CHECKLIST

DOCUMENTATION WHEN TRANSFERRING A PATIENT DURING AN ONGOING PSYCHIATRIC EMERGENCY CONDITION

➢ The Medical Record contains the following documentation:
  □ The treating physician determined the patient is experiencing a psychiatric emergency condition;
  □ Transfer to access specialized psychiatric care is medically necessary to stabilize the psychiatric emergency condition;
  □ Transfer order is initiated and signed by treating physician, and identifies accepting inpatient unit or stand-alone psychiatric hospital;

➢ Emergency Department Initiates a Medically Appropriate Transfer:
  □ Initiate appropriate transfer or admission per standard protocol;
  □ Attempt to ID patient’s health plan and contact information;
  □ Both transferring and accepting hospital must notify the Plan.

➢ Provide Notice to Health Plan: Facts, facts, facts
  □ The identity of the Plan’s intake person, date and time of call, and name of hospital staff that provided the notice to the plan.
  □ All factual information related to the call (including any re-directed call).
    ▪ Only a single call is required to give notice;
    ▪ Prior authorization is not required for covered mental health condition or SMI/SED parity condition of an enrollee in a managed care plan.
  □ Provide relevant or requested patient information necessary to determine coverage;
  □ Patient is experiencing ongoing psychiatric emergency condition that requires specialized psychiatric care;
  □ Any other factual information provided to or requested by the Plan during the call including the patient’s name; patient’s condition (emergency condition); the name of transferor and transferee hospital or unit.
QUICK TIPS

☐ Providers must medically evaluate and treat an emergency condition until stable.

☐ The care and treatment required to stabilize a covered or parity mental health condition (SMI/SED) does not require prior authorization.

☐ Post-Stabilization care is subject to prior authorization

☐ Hospitals must notify the Plan of the transfer from the ED to a hospital unit or acute psychiatric hospital.

☐ Voluntary or Involuntary status is irrelevant to prior authorization

☐ Contact the Provider Oversight Unit for Provider Assistance

☐ Provide the patient/family members with HMO Help Center number

☐ Educate Clinical and Administrative staff of the Notice of Transfer requirements

☐ Document, document, document the facts, facts, facts!