

PROVIDER ALERT

CORRECTED VERSION

DISCHARGE CRITERIA FOR PRP, TBS, AND MTS/ACT

DECEMBER 6, 2011

The Mental Hygiene Administration (MHA) and ValueOptions® have worked together to create clarity in some of the State of Maryland's Medical Necessity Criteria (MNC). Because all MNC are based on a priority that treatment be provided in the least restrictive, least intensive setting that is expected to be safe and effective, it is important to be as clear as possible regarding when the consumer may be able to benefit from a lower, less restrictive level of care.

The Discharge Criteria (shown below) for Psychiatric Rehabilitation (PRP), Therapeutic Behavioral Services (TBS), and Mobile Treatment/Assertive Community Treatment (MTS/ACT) were created from a summary of the goals found in their MNC. Reviewing both the MNC and the Discharge Criteria will show the reader a smooth transition from the Admission Criteria, to the Continued Stay Criteria, and through the Discharge Criteria. It is the hope that these Discharge Criteria will help both the providers and ValueOptions® define when consumers may be able to benefit from increased autonomy and responsibility in reaching their recovery goals.

As of Monday, February 6, 2012, the following discharge criteria will be added to the MNC for each of the above stated levels of care.

Discharge Criteria for PRP Services

(I or II) and III are necessary for planned transitions from PRP services:

I. The referring and licensed mental health clinician no longer certifies the consumer for PRP services

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II. The consumer no longer meets the admission criteria *And*

III. The following goals of PRP have been met



- A. Stable housing
- B. Stable daily structure (employment, school, or home/community-based activity)
- C. Consumer is engaged with mental health treatment
- D. Independent practice of basic living and social skills
- E. Competent decision making regarding self-care, illness management, and daily structure
- F. Connection with community resources

Discharge Criteria for TBS Services (PMHS Consumers only)

Any one of the following is necessary for planned transitions from TBS services:

- A. The consumer turns 21 years old
- B. The current behaviors no longer put the consumer at risk of out of home placement
- C. The consumer (consumer's family) has reached maximum benefit from TBS services as evidenced by the current care being more habilitative (rather than rehabilitative), custodial, or more focused on activities of daily living
- D. The parent, guardian or the individual who customarily provides care is no longer a pivotal part of the behavioral plan, or when the care giver fails to participate as outlined in the behavioral plan
- E. The parent, guardian or the individual who customarily provides care has learned to implement the behavioral plan and can continue to independently do so with consultation as needed from an outpatient therapist
- F. TBS has proven inadequate in addressing the consumer's needs. Therefore additional or more intensive services are clinically indicated

Discharge Criteria for MTS/ACT Services

I or (II, III, and IV) are necessary for planned transitions from MTS/ACT services:

I. A period of transition (as evidenced by overlapping authorizations between MTS/ACT and a less intensive service) has demonstrated the consumer's ability to engage, participate in, and benefit from less intensive services

Or

- II. There is little to no threat of hospitalization or incarceration as evidenced by both:
 - No significant psychological, personal care, or social impairment
 - No significant threat to self, property, or others



And

III. There has been no Emergency Department utilization and no mental health crisis services (as evidenced by services provided by the MTS/ACT during evening or weekend hours) in the last 6 months

And

IV. The consumer no longer requires an intensive, assertive, multidisciplinary treatment team to develop/restore specific independent living skills