation of care and services;
2. Initial prescription of psychotropic medications;
3. Changes in prescribed medications that might impact health care;
4. Changes in the consumer's clinical condition that potentially impacts his/her overall medical care.

The NSMHA Quality Management Plan monitors network providers through on-site clinical record reviews to ensure that documentation of coordination activities is evident in consumer's clinical records and communication occurs within the scope of the consent and release(s) given by the consumer. Specific monitoring activities may include, but not be limited to:

1. If health care is identified in the intake or in the course of service delivery, it has been addressed in the individual plan;
2. Presence of consumer-signed ROIs to the PCP and other health care providers or documentation of the consumer refusing to sign ROIs;
3. Presence in the clinical record of a letter, completed EPSDT form or other treatment notification form to the PCP or other health care provider; and/or
4. If authorized, inclusion of documentation in the consumer's clinical record of communication with health care providers including when communication took place, a general description of information shared and method of communication.

*While most of the procedures reference coordination with the PCP, these procedures also apply to other health care providers under applicable circumstances.

ATTACHMENTS

None