



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

November 14, 2014

GENERAL LETTER NO. 3-A-8

ISSUED BY: Division of Mental Health and Disability Services

SUBJECT: Employees' Manual, Title 3, Chapter A, **MENTAL HEALTH INSTITUTES**, Contents (pages 2 and 3), revised; and pages 47 and 48, revised.

Summary

Chapter 3-A is revised to add instructions for billing admissions under Iowa Code Chapter 812.

Effective Date

July 1, 2014

Material Superseded

This material replaces the following pages from Employees' Manual, Title 3, Chapter A:

| <u>Page</u> | <u>Date</u> |
|-------------------|------------------|
| Contents (page 2) | January 31, 2014 |
| Contents (page 3) | July 2, 2010 |
| 47, 48 | January 31, 2014 |

Additional Information

Refer questions about this general letter to the administrator of the Division of Mental Health and Disability Services.

| | <u>Page</u> |
|---|-------------|
| Approval of Application or Commitment | 38 |
| All Voluntary Applications or Commitments..... | 38 |
| Mental Health or Dual Diagnosis Admission..... | 40 |
| Mental Health Involuntary Admission | 40 |
| Emergency Admission: Iowa Code Section 229.22 | 41 |
| Documentation of Law Enforcement Notification | 41 |
| Substance Abuse Voluntary Admission | 42 |
| Substance Abuse Involuntary Admission | 42 |
| Mental Health or Substance Abuse Private-Pay Admission..... | 43 |
| Informed Consent..... | 43 |
| Individual Notification on Restraint and Seclusion | 44 |
| Core Data Sheet | 44 |
| Readmission | 45 |
| Admission Performance Improvement..... | 45 |
| Admission Data Collection and Review | 45 |
| Admission Reporting Requirements | 47 |
| Admission Employee Training | 47 |
| Billings for Inpatient Mental Health and Substance Abuse..... | 48 |
| Iowa Code Chapter 812 Billings | 48 |
| Policy on Outpatient Services and Community Consultation | 48 |
| Outpatient Treatment..... | 48 |
| Outpatient Admission Approval | 48a |
| Outpatient Billings | 48a |
| Outpatient Treatment Billing Rate for Individual Counseling | 48a |
| Outpatient Treatment Billing Rate for Day Treatment | 48b |
| Private-Pay Outpatient | 48b |
| Community Consultation..... | 48b |
| Community Consultation Billing Rate | 48b |
| Community Consultation Billings | 48c |
| Direct Medical Services..... | 48c |
| Billing Direct Medical Services..... | 48c |
| Policy on Court-Ordered Evaluations | 48c |
| Evaluations Principles | 48d |
| Reports to the Court | 48d |
| Mental Health Evaluation | 49 |
| Competency to Stand Trial Evaluation..... | 49 |
| Insanity or Diminished Responsibility Evaluation | 50 |
| Substance Abuse Evaluation..... | 50 |
| Substance Abuse Sentencing Evaluation..... | 51 |

