

Bulletin ID: No. 10 - MHRS Providers, Access to Care, System Capacity, Suspended Referral Status, and Routine, Urgent and Emergency Care

The purpose of this bulletin is to remind MHRS providers of their obligations under the MHRS certification standards, and applicable DMH policies, with respect to linking consumers to routine, urgent and emergency care. These obligations continue even when a provider is in a suspended referral status, in accordance with DMH Policy 200.3, Suspended Referral Status. DMH is also sending this bulletin to other stakeholders to address any misunderstanding or confusion in the community regarding how consumers can access services.

Under existing MHRS certification standards “[each MHRS provider shall establish and adhere to policies and procedures for handling routine, urgent, and emergency situations (Unscheduled Service Access Policy).” See 22A DCMR § 3410.15[1] (emphasis added). In addition, each MHRS provider that is certified as a core service agency (CSA), is further required to “operate an on-call system for its enrolled Consumers twenty-four (24) hours per day, seven (7) days per week, which is staffed by qualified practitioners to respond to urgent, emergency and routine situations (CSA On-Call System).” See 22 DCMR § 3411.5 (emphasis added).

Significantly under, DMH Policy 200.3, Suspended Referral Status, a CSA or specialty provider that complies with the policy is relieved of its obligation to enroll consumers. CSAs and specialty providers in a suspended referral status are not relieved of their obligations to link consumers seeking routine, urgent, and emergency services to those services at other MHRS providers as appropriate. While enrollment and linkage will occur through the DMH Access Helpline, each certified MHRS provider must fulfill its responsibilities under the MHRS certification standards with regard to linkage of consumers to appropriate services. Moreover, DMH’s continuity of care policy, DMH Policy 200.2, and related Continuity of Care Clinical Practice guidelines (published in the Provider Manual dated November 2003) set forth specific requirements for consumers who are not linked to CSAs when those consumers require urgent or emergency care.

If MHRS providers have any questions concerning this bulletin, they should contact their MHRS provider relations representative. Consumers should feel free to contact Frances Priester, Director of DMH’s Office of Consumer and Family Affairs, at (202) 673-4377. Other interested persons should contact Lisa Bullock at (202) 671-3105 or Alexis Haynes at (202) 673-2061 in the Division of Care Coordination.

[1] See also 22A DCMR § 3410.11 (“Each MHRS provider shall establish and adhere to policies and procedures defining pre-admission, intake, screening, referral, transfer, and discharge procedures (Admission, Transfer, and Discharge Policy) that comply with applicable federal and District laws and regulations.”) (emphasis added).