I. PURPOSE: To specify responsibilities for the admission and transfer of patients to and from out-of-state mental health facilities under the provisions of the interstate compact on mental health.

II. POLICY:
   A. Montana State Hospital (MSH) has an obligation to appropriately return patients to their home state for provision of necessary mental health services and psychiatric hospitalization.
   
   B. Montana residents needing in-patient mental health treatment may choose to receive treatment at MSH rather than remain in an out-of-state facility.
   
   C. Under the provisions of Interstate Mental Health Compact Transfer, a "patient may be transferred from MSH to an institution in another state whenever there are factors based upon clinical determinations indicating that the care and treatment of said patient may be facilitated thereby. Any such inpatient care may be for the entire period of care and treatment or for any portion or portions thereof." The patient transferred under the provisions of Interstate Mental Health Compact Transfer cannot be a patient of more than one facility at any given time. MSH is responsible for transportation costs. Once the interstate transfer has been completed, the responsibilities and obligations of MSH toward the patient cease.
   
   D. Similarly, when determined appropriate, patients may be admitted to MSH under the provisions of the Interstate Compact on Mental Health in order to facilitate treatment and be closer to family members and community support systems. In these instances, the sending state is responsible for the cost of transportation.

III. DEFINITIONS:
   A. Interstate Compact on Mental Health – cooperative agreement between the states establishing procedures for returning individuals requiring mental health treatment to their home state, M.C.A. § 53-21-101.
   
   B. Interstate Compact Coordinator for Mental Health (ICCMH) for the State of Montana is the MSH Admission & Discharge Coordinator.
IV. RESPONSIBILITIES:

A. ICCMH for the State of Montana – to make referrals and contacts with regard to interstate compact transfers. The coordinator will maintain a directory of participating states and corresponding compact coordinators.

V. PROCEDURE:

A. Treatment teams will refer patients to the ICCMH for possible transfer to an out-of-state facility under the provisions of the Interstate Compact on Mental Health. The ICCMH will confer with the Medical Director, the Hospital Administrator and other appropriate staff members regarding the admission of persons under provisions of the Interstate Compact.

1. Referral Process:
   a. During the admission/assessment process patients will be identified who have residence, or significant family, or other support systems in other states, and who express an interest in returning to that state.
   b. The unit social worker assigned to the patient will discuss the referral with the ICCMH. The ICCMH will verify the receiving state is a member of the Interstate Compact Agreement and if so proper paperwork will be initiated.
   c. Upon completion of appropriate paperwork by the unit social worker the ICCMH will formally initiate the referral process to the proposed receiving state’s interstate compact coordinator.
   d. The ICCMH will maintain contact with the state of referral and relay the decision to the MSH treatment team.

2. MSH as a member of the Interstate Compact Agreement will accept referrals from other states. Referrals will be reviewed by the ICCMH who will consult with other clinicians and administrative staff during the review process and communicate the decision to the referring state. Discussions regarding admission will be based on Inter-State Compact guidelines, clinical issues, and availability of MSH bed space.

VI. REFERENCES: M.C.A. § 53-21-101, and #AD-01, MSH Policy #AD-01 “Admission Policy for Montana State Hospital.”

VII. COLLABORATED WITH: Hospital Administrator, Medical Director, Admissions and Discharge Coordinator.


IX. DISTRIBUTION: All hospital policy manuals
X. **ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.

XI. **FOLLOW-UP RESPONSIBILITY:** Admission & Discharge Coordinator

XII. **ATTACHMENTS:** None

Signatures:

John W. Glueckert
Hospital Administrator

Thomas Gray
Medical Director