

BAAS GENERAL MEMO (GM)	
GM NUMBER:	24-13
TO:	Director of Division of Long Term Supports & Services Director, Melissa Hardy; ALL BAAS Staff and Case Management Agencies
FROM THE OFFICE OF:	Bureau Chief, Adult & Aging Services (BAAS), Wendi Aultman
SIGNATURE:	
SUBJECT:	Case Management Agency Discharge Requirements & Procedures
EFFECTIVE DATE:	Upon Release
REGULATORY GUIDANCE:	This memo is a communication tool circulated for informational purposes only. The goal is to provide information and guidance to the individuals to whom it is addressed. The contents of this memo and the information conveyed are subject to change. This communication is not intended to take the place of or alter written law, regulations or rule.

SUMMARY

The purpose of this memorandum is to distribute Provider Notice (PN) 24-13, *Case Management Agency (CMA) Discharge Requirements & Procedures*. PN 24-13 provides clarification regarding the process and requirements for home health care providers, including CMAs to discharge participants.

Upon release this PN will be available internally on the (N:) drive, in the BAAS folder for staff to access. Providers should also retain a copy for reference. This memo with the attached PN will also be available electronically on the DHHS website at [Bureau of Adult and Aging Services \(BAAS\) General Memos | New Hampshire Department of Health and Human Services \(nh.gov\)](http://www.nh.gov/BureauofAdultandAgingServices/BAASGeneralMemos)

Provider Notice Title: Case Management Agency Discharge Requirements and Procedures	Number: 24-13
	Effective Date: Upon Receipt
	Reviewed By: Kristina Ickes, Wendi Aultman & Melissa Hardy
Purpose: The purpose of this Provider Notice is to clarify the process and requirements for Case Management Agencies to discharge participants. Case Management Agencies licensed under RSA 151:2-b and Medicaid enrolled to provide Targeted Case Management to participants of the 1915c Choices for Independence (CFI) Waiver, must ensure all elements of the RSA 151:26-a are met when discharging a CFI participant.	

Requirements:

(A) Home health care providers must prepare a discharge plan and include **any other professional** involved in the plan of care. The Case Management Agency (CMA) must inform the Bureau of Adult and Aging Services (BAAS), of discharges related to Choices For Independence (CFI) participants to allow BAAS to continue CFI services through another CMA.

(B) The CMA can only discharge for a reason specified in RSA 151:26-a. The reason must not violate the patient bill of rights pursuant to RSA 151:21-b or Title XVIII and Title XIX of the Social Security Act. The CMA may discharge a participant **with a 14-day notice** if:

1. The availability of home health care or community support services is no longer sufficient to meet the change in the participant’s needed care;
2. The necessary staff is no longer employed by the CMA and the CMA does not have other staff available *i.e.* staff turnover; or
3. The participant, participant’s representative or a household member is non-compliant with the participant’s plan of care **and**:
 - a. Non-compliance with the plan of care has or will lead to immediate deterioration of the participant's condition, such that home health care will no longer be appropriate; or
 - b. Non-compliance will make achieving therapeutic goals impossible; **and**
 - c. The potential outcome for not complying with the plan of care has been explained to the participant and the source of the non-compliance (household member or representative).

(C) The CMA may discharge a participant with **less than 14 days** notice *i.e.* immediately if:

1. The participant requests services be discontinued;
2. An emergency discharge is mandated by the participant’s health care needs and is in accordance with written orders from the participant’s ordering physician or authorizing provider;
3. The participant no longer needs services as confirmed by the participant’s ordering physician or authorizing provider;
4. The participant closes CFI; **or**
5. Conditions in or around the home threaten the safety of the CMA and the CMA knows the following conditions exist:
 - a. Actual or probable assault;
 - b. Severe verbal threats that interfere with the ability to provide services or create concern for safety; or
 - c. Other circumstances likely to cause injury.

(D) The CMA must provide notification of the discharge to the participant, participant’s representative, participant’s provider(s) and to BAAS, while working with other providers to ensure the participant’s safety in the discharge.

(E) **For immediate discharges** the CMA must provide immediate notification to the participant, participant’s representative, BAAS, and any other applicable providers. The CMA must make a report to Adult Protective Services, Child Protective Services, or law enforcement if appropriate, *i.e.* if the participant (or a minor child with the participant) will be at risk. The written notice may be provided 5 days later for immediate discharges.

Procedure:

(A) Prior to discharge:

1. All participants are risk of discharge should be brought to BAAS for technical assistance when possible.
2. BAAS will provide technical assistance to the CMA in efforts to support the CMA’s reasonable attempts to resolve the circumstances that may lead to a discharge and prevent untimely discharges.
3. If appropriate, a referral to Case Review Consultation Committee (CRCC) or Inter-agency Integration Team (IIT) may be suggested prior to discharge; and
4. BAAS will provide support to the CMA to ensure a safe discharge plan is in place for the participant.

(B) In order for the CMA to discharge a participant, the CMA must provide a written notice to the participant or the participant’s legal representative that at minimum includes the following:

1. Reason for the discharge must be plainly stated;
 - a. BAAS advises the CMA to provide specific facts as to why they are discharging a participant and to comply with the requirement that a discharge notice clearly states the reason for the discharge.

Example: The CMA cannot simply state in the notice that the “Participant is non-compliant with their plan of care.” Instead, the notice must state the specific instances that led the CMA to the discharge decision, such as:
“The participant was never available to discuss case planning. The CMA attempted to call on XXX (list dates & times in notice). The CMA also attempted to visit the participant on XXX (list dates & times in notice). The participant was non-responsive etc.’
 - b. The discharge notice should only contain instances that the CMA sending the letter observed.

Example: If the first CMA has a case manager who is yelled at by a participant, the second CMA cannot use that as a reason for discharging the participant. The discharge reasons that the second CMA uses must have been observed by the second CMA.
2. Effective date of discharge;
3. Identity of incoming provider, if any;
4. The steps a participant can take to reinstate services, if any;
5. The contact information for the state of New Hampshire and Federal regulatory agencies; **and**
6. Information for the Administrative Appeals Unit (AAU).

(C) Once the notice of discharge has been sent to the participant and the participants responsible party (if applicable), a copy must also be provided to the ordering physician or authorizing health care provider, and the case manager, if any, and must also be included in the participant’s clinical record.

(D) The CMA will also email the discharge notice to CFICMDischarge@DHHS.NH.Gov

(E) BAAS Long-Term Care (LTC) Medical unit will review the discharge details and the participant’s preferred CMA. If the participant has no preference, BAAS will make an assignment to a new CMA through a system maintained by BAAS pursuant to He-E 805.

(F) If a CFI participant disagrees with the CMA’s decision to discharge, BAAS staff can connect them to AAU.

(G) The BAAS LTC Medical unit will inform the New Hampshire Department Health and Human Service’s Health Facilities Administration-Licensing Unit, when the statutory process or the patient bill of rights is not being followed.

Responsibility: Case Management Agencies

Resources: RSA 151:9; RSA 151:21-b; RSA 151:26-a; He-E 805; 42 USC § 1396n(g); Title XV111 and Title XIX of the Social Security Act.