| | <u>Page</u> |
|---|-------------|
| Evaluation Billings..... | 51 |
| Court Report Performance Improvement..... | 51 |
| Court Report Data Collection and Review..... | 52 |
| Court Report Reporting Requirements..... | 52 |
| Court Report Employee Training on Court-Ordered Evaluations..... | 52 |
| Policy on Treatment and Treatment Plans..... | 53 |
| Treatment Principles..... | 53 |
| Treatment Services..... | 54 |
| Assessment..... | 55 |
| Clinical Admission Assessment..... | 55 |
| Comprehensive Assessment..... | 56 |
| Treatment Plans..... | 57 |
| Education Plan..... | 58 |
| Plan Time Lines..... | 58 |
| Plan Coordination..... | 59 |
| Court-Ordered Treatment..... | 59 |
| Incompetent to Stand Trial Under Iowa Code Section 812.6..... | 59 |
| Insanity or Diminished Responsibility: Iowa Code Section 2.22(8)..... | 60 |
| Treatment Records..... | 60 |
| Court Reports on Involuntary Commitments..... | 61 |
| Mental Health or Substance Abuse Commitments..... | 61 |
| Incompetent to Stand Trial Under Iowa Code Section 812.6..... | 61 |
| Insanity or Diminished Responsibility: Iowa Code Section 2.22(8)..... | 62 |
| Treatment Performance Improvement..... | 62 |
| Treatment Plan Monitoring..... | 63 |
| Treatment Data Collection and Review..... | 63 |
| Treatment Employee Training..... | 64 |
| Policy on Restraint and Seclusion..... | 65 |
| General Principles..... | 65 |
| Acceptable Methods of Restraint..... | 67 |
| Prohibited Restraint Actions..... | 67 |
| Acceptable Use of Seclusion..... | 67 |
| Prohibited Seclusion Actions..... | 68 |
| Orders for Restraint and Seclusion..... | 68 |
| Initiation of Restraint and Seclusion..... | 68 |
| Continuation of Restraint or Seclusion..... | 70 |
| Monitoring Restraint and Seclusion..... | 71 |
| Face-to-Face Assessments..... | 71 |
| Ongoing Monitoring..... | 71 |
| Termination of Restraint or Seclusion..... | 73 |
| Post-Event Analysis..... | 74 |
| Post-Event Individual Debriefing..... | 74 |
| Post-Event Debriefing..... | 75 |

Admission Reporting Requirements

Mental health institute written policies and procedures shall assure that:

- ◆ The monthly process for reporting admissions to the facility's management team is defined.
- ◆ The data collected shall be available for analysis by each data element collected.
- ◆ The facility shall provide the administrator's office with:
 - A monthly summary of applications received, approved, and denied,
 - A quarterly summary of the quality council's analysis of identified systemic issues, and
 - A quarterly summary of how the data analysis was used to improve the application process.

Admission Employee Training

Mental health institute policies and procedures shall assure that:

- ◆ New employees who will be responsible for processing admission applications and court orders shall receive competency-based training on the following topics:
 - State laws governing the admission and commitment of individuals to the mental health institute.
 - Mental health institute policy and philosophy on admitting individuals only when a professional determination is made that the mental health institute is the most integrated setting available for the individual.
 - Determination of residence.
 - The central point of coordination or regional administrator process.
 - Catchment areas.
- ◆ All employees responsible for processing admission applications shall receive annual competency-based training.
- ◆ Employee training shall be regularly documented in the training record for each employee in a manner that permits the information to be available individually and in aggregate form.

- ◆ Training curriculum shall be updated regularly to reflect changes in professional practices, laws, policies, and procedures.
- ◆ Training shall be implemented in a timely manner.

Billings for Inpatient Mental Health and Substance Abuse

Mental health institutes written policies and procedures shall assure that for all adult inpatient admissions, for either mental health or substance abuse treatment, the cost of care shall be billed to the individual's county of residence in accordance with Iowa Code Chapter 2230 and Iowa Code section 125.43.

Iowa Code Chapter 812 Billings

Mental health institutes written policies and procedures shall assure that, effective July 1, 2014, billing an admitted individual's county of residence under Iowa Code Chapter 812 shall be as follows:

- ◆ Individuals admitted under Iowa Code section 812.3 for evaluation shall be billed to the individual's county of residence.
- ◆ Individuals admitted under Iowa Code section 812.6(b) for treatment shall be considered a state case and not billed to the individual's county of residence.

Policy on Outpatient Services and Community Consultation

Mental health institutes may offer voluntary outpatient services to individuals. The goal shall be to prevent hospitalization and maintain the individual in an appropriate community setting. Outpatient services may include individual counseling or day treatment as part of the inpatient program.

Outpatient Treatment

Mental health institute written policies and procedures shall assure that:

- ◆ Application for outpatient treatment shall be made using the same process as an application for voluntary admission.
- ◆ Treatment shall be based on an assessment of the individual's need as defined in [Comprehensive Assessment](#).
- ◆ Treatment shall be based on a treatment plan as defined in [Treatment Plans](#).