

# Adult SUD Residential Out of County Referral

1. Email all referrals to: [TScovis@marincounty.org](mailto:TScovis@marincounty.org), cc: [CNisbet@marincounty.org](mailto:CNisbet@marincounty.org)
2. ALWAYS use email subject: "Encrypt Out of County Referral"

Date of Referral: \_\_\_\_\_

Referred By (Agency & Name): \_\_\_\_\_

Primary Clinical/Coordination Contact: \_\_\_\_\_

Email/Phone: \_\_\_\_\_

**Client Information: (Please fill out as much as possible)**

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Gender: \_\_\_\_\_ Preferred language: English / Other \_\_\_\_\_

**Required Information for Referral:**

**Client has given consent to Release of Information.** (Checking this box indicates that the client has a Release of Information (ROI) on file with your agency to communicate this information to the Marin SUD.)

**Client's primary support (include friends/family, prescribing psychiatrist, recovery coach, involved program/team(s)):** \_\_\_\_\_

**Formal diagnosis (SUD/MH):** \_\_\_\_\_

**Recent psychological and/or substance use evaluation:** \_\_\_\_\_

**A brief explanation of why the consumer is seeking out of county referral including local SUD provider/services utilized, history of how substance use has affected their life in the last 12 months and substance use in the last 30 days (specific substances and quantity):**

**Prescribed medication(s) that the client currently takes** (Note: Client needs a 30-days supply of meds to bring to Tx.): \_\_\_\_\_

**In the last 30-60 days, has the client been in (mark all that apply):**

PES/CSU     Unit A/Other Psychiatric Inpatient Unit     Case Rene     Jail     Other \_\_\_\_\_  
 Inpatient Medical Admission     Inpatient Medically Monitored Detox     Residential Detox (Helen Vine)

**Insurance:**

Medi-Cal     Medicare     None     Other Health Care \_\_\_\_\_

## Adult SUD Residential Out of County Referral

1. Email all referrals to: [TScovis@marincounty.org](mailto:TScovis@marincounty.org), cc: [CNisbet@marincounty.org](mailto:CNisbet@marincounty.org)
2. ALWAYS use email subject: "Encrypt Out of County Referral"

### Out of County Referral Process:

- Client is identified for an out of county residential assessment (not appropriate for Helen Vine or Center Point), please refer via email to Dr. Scovis at [tscovis@marincounty.org](mailto:tscovis@marincounty.org) and include the elements outlined in page 1 of the form.
- Dr. Scovis will complete the ASAM assessment and provide a placement recommendation (provider and level of care); She will complete and submit the TAR and ASAM to QM for approval (DMC-ODS requires that all residential tx be preauthorized by the County, once TAR is approved Dr. Scovis' role is complete).
- QM notifies SUD Admin, Dr. Scovis, and the referring/clinical team of TAR Approval.
- SUD Admin forwards the documents to the receiving facility and cc's the clinical team (MH clinician, Case Manager, Recovery Coach, etc.)
- The referring Mental Health clinician (or Recovery Coach if assigned) needs to connect via email or phone with the receiving facility to respond to any clinical questions that might arise and also coordinate an intake/intake assessment appointment.
  - in advance of admission, referring clinician (or RC) should get medications filled (at least 30 days worth) and prepare the client for intake.
- While client is in tx, MH Clinician/Recovery Coach/Referring Clinical Provider must remain in contact with the receiving facility and engage in the discharge planning process with the client and treatment provider. Please note that SUD Residential treatment services are not considered urgent – the process (assessment, TAR, care coordination, etc.) can take several days.
  - Timely Access standards are within 5, but no more than 10 days from the referral date to the receiving provider.

### Care Coordination Expectations for the Referring Provider

- Coordinate with SUD Residential staff to schedule intake/intake assessment appointment (zoom or In-person) and transport client as needed
- Ensure the client arrives to the treatment facility with a minimum of 30-day supply of any medications (if applicable) and anything else they need to remain successful in treatment
- Coordinate with the residential provider during treatment to monitor compliance and engage in discharge planning
  - Because the facility is out of county, the program will need assistance with connection to step down/after care when the client returns to Marin County