Discharge Procedure

Overview

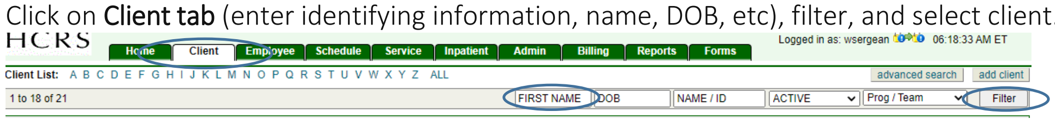
This document outlines the procedure for the Discharge Process, when a Client chooses to not be a part of treatment at HCRS or no longer meets criteria for medical necessity.

Directions

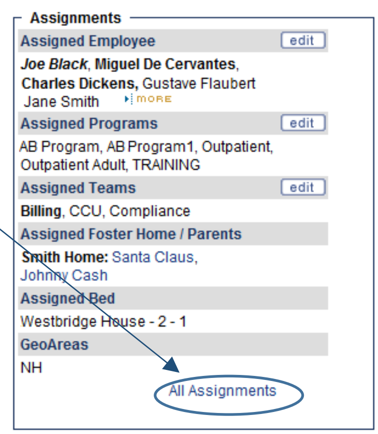
PROGRAM Discharge

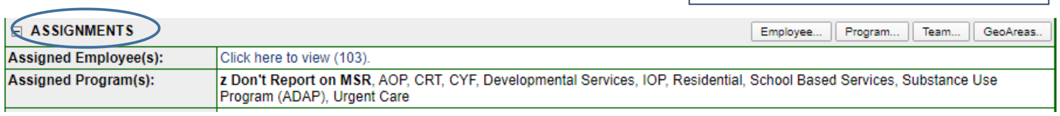
<u>Any Assigned Staff:</u>

1. Click on **Client tab** (enter identifying information, name, DOB, etc), filter, and select client.



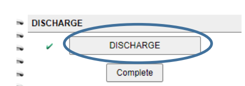
2. Review open programs **Assignments** section.
   a. On the navigation bar click **Overview** (default view when entering a chart is Overview).
   b. Scroll down to **Assignments** section
      i. Click **All Assignments** to view the complete list of enrolled programs/employees
   c. The Client Profile screen displays
      i. Scroll down to find the **Assignments** section for complete list of assigned programs.

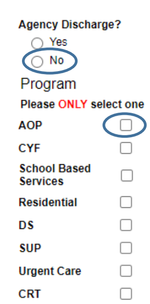


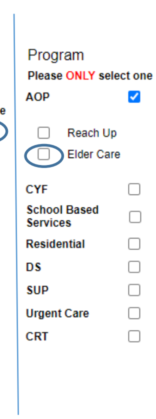


   d. Once all programs/employees have been identified, *collaborate* with primary providers in other programs to determine who will close out which program.
      i. Don't forget to check for ****Medical Service,*** and collaborate with medical team.

3. Schedule a **Discharge Service** within the employee schedule tab ([Schedule a Service]()) and begin service.
   a. Click **Discharge** to open the service/form.
   b. Click **No** for Agency Discharge (as you are just closing a program)
   c. Select Scheduled **Program** (the prefix before the scheduled service name, example: <u>AOP:</u> Discharge, <u>CYF:</u> Discharge)
   d. Select micro programs (example: Reach Up (AOP) or Hilltop (Residential) from the drop down if applicable, if *not* continue with the next step
   e. Complete <u>**all**</u> fields within service (Date of Admission through Additional Information about Referrals).
   f. Click **Complete**
   g. Click **Complete** again.
   h. Review Billing strip, [Sign and Submit Service]().







4. Complete program required Dynamic Forms.
    a. ***CYF**: complete discharge CANS if client is discharged from the entire Program (CYF)*
    b. ***CRT:** Complete CRT disenrollment form*
    c. ***SUP**: Complete the SATIS service*
    d. ***RES**: Complete LOCUS on paper form, scan to res/admin folder, complete LOCUS summary in Credible*

<u>AREA MANAGER</u>:

1. Check for any Red s/incomplete work

2. If the service is set up for multi stage approval it will show on the area manager's "My Multi-Stg" on their services list. If not, the sending staff would need to send a Detailed To-Do. The Area manager should audit the note for clinical content and completeness.
    a. Complete audit and approve service

