

OOH REFERRAL PROCESS (YOUTH LINK WORKAROUND)
FOR USE by: CSA, Out of Home providers, DYFS/Case/Care
Managers

10-2-2009

1. a. CMO, YCM, UCM will electronically submit the OOH Referral Request, which must include Case/Care Manager (CM) and CM supervisor's contact information (phone and e-mail);

b. CCIS completes the Needs Assessment indicating out of home care is required; CSA assigns CM entity;

c. DYFS will complete a telephonic review which results in the Needs Assessment submitted by the Care Coordinator (CC);
2. The CSA CC reviews information and makes Intensity of Service (IOS) determination within 1 business day of receipt;
3. For IOS (TH, GH, RTC), the Care Coordinator (CC) will generate a list of providers consistent with IOS, age and gender;
 - The hierarchy from low to high is: TH, GH, RTC, SPEC, PCR. *Note: SPEC, PCR, and IRTS will continue to be exclusively managed through the SRTU;*
4. Care Coordinator will e-mail the Case Manager and their Supervisor (as identified in the OOH referral document) the following information:

SUBJECT LINE: ID#, Referral #, Age, Gender, IOS Determination, County of origin;
BODY OF E-MAIL: list of Specifiers (see list below), identified providers and the case management name and contact information;
5. Care Coordinator will copy the identified providers on the e-mail with the information included in #4 above and document all transactions in the youth's progress notes;
6. If an identified provider would like to pursue the referral, they will contact the case manager;
7. The Provider and Case Manager tasks remain as they are currently (i.e.-send referral packet, schedule meet-and-greet, etc);
9. To report admission, the provider calls the CSA:

1-877-652-7624
Select the OOH prompt #4,
then prompt #6
to report the admission.

The voicemail box greeting will prompt the provider to leave the following information:

- **Referral number;**
 - **Child/Youth/Young Adult's first and last name with spelling & ID;**
 - **Provider number (CIM#);**
 - **Actual Admission date;**
- .
- A Provider will not be able to admit a youth above their contracted capacity;
12. The CSA will generate an authorization for 120 days and record the admission in the youth's electronic record;
13. If denied admission, the OOH provider sends an e-mail to the CSA that includes:

OOHreferral@performcarenj.org
Subject line: Denial/Referral ID #
Message: Denial Reason Code (see list below)
CIM Number

- a. Denials will be documented by PerformCare in youth's progress notes;
14. 30+ days after the IOS determination has been made and OOH treatment has not been secured, the case manager should send a referral packet to the SRTU.
15. If a youth is pregnant or has a SPEC or PCR IOS, the youth should be referred directly and immediately to the Specialized Residential Treatment Unit (SRTU). The Care Coordinator will e-mail the identified case manager and their supervisor the confirmed IOS determination and the contact information for SRTU. Case management remain responsible for overnighting the referral Packet to:

DCBHS/Specialized Residential Treatment Unit (SRTU)
Attn: Eugenia Cason
50 East State Street, 4th Floor
Trenton, NJ 08625

15 Specifiers

- IQ under 69
- Suicide Risk
- Substance Abuse
- Assault
- Destructive Behavior
- Eating Disorder
- Psychiatric Condition
- Ed. Classified
- Pregnant
- Fire Starter
- Runaway
- Sexuality
- Age
- Sex Offender
- Gender

Denial Reasons

Codes

IQ	IQ
Educational Issues	ED
Youth/Family Declined	YF
Case Management - No timely response from Supervisor/ED	CMRESP
Medical Care not available	MDCRNA
Clinical-Psychiatric	CCPSYC
Clinical-Behavioral	CCBHAV
Incarcerated/Detained	JJ
Hospitalized	HOSP
Admitted Elsewhere	ADELSE
Remaining in present situation	REMAIN
Other	OTH*

*OTH requires an open-text explanation of denial by OOH provider