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Mental Health Hospital Placements

The purpose of this Practice Alert is to stress that when a child is hospitalized it is best practice to begin working on discharge planning **immediately, upon admission** to the hospital. See manual reference [CWM Sn4Ch2SubSn5 Mental Health Placements](#). A psychiatric hospitalization addresses an acute mental health episode where safety of the youth cannot be maintained in a community setting. This is short-term emergency care. Timely discharge planning enables the team to determine appropriate placement, whether that be in a foster home or residential setting. It also prevents the youth from staying over the certified number of days MO HealthNet will reimburse.

MO HealthNet provides payment to enrolled providers for inpatient days certified as medically necessary by its review authority, Conduent. Conduent uses the *Milliman Care Guidelines* screening criteria to establish the initial length of stay assignment. This is the number of days MO HealthNet will reimburse the hospital. Conduent may approve additional days upon the provider's request if hospitalization remains medically necessary at the time the initial certification is due to expire. Children's Division or the respective FCCM agency is financially responsible for any days the child remains in the hospital beyond those certified as medically necessary and, thus, reimbursed by MO HealthNet.

The case manager and supervisor should continually assess what least restrictive setting is appropriate for the child, while maintaining frequent communication with the hospital. If that least restrictive setting requires a referral, such as for Youth with Elevated Needs or residential treatment, then the referral should be completed and sent to the appropriate contact as soon as that decision is made.

The discharge plan determines whether it is the responsibility of the Regional Director or RCST Coordinator to approve extra days. Payment shall be issued to the hospital for any days not reimbursed by MO HealthNet:

- If the discharge plan is to a setting the case manager arranges, such as a foster home or emergency residential, then the Children's Division circuit or FCCM agency is responsible for paying for days not covered by MO HealthNet. *Please note: for Children's Division, this payment will come out of the circuit's CTS funds.*
- If the discharge plan is to a setting arranged by the RCST Coordinator, such as residential treatment, then the RCST Coordinator or FCCM agency will request/arrange payment for the days not covered. This is contingent on the referral being approved by the RCST as the least restrictive setting that is appropriate for that child.

Please direct questions through the normal channels of supervision.