<u>ADMIN ONLY</u>: Once the Area manager has audited and approved, Admin will:

1. Remove future appointments
2. Terminate program-specific insurance (keep all others and self-pay)
3. Check not-approved services
4. Change primary program:
    a. In profile (MSR/Intake)
    b. On Navigation Bar
5. Unassign client from the ***team*** that corresponds with the program being discharged
6. Update Episode:
    a. Click on **Episode** on the navigation bar
    b. Change the **Primary Program** to the remaining program
    c. Enter the **Effective Date** of the new Primary Program
7. Pass or Red X services

AGENCY Discharge

(MSR is embedded)

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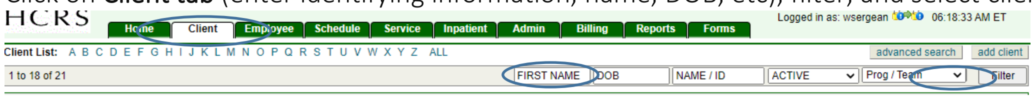

2. Review open programs **Assignments** section.
   a. On the navigation bar click **Overview** (default view when entering a chart is Overview).
   b. Scroll down to **Assignments** section
      i. Click **All Assignments** to view the complete list of enrolled programs/employees
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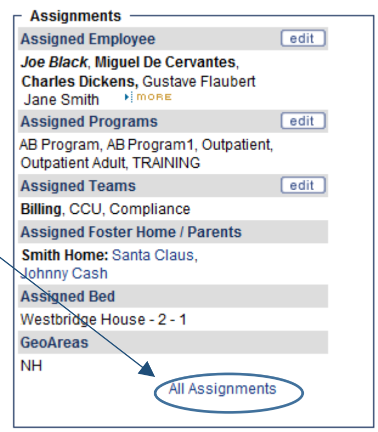
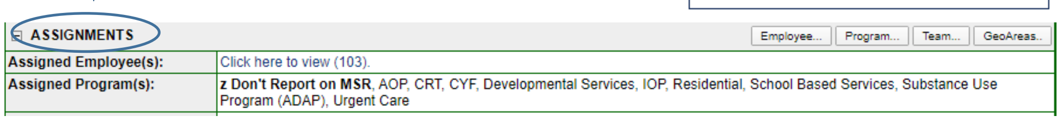
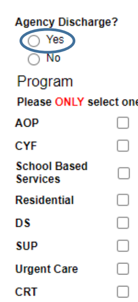




   d. Once all programs/employees have been identified, *collaborate* with primary providers in other programs to determine who will close out which program.
      i. Don't forget to check for ****Medical Service,*** and collaborate with medical team.

3. Schedule a **Discharge Service** within the employee schedule (Schedule a Service)
   a. Click **Discharge** to open the service/form.
   b. Select **YES** for Agency discharge
   c. Click program being closed (should be the only program open)
   d. Complete <u>all</u> fields within service (Date of Admission through Additional Information about Referrals).
   e. Ensure diagnosis ICD 10 code is entered
   f. Click **Complete**
   g. Click **Complete** again.
   h. Review Billing strip, Sign and Submit Service.



4. Complete program required Dynamic Forms.
   a. *CYF: complete discharge CANS if client is discharged from the entire Program (CYF)*
   b. ***CRT:*** *Complete CRT disenrollment form*
   c. *SUP: Complete the SATIS service*
   d. *RES: Complete LOCUS on paper form, scan to res/admin folder, complete LOCUS summary in Credible*

AREA MANAGER:

1. Check for any Red Xs/incomplete work

   a. If the service is set up for multi stage approval it will show on the area manager's "My Multi-Stg" on their services list. If not, the sending staff would need to send a Detailed To-Do. The Area manager should audit the note for clinical content and completeness.
      a. Complete audit and approve service

ADMIN ONLY: Once the Area manager has audited and approved, Admin will:

1. Remove future appointments
2. Terminate Insurance
3. Check Not-Approved Services
4. Update Episode (click **Episode** on the Navigation bar)
   a. Enter ***discharge date***
   b. Change episode status to ***Closed***
5. Pass or Red X services
6. Unassign the client from:
   a. The ***team***
   b. The ***program***
   c. The specific assigned ***staff***
7. Inactivate the client within Client Profile:
   a. Client status to **Inactive**
   b. Update client profile: enter the Agency Discharge Date under "MSR Discharge Fields"