

Protocol for Use of Region I SFUR Funds (revised 10-2020)

Diversion Project Goals –

1. **To reduce the utilization of state facilities by:**
 - **diverting individuals with Substance Use Disorders (or co-occurring Mental Health and Substance Use Disorders), to a clinically viable, appropriate placement alternative to hospital admission in situations where it is highly likely that hospitalization would occur if this alternative was not available for this individual. Such placement alternatives may include residential Substance Use Disorder treatment programs, detox programs, or crisis stabilization units (CSUs), hereafter referred to as “residential programs.”**
 - **And who have been determined to have no other methods of paying for the necessary residential services**
 - **expediting discharges from state hospitals, as appropriate, by facilitating “step down” transfers to less restrictive residential programs, minimizing length of stay in state hospitals to the greatest extent possible.**
2. **To provide reimbursement to residential programs for providing intensive acute care enabling a diversion or step down from inpatient hospitalization and, when possible, a direct return to the community.**
3. **To pay other associated costs for individuals’ admissions (including, but not limited to transportation costs to and from residential programs and necessary medication costs), as needed.**

| Step | Action Taken | Who Is Responsible |
|------|---|--------------------|
| 1 | Individual is screened for basic eligibility criteria for use of diversion funds <ul style="list-style-type: none"> • Is age 18 or above • Has been evaluated under an Emergency Custody Order (ECO) or otherwise assessed with the Uniform Preadmission Screening (PAS) with the PAS indicating that the individual would be at high risk for psychiatric hospitalization if no clinically viable and appropriate alternative placement was available • Requires residential treatment consistent with ASAM criteria • Truly indigent – no 3rd party payer or other resource to pay for care during that episode of care • Individual has either residency in Region I or is from “Out of State” | CSB |

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| 2 | CSB staff will ascertain bed availability at the residential program and make referral as appropriate | CSB |
| 3 | Transportation and other necessary costs associated with placement may be requested by CSB staff after determination that no other methods of payment are available. | CSB |
| 4 | The decision as to whether SFUR funds will be utilized will be made by the CSB, and in consultation with the residential program, based on clinical factors with treatment efforts focused on a discharge to the community. | CSB |
| 5 | If, during the admission to the residential program, the individual appears to clinically need a higher level of care, the residential program will communicate with the case management CSB to facilitate admission to a private or a state hospital in accordance with the Region I Regional Admissions Protocol | Residential Program |
| 6 | <ul style="list-style-type: none">• The CSB will monitor the individual's clinical status during the authorization period through contacts with the residential program, and phone or face-to-face contacts with the consumer if appropriate, all of which are documented in the CSB clinical record. The goal of this monitoring will be to continue to assess and plan for the direct discharge of the individual back into the community, or when warranted, to seek a higher level of care.• CSB will arrange follow-up care within three business days of discharge from a detox or SUD residential treatment program, as practicable. | CSB |
| 7 | <ul style="list-style-type: none">• CSB will complete a SFUR Authorization Form that documents that the individual meets eligibility requirements, including that no other funding sources are available, for use of SFUR funds.• The SFUR Authorization Form is faxed, along with the completed Uniform Preadmission Screening form, to the regional office and to the residential program. Beginning and ending dates of initial authorization are provided on the form. The CSB will retain the original SFUR Authorization Form.• Notification of the diversion admission will be made by the CSB staff who arranged the diversion | CSB |

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| | admission to appropriate CSB outpatient / case management staff so that planning for quick community service follow up can begin. | |
| 8 | Residential program will submit invoice to the referring CSB for authorized days, attaching a copy of the SFUR Authorization within 30 days of discharge. | Residential Program |
| 9 | <ul style="list-style-type: none">• CSB will pay residential program within 30 days of receipt of the billing invoice• CSB will submit a Reimbursement Request to the Regional Substance Use Diversion Clinician within 30 days of paying the residential program. | CSB |
| 10 | Regional Substance Use Diversion Clinician will approve the Reimbursement Request and fax to the fiscal agent board, who will send reimbursement directly to the approving CSB. | Regional Substance Use Diversion Clinician/Fiscal Agent Board |