



**Certification Page
Regular and Emergency Rules**
Revised May 2014

Emergency Rules (After completing all of Sections 1 and 2, proceed to Section 5 below)

Regular Rules

1. General Information

a. Agency/Board Name Wyoming Department of Health			
b. Agency/Board Address 6101 Yellowstone Rd, Suite 220		c. City Cheyenne	d. Zip Code 82002
e. Name of Contact Person Dania Ballard		f. Contact Telephone Number 307-777-3365	
g. Contact Email Address dania.ballard@wyo.gov		h. Adoption Date September 6, 2016	
i. Program State Hospital			

2. Rule Type and Information: For each chapter listed, indicate if the rule is New, Amended, or Repealed.

If "New," provide the Enrolled Act numbers and years enacted: **2016 Wyo. Sess. Laws, 404-14, 2016 SEA 56**

c. Provide the Chapter Number, Short Title, and Rule Type of Each Chapter being Created/Amended/Repealed
(Please use the Additional Rule Information form for more than 10 chapters, and attach it to this certification)

Chapter Number:	Chapter Name:	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Amended	<input type="checkbox"/> Repealed
6	General Provisions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7	Standards for the Designation of Hospitals [Treatment Providers]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8	Standards for the Reimbursement of Designated Hospitals or Other Treatment Providers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9	Convalescent Leave from Involuntary Hospitalization	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10	Standards for Convalescent Leave	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11	Directed Outpatient Commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Exchange of Information Under Title 25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. The Statement of Reasons is attached to this certification.

e. If applicable, describe the **emergency** which requires promulgation of these rules without providing notice or an opportunity for a public hearing:
Per Senate File 58 (Enrolled Act 56), the Department is required to promulgate rules and regulations for multiple new provisions in W.S. 25-10-101 et seq., including a directed outpatient commitment (a new mechanism available to courts and providers under Title 25), changes to convalescent leave provisions both from the State Hospital and designated hospitals, and the exchange of patient information during the Title 25 legal process.

Title 25 continues to be a major issue for the Department (both fiscally and operationally), and SF 58/SEA 56 was made effective "immediately," so expedience is necessary for the Department to issue rules/regulations for its providers and stakeholders that may be impacted by new provisions in Title 25. The Department's Behavioral Health Division plans to issue further guidance, in the coming weeks and months, to providers and stakeholders regarding appropriate application of new Title 25 mechanisms (e.g., directed outpatient commitment) while the formal rule promulgation process is underway.

3. State Government Notice of Intended Rulemaking

a. Date on which the Notice of Intent containing all of the information required by W.S. 16-3-103(a) was filed with the **Secretary of State**:

b. Date on which the Notice of Intent and proposed rules in strike and underscore format and a clean copy were provided to the **Legislative Service Office**:

c. Date on which the Notice of Intent and proposed rules in strike and underscore format and a clean copy were provided to the **Attorney General**:

4. Public Notice of Intended Rulemaking

a. Notice was mailed 45 days in advance to all persons who made a timely request for advance notice. Yes No N/A

b. A public hearing was held on the proposed rules. Yes No

If "Yes:"	Date:	Time:	City:	Location:
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5. Final Filing of Rules


a. Date on which the Certification Page with original signatures and final rules were sent to the **Attorney General's Office for the Governor's signature**:

b. Date on which final rules were sent to the **Legislative Service Office**:

c. Date on which a PDF of the final rules was electronically sent to the **Secretary of State**:

6. Agency/Board Certification

The undersigned certifies that the foregoing information is correct.

Signature of Authorized Individual <i>(Blue ink as per Rules on Rules, Section 7)</i>	
Printed Name of Signatory	Thomas O. Forslund
Signatory Title	Director
Date of Signature	September 1, 2016

7. Governor's Certification

I have reviewed these rules and determined that they:

1. Are within the scope of the statutory authority delegated to the adopting agency;
2. Appear to be within the scope of the legislative purpose of the statutory authority; and, if emergency rules,
3. Are necessary and that I concur in the finding that they are an emergency.

Therefore, I approve the same.

Governor's Signature	
Date of Signature	

Attorney General: 1. Statement of Reasons; 2. Original Certification Page; 3. Summary of Comments (regular rules); 4. Hard copy of rules: clean and strike/underscore; and 5. Memo to Governor documenting emergency (for emergency rules only).

LSO: 1. Statement of Reasons; 2. Copy of Certification Page; 3. Summary of Comments (regular rules); 4. Hard copy of rules: clean and strike/underscore; 5. Electronic copy of rules (PDFs) emailed to Criss.Carlson@wvleg.gov: clean and strike/underscore; and 6. Memo to Governor documenting emergency (for emergency rules only).

SOS: 1. PDF of clean copy of rules; and 2. Hard copy of Certification Page as delivered by the AG.

Wyoming State Hospital Emergency Rule Promulgation

Chapters 6-12 Rules and Regulations for the Wyoming State Hospital Emergency Rules

Statement of Reasons

The Wyoming Department of Health proposes to adopt the following New and Amended Rules to comply with the provisions of Wyo. Stat. §§ 25-10-110 through -305, 2016 Wyo. Sess. Laws, 404-14, and the Wyoming Administrative Procedure Act, Wyo. Stats. §§ 16-3-101 through -115.

