Ceasing Admissions to Regional Psychiatric Hospitals

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Overview

• Criteria to Cease Admissions
• Plan for Continued Access
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• Documentation and Reporting
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Criteria to Cease Admissions to RPHs

• The Regional Psychiatric Hospital (RPH) has activated Trigger IV on the Regional Psychiatric Hospital Pandemic Plan.
  • Trigger IV: Three cases of a pathogen have been identified in the hospital or group homes.

• A critical staffing level has been reached.
  • A critical staffing level is defined as the following: A nursing staff to patient ratio of one to eight (1:8). Ratios include a minimum of one RN on each unit.
Plan for Continued Access

• Should admissions to one or more OhioMHAS RPH(s) be ceased, indigent civil admissions may be placed at other psychiatric hospitals located within the catchment area(s) of said RPH(s).

• Patients are deemed indigent per:
  • The absence of enrollment in Medicaid, Medicare, or private insurance via insurance eligibility portals.
  • A lack of financial means to pay for hospitalization out of pocket.

• To be eligible to accept indigent civil admissions, psychiatric hospitals must have an OhioMHAS license in good standing.

• A list of approved psychiatric hospitals will be provided to the affected ADAMH Boards should admissions be ceased.
Coordinating Admissions

• ADAMH Boards within the affected catchment area will coordinate and authorize all indigent civil admissions to an approved psychiatric hospital.

• The ADAMH Boards should work with the psychiatric hospitals directly to refer patients for admission through single case agreements or a devised contract.

• The period of which admissions may be referred to an approved psychiatric hospital will be determined and communicated by OhioMHAS.
Reimbursement and Continued Stay Reviews

- OhioMHAS will reimburse the ADAMH Boards at $750 per day (including professional fees) for a hospitalization length of stay of up to 11 days.

- Hospitalizations that warrant a length of stay longer than 11 days will require ongoing clinical review and approval through the referring ADAMH Board.
  - Reviews should focus on the clinical presentation that demonstrates the need for ongoing hospitalization (i.e. safety concerns).
  - The ADAMH Board may contact Caitlin Beha Worth, Director of Clinical Services, Hospital Services at OhioMHAS for assistance in determining the need for continued hospitalization.
Reimbursement and Continued Stay Reviews (Continued)

• Should a continued stay review be denied, the ADAMH Board should work with the psychiatric hospital to coordinate a timely, safe discharge on behalf of the patient.

• Should the admission to the psychiatric hospital continue past the date of authorization, the patient shall **NOT** incur any cost or bill for services.
Documentation and Reporting

• Throughout the period of which admissions to the RPH(s) are ceased, the affected ADAMH Boards will provide weekly progress reports to OhioMHAS documenting diverted admissions from their RPH to other psychiatric hospitals.

• Documentation to include:
  • Patient identifier
  • Date of admission
  • Psychiatric Hospital of Placement
  • Length of Stay

• A standard reporting form will be provided by OhioMHAS.
# Twin Valley COVID Diversion
## Reimbursement Funding Application

The Twin Valley COVID Diversion Program, provides temporary assistance limited to $750 per day not to exceed eleven days unless approved board clinical review is on file.

Prior to considering these funds, other sources of funding and resources, such as the patient’s insurance, Medicare, Medicaid Managed Care Plan or self-funded should be reviewed.

For tracking purposes, this one page form and copies of any financial reviews are to be sent by e-mail to: Caitlin Beta Worth and Daniel Schreiber

<table>
<thead>
<tr>
<th>Board Name:</th>
<th>Date of Request:</th>
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<tr>
<td>Board Contact Name:</td>
<td>Contact Email:</td>
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<td>Reporting Period (one week period Sunday - Saturday):</td>
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<tr>
<th>Client Identification (name of client or agency)</th>
<th>Date of Admission</th>
<th>Admission Facility</th>
<th>Admission Reported on Form Period (check of Yes)</th>
<th>Number Days Requesting Reimbursement (in this period)</th>
<th>Approved Board Clinical Review on File (check of Yes)</th>
<th>Funds Requested</th>
<th>Proof of Indigency Provided (check of Yes)</th>
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Total: 2

Total: $1200

Board Representative Signature

Hospital Service Signature

Please e-mail applications to: Caitlin.BetaWorth@mhba.ohio.gov and Daniel.Schreiber@mhba.ohio.gov
Management Tips

• Designate one ADAMH staff member (preferably clinical) to coordinate this program. Duties to include:
  • Ongoing communication with approved psychiatric hospitals to establish single case agreements/contracts, coordinate referrals, conduct continued stay reviews, and gather discharge information and billing.
  • Documentation and weekly reporting to OhioMHAS

• Identify one Business Office representative at each approved psychiatric hospital to provide regular length of stay updates and billing summaries.
  • It is recommended that ADAMH Boards require regular (if possible, daily) length of stay updates from each hospital of which patients are admitted.
  • Note: The day of discharge is not a day that is counted towards total length of stay.

• Identify one clinical representative at each approved psychiatric hospital to coordinate continued stay reviews and the reporting of other clinical information.
Contact Information

• Caitlin Beha Worth
  • Director of Clinical Services, Hospital Services, OhioMHAS
  • Caitlin.BehaWorth@mha.ohio.gov
  • 330-414-7120 (cell)

• Merissa McKinstry
  • Deputy Director, Hospital Services, OhioMHAS
  • Merissa.McKinstry@mha.ohio.gov
  • 614-746-6265 (cell)

• A weekly check-in call will be offered throughout the period of ceased admissions to address concerns and gather feedback.
http://mha.ohio.gov/

Join our OhioMHAS e-news listserv for all of the latest updates