COMMUNITY CRISIS SUPPORTS FOR PERSON WITH DEVELOPMENTAL DISABILITIES

COMMUNITY CRISIS SUPPORT

- Includes intervention for consumers in crisis situations to ensure the health and safety of or to prevent hospitalization or incarceration of a consumer.

- Loss of housing, employment or reduction of income, risk of incarceration, risk of physical harm, family altercation or other emergencies as defined by the consumer may precipitate a crisis.

- Community Crisis Support may be provided prior to or after the completion of the assessment and service plan. Service is reimbursable if there is documentation that supports the need for the service, even if it is not in the service plan. These requests should be made timely in relation incidence of crisis.

- Community Crisis Support is limited to a maximum of twenty (20) hours per crisis for a period of five (5) consecutive days when provided by any agency or independent providers that have a current provider agreement with the Department.

- Crisis hours may be requested retroactively as a result of an incident or situation requiring immediate intervention when no other means of support are available.

- The Care Manager will review each crisis service and make a determination for appropriateness and financial reimbursement. If the provider's response to the crisis is determined inappropriate, the Care Manager may deny services as billable.

REQUESTS FOR CRISIS GO TO THE CASELOAD CARE MANAGER

- Requests for Crisis will be submitted through the Information Coordinator to be assigned to the regional Care Manager who has the individual on their caseload and has approved an ISP. Requests submitted via e-mail or fax should be entitled ***Community Crisis Support, Home Region, and Participant Name.***

- Upon receipt, the Care Manager has three (3) business day hours to make a determination on the request or notify the provider of missing information.

- When the provider receives the notification, they have three (3) business day hours to submit the missing information to the Care Manager. Upon receipt of the missing information, the Care Manager has an additional three (3) business day hours to make the determination and notify the provider.

- The request will be "CLOSED" if the Care Manager does not receive the identified information within the three (3) business day hours.

- The Care Manager must give written or verbal approval for Community Crisis Support.

- The approval is based on a review of the Plan of Service to determine whether services are appropriate to rectify the crisis. The Care Manager should notify the provider immediately when the documentation does not support the crisis and the request is denied.
- Crisis services may be provided in an emergency room during the ER evaluation process if the goal is to prevent hospitalization and return the consumer to the community. Services are not reimbursable after the person has been admitted to the hospital.

- The provider shall identify the factors contributing to the crisis and develop a proactive strategy that will address the factors that result in a crisis.

BILLING COMMUNITY CRISIS SUPPORT

- G9002 – Service Coordination Hours up to 4.5 hrs. $11.04/unit unit = 15 minutes 1 hour = $44.16

- H2011 – Community Crisis Support $11.35/unit unit = 15 minutes 1 hr =$45.40