**Screening and Referral Policy**

**Example: Process for referring positive screened patients for depression and anxiety.**

**Identifying patients that have positive screening results for depression and anxiety during pregnancy or post-childbirth:**

**(Refers to Adult Milestone 6 C)**

(practice name) administers a patient intake form to all patients prior to all encounters and includes questions concerning recent or current pregnancies and recent childbirth. When affirmative responses are provided by the patient, a (name the form or document) is sent via secure email to the patient’s health plan and that includes notification of the pregnancy and/or birth.

(practice name) has established a Behavioral Health Provider (BHP) Registry. The BHP Registry is offered to patients and provides access to a registry of BHPs that can treat symptoms of anxiety and depression, as identified by (screening tools used by the practice)

The BHP Registry:

* Includes the providers’ name, credentials, certifications, address, in-person/telehealth availability, accepted insurance plans, languages spoken, and interpreter services availability.
* Includes providers that demonstrate evidence of Postpartum Support International Perinatal Mental Health Certification and are contracted with the patient’s health plans to ensure efficiency and accuracy when referrals are made.
* Includes providers that demonstrate competence in treating depression and anxiety through appropriate licensure, certifications, and in-network insurance.
* Includes providers that agree to provide notification to (practice name) when a referral is completed.
* Is reviewed monthly and updated to ensure inclusion and exclusion of relevant providers, and to verify the providers’ acceptance of new patients within an acceptable timeframe ([ACOM 417](https://www.azahcccs.gov/shared/Downloads/ACOM/PolicyFiles/400/417_Appointment_Availability_Monitoring_and_Reporting.pdf)). Updates to the Registry are documented and communicated promptly to relevant stakeholders.
* Is offered to patients upon request or as part of the intake process. Patients receive education on how to access and best use the Registry and to understand the options available to them to schedule themselves for depression and anxiety treatment.

**Refers to Adult Milestone 6 D**

(practice name) utilizes Coordination and Referral procedures with health plans, behavioral health providers and/or appropriate case managers to ensure follow up documentation when screens are positive for anxiety and/or depression. The documentation includes:

* Warm Hand-offs between (practice name) providers who are referring and the receiving providers, and which involves the patient to facilitate an introduction, exchange of clinically necessary information, and initiation of the next steps of the treatment plan.
* Training for all staff on Handling Crises/Urgent Referrals such as mental health emergencies and crisis de-escalation.
* Patients exhibiting signs of acute distress, suicidal ideation, aggression, psychosis, or other emergent symptoms, are triaged to determine if the patient is experiencing a behavioral health crisis and proceed with appropriate clinical intervention.
* When situations require immediate medical attention or pose a risk to the patient's safety, staff contact 911. Clinic staff contact (name the crisis line or mental health crisis response team) to seek guidance and additional support for further evaluation.
1. **Referrals and Coordination of Care Protocols**
	1. Post-Crisis Follow-Up: After the crisis has been managed and the patient's immediate safety is ensured, staff shall follow up with the patient to assess their ongoing needs, provide support, and coordinate further treatment as necessary.
	2. Provider-to-Provider Consultation and care coordination efforts will occur as needed for referral purposes and enhanced communication.
	3. Prioritizing PMH Certified Prescriber/Practitioners
		* 1. Office will work with MCO to maintain a Preferred Provider List
	4. Post-Referral Follow-Up: The referring provider and receiving provider may continue communication regarding the progress of the referred patient. Equality Health may follow-up with the patient to ensure quality of care and verification that needs are being met clinically and with quality customer service.
	5. Documentation:
		* 1. Documentation in the electronic health record shall include the referral itself, confirmation of receipt to referral agency, and details of b-e above.
	6. Process for obtaining consent to complete screening and to make referrals for additional services based on identified needs.
		* 1. (practice name) will complete release of information with the party being referred to the agency/provider the referral is going to.
	7. Written materials, scripts, or other educational materials the practice uses with member's caregiver(s)/guardian(s) to discuss referral process steps.