

PerformCARE®		Policy and Procedure
<b>Name of Policy:</b>	Family Based Mental Health Services (FBMHS) in the Emergency Department	
<b>Policy Number:</b>	CM-CAS-036	
<b>Contracts:</b>	<input checked="" type="checkbox"/> All counties <input type="checkbox"/> Capital Area <input type="checkbox"/> Franklin / Fulton	
<b>Primary Stakeholder:</b>	Clinical Care Management	
<b>Related Stakeholder(s):</b>	None	
<b>Applies to:</b>	Providers	
<b>Original Effective Date:</b>	01/01/06	
<b>Last Revision Date:</b>	06/27/24	
<b>Last Review Date:</b>	06/27/24	
<b>OMHSAS Approval Date:</b>	N/A	
<b>Next Review Date:</b>	06/01/25	

**Policy:** To ensure that families receiving FBMHS have access to the FBMHS team while in an Emergency Department.

**Purpose:** To ensure that FBMHS occur in the Emergency Department to assist in assessment of the Member, provide support to the Member or Family and provide information to the Emergency Department staff.

**Definitions:** None

**Acronyms:** **FBMHS:** Family Based Mental Health Services  
**ED:** Emergency Department

**Procedure:**

1. PerformCare expects that the FBMHS provider see the identified child in treatment if the Member/Family is in the ED requesting psychiatric services. One goal of the face-to-face contact in the ED is to provide information to the ED staff to assist them in making a level of care recommendation and to explore options to divert inpatient care such as increasing FBMHS contact during the crisis period. Another goal is to provide support to the Member/Family during the assessment period.
2. The FBMHS provider is responsible for ensuring the appropriate releases of information when sharing information with crisis intervention providers about Member in service. A letter of agreement between the FBMHS provider and the crisis intervention services provider must be developed to

carve out how to screen for FBMHS's clients and coordination of services between the two agencies. This letter needs to include the FBMHS's role in helping to assess the need for additional service for all the children in the family, and if the agency is to be involved to support the children if the parent is hospitalized.

3. If inpatient is the level of care determined necessary to meet the Member's needs and PerformCare has approved the request, it is not expected that the FBMHS provider stay at the ED until the bed search is completed. If the FBMHS provider believes there is a reason to do so, they must contact PerformCare to discuss the needs of the Member/Family.
4. The FBMHS provider is not to duplicate services of the inpatient unit when a child has been admitted to an inpatient level of care. Services delivered to the child during the time of inpatient should center on coordination of care and discharge planning.
5. Medically necessary services that fall within the scope of FBMHS may continue to be delivered by the FBMHS provider to the other family members outside of the hospital.
6. If the ED in collaboration with FBMHS and other team members including the Member/Parent/Guardian determine that diversion from ED is indicated then the FBMHS will assure after care services are scheduled prior to the Member being discharged for the ED. FBMHS will notify PerformCare of after care plans.
7. FBMHS should coordinate and establish after care appointments prior to the Member being discharged from the ED when FBMHS is given prior notification of discharge. If no prior notification, then FBMHS should outreach to the family within one (1) business day of notification. The following appointments should be established:
  - 7.1. FBMHS should set up a follow up appointment with FBMHS team with Member and family when discharged from ED.
  - 7.2. Coordinate and assist with setting up all other needed behavioral health treatment appointments (i.e., Medication Management).

**Related Policies:** *CM-CAS-035 Family Based Mental Health Services (FBMHS)  
Provider Transition Process for Families Moving Between  
County Funding and PerformCare  
CM-CAS-037 Family Based Mental Health Services (FBMHS)  
Prior to Discharge in a Residential Treatment Facility (RTF) or  
CRR-Host Home*

*CM-CAS-038 Family Based Mental Health Services (FBMHS) in  
Conjunction with Targeted Case Management (TCM)  
CM-CAS-040 Discharge Planning from FBMHS  
CM-CAS-041 Family Based Mental Health Services (FBMHS)  
and use of Family Support Services (FSS)  
CM-CAS-044 Procedure to Request Additional Service Units  
During an Authorization Period and Extension Requests for  
Family Based Mental Health Services (FBMHS)  
CM-CAS-051 Procedure for Prior Authorization for Family  
Based Mental Health Services (FBMHS)  
CM-CAS-057 Children's Service Provider Transfer Process*

**Related Reports:** *None*

**Source Documents  
and References:** *None*

**Superseded Policies  
and/or Procedures:** *None*

**Attachments:** *None*

Approved by:



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Primary Stakeholder