This document encompasses the discharge process to submit to CDW. When a client is discharged from a provider, this can be tracked in the Discharge module. This module will also track if someone has gone 60 days without services (SA) and MCO staff need to discharge them from state insurance.

**Discharge Process**

When a provider or MCO staff discharges a patient, they will send in a discharge request that the MCO staff can review and acknowledge or send back. To view all discharge requests, go to **Menu, Clinical, Utilization Management, Discharge**.

- The **Full Discharge** checkbox is used by MCO staff to approve a request. This box is only active when the system generates the Discharge for SA consumers after not receiving services for over 60 days.

- The **SA Move** checkbox will prompt MCO staff to complete data fields required to send the SA Movement record to CDW (covered later in the document). The SA Move checkbox will only be active after all the SA Fields in the discharge have been completed.

For the system to identify SA patients, the latest claims are used and the procedure code on the claim is used to get the diagnosis group description. If the description is SA, and that patient has not had claims in 60 days, the request is auto created.
Clicking the “My Discharge” button will show the discharge requests that are assigned to you for acknowledgement with the status ‘Submitted’. You can also create your own request by clicking the Create button at the top of the tile—you would do this if a provider contacted you by phone, for example, and you wanted to enter the request for them. If you’re still in the process of creating the request and have saved it, then those will also show on your Q as ‘Saved’.

The All Discharge view allows you to see all discharge requests that are currently waiting for submission.

To work a discharge request, you would click on the information view, then Update. If you are responsible for assigning out Discharge requests, you will need to assign to staff by clicking the Assign button or you can Take Assignment to work the request yourself.
On this screen, you can take an action as well as viewing specific information around the discharge, including a final level of care, referral info, living arrangement and employment info among other relevant information. The two actions taken on this screen are choosing a status and the Discharge type.

- **Status**: chosen accordingly to identify the current state of the process
  - **Saved**: the initial status before any action is taken
  - **Submitted**: discharge requests that are assigned to you for acknowledgement
  - **Sent back**: a provider submitted request that was sent back for discrepancies
  - **Discharged**: identifies that the consumer was discharged in CDW
  - **SA Move**: identifies that this type was submitted

- **Discharge Type**
  - **Full Discharge**: When a consumer is fully discharged their state insurance will also be end-dated once the Discharge radio button is selected under the status.
  - **Service Only**: option for providers or MCO staff to request all open service auths for the provider and client be end-dated. Action button not for future use; not currently active.
SA Move

When the SA Move check box is selected, choose update; an additional screen will pop-up to record required data to be completed and sent to CDW.

If more than 1 SA Move checkbox is selected, then once submitted is selected on the screen then the next SA Move marked discharge request will automatically open so MCO staff can quickly complete the data entry for the SA Move request. If any SA Moves were completed then the checkbox will remain checked but grayed out.

Saved SA Move requests are queued for sending with the next CDW batch. When the Substance Abuse Treatment (Movement) Details record is sent, the system will auto-generate a Diagnosis Details and Substance Abuse (Drug of Choice) Details record.
When a full discharge is approved by the MCO staff then a discontinued date will be initiated which will be viewable on the Authorization in the Authorization module as well as the patient auth record. State insurance policy will be end-dated with the discharge date.

There are three other tiles in the Discharge module: Authorization, Claim Details and SA Move Details.

**Authorization** will show you any authorizations that a consumer has for quick reference.

**Claim Details** will allow you see the claims that have come in for that client. This can be useful in helping you make a decision for the discharge request.

**SA Move Details** is where the history and information about the completed SA Move.