| Policy Number | 406 |
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| Policy Title | Mental Health Adult Services Short-Doyle/Medi-cal Administrative Days |
| References | DMH Letter 86-27 |
| Form | 404-A, Administrative Days Record Of Contact |
| Effective | September 15, 1986 |
| | Revised: January 3, 1994 |
| | Revised: April 4, 2006 |

Policy

Short-Doyle/Medi-Cal (SD/MC) reimbursement for administrative days is limited to those days authorized by the physician review or UR Committee in an acute inpatient facility when the patient's stay must be continued beyond the point of medical necessity pending the availability of an Institute of Mental Disease (IMD) or Crisis House vacancy.

To qualify for SD/MC reimbursement of administrative days, the acute facility must implement and document an active placement effort on behalf of the client which includes, at a minimum, direct contact with at least five (5) different IMD's or Crisis House, or the number of such facilities that will only accept the client, if less than five, every five days, excluding Saturdays, Sundays and holidays, until such time as the client is successfully placed or no longer requires IMD, Crisis House level of care. A client on administrative days status becomes ineligible for SD/MC reimbursement when he/she no longer requires IMD, Crisis House placement in order to leave the acute unit or when the facility elects to terminate the required placement effort. A client may be returned back to medical necessity status, when he/she meets again the medical necessity criteria of level of care while waiting IMD, Crisis House placement.

Procedure

- 1. When the inpatient psychiatric team determines the client does not meet anymore the medical necessity criteria, but has not available placement for him/her for the level of care he/she requires, the treating team psychiatrist will write an order in the Physician Order form of placing the client on administrative days.
- 2. NMC-UR nurse will document the change of status from medical necessity to administrative day status.
- 3. Psychiatric staff at Natividad Medical Center shall work in conjunction with their discharge coordinator to refer clients to the Behavioral Health Adult Services liaison staff.

- 4. Behavioral Health Adult Services liaison shall have the responsibility to determine which of the locked psychiatric IMD for IMD, Crisis House is best suited for the client and to make direct contact with the selected facility to arrange placement. If immediate placement cannot be arranged, Behavioral Health Adult Services liaison will place the client's name on an admissions waiting list. Behavioral Health Adult Services staff will contact the hospital staff regarding the client's status on the waiting list.
- 5. The inpatient social worker shall document an active placement effort on behalf of the client which includes, at a minimum, direct contact with the prescribed number of facilities each week excluding Saturdays, Sundays and holidays, until such time as the patient is successfully placed or no longer requires IMD level of care. These contacts shall be documented in the client chart
- 43 (Progress Notes) weekly to include but not limited to:
- 44 a. Date of call or contact.
- 45 b. Facility contacted.
- c. Person contacted.

- d. Status of placement waiting list.
- 48 e. Signature of inpatient staff.
 - 6. Dates shall be collected by providers on all patients who remain hospitalized on administrative day status. The information shall be reported quarterly to Behavioral Health Administration.