Per Senate File 58 (Enrolled Act 56), the Department is required to promulgate rules and regulations for multiple new provisions in Wyo. Stat. Ann. §§ 25-10-110 through -305, including a directed outpatient commitment (a new mechanism available to courts and providers under Title 25), changes to convalescent leave provisions both from the State Hospital and designated hospitals, and the exchange of patient information during the Title 25 legal process.

Title 25 continues to be a major issue for the Department (both fiscally and operationally), and SF 58/SEA 56 was made effective "immediately," so expedience is necessary for the Department to issue rules/regulations for its providers and stakeholders that may be impacted by new provisions in Title 25. The Department's Behavioral Health Division plans to issue further guidance, in the coming weeks and months, to providers and stakeholders regarding appropriate application of new Title 25 mechanisms (e.g., directed outpatient commitment) while the formal rule promulgation process is underway.

The Department in promulgating these Rules will clarify processes, standards, and payments for when treatment providers, under contract or agreement with the Department, provide services and care to patients court ordered to directed outpatient commitment pursuant to Wyo. Stat. Ann. § 25-10-110.1. Additionally, these Rules will clarify definitions and provisions related to designated hospitals, designated hospital billing, and convalescent leave from the Wyoming State Hospital and designated hospitals. Further, new Rule chapters 11 and 12 clarify provisions related to treatment providers and directed outpatient commitment, as well as provisions for the sharing of patient information under Wyo. Stat. Ann. §§ 25-10-110 through -305.

As required by Wyo. Stat. Ann. §16-3-103(a)(i)(G), these rules and regulations meet minimum substantive state statutory requirements.

CHAPTER 6
Rules and Regulations for Designated Hospitals
General Provisions

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), at Wyo. Stat. Ann. §§ 25-10-101 through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish definitions applicable to Chapter 7, Standards for the Designation of Hospitals pursuant to Wyo. Stat. Ann. § 25-10-104 and Chapter 8, Standards for the Reimbursement of Designated Hospitals or Other Treatment Providers pursuant to Wyo. Stat. Ann. § 25-10-112.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

Section 3. General Provisions.

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

Section 4. Definitions.

The following definitions shall apply in the interpretation and enforcement of Chapters 6, 7, and 8 of these rules:

(a) “CARF Accreditation” means accreditation according to the Commission on Accreditation of Rehabilitation Facilities.

(b) “Centers for Medicare and Medicaid (CMS) Certification” means the state survey agency has determined that a healthcare entity has been determined to meet the Social Security Act’s provider or supplier definitions, and is in compliance with standards required by Federal regulations.

(c) “Claims” means the process of billing the allowable cost of services under the Act to the Department or responsible county pursuant to Wyo. Stat. Ann. § 25-10-112.

(d) “CMS 1500” means the billing claim form for healthcare services approved by the Centers for Medicaid and Medicare Services, which is used by physicians (formerly the HCFA 1500).

(e) “Department” means the Wyoming Department of Health.

(f) “Designated Hospital” means a general hospital or psychiatric treatment hospital or unit that provides care to an individual detained under Wyo. Stat. Ann. §§ 25-10-109 through -110.1 and which bills the Department or the responsible county for the costs of care under the Act.

(g) “Directed Outpatient Commitment” means as defined at Wyo. Stat. Ann. § 25-10-110.1.

(h) “Emergency Detention” means the detention of a person pursuant to Wyo. Stat. Ann. § 25-10-109.

(i) “Inpatient psychiatric treatment” means the medical diagnosis, treatment and care of persons with mental illness requiring hospitalization which is provided under the direction of a licensed, board certified psychiatrist, directed at reducing the risk, symptoms and impact of the psychiatric disorder.

(j) “Involuntary hospitalization” means the hospitalization of a person against his will under Wyo. Stat. Ann. § 25-10-110, at the Wyoming State Hospital or at a designated hospital or treatment provider under agreement with the Department to provide inpatient psychiatric treatment.

(k) “JCAHO” means the Joint Commission for the Accreditation of Healthcare Organizations.

(l) “Medicaid” means medical assistance and services provided pursuant to Title XIX of the Social Security Act or the Wyoming Medical Assistance and Services Act, at Wyo. Stat. Ann. §§ 42-4-101, *et seq.*

(m) “Medically necessary” means items and services which may be justified as reasonable, necessary, or appropriate, based on evidence-based clinical standards of care, as measured by the Level of Care Utilization System (LOCUS) tool.

(n) “Medical Records” means all documents in the possession of or subject to the control of the designated hospital, which describe the patient’s psychiatric assessments, diagnosis, condition or treatment.

(o) “Treatment Provider” or “treatment center” means a community mental health center under contract or agreement with the Department to provide outpatient or residential treatment to persons with mental illness or substance use disorders.

(p) “Universal billing claim form” means the national standardized form used by hospitals and other healthcare facilities or treatment providers which summarizes the allowable costs for services provided by the hospital or other treatment provider.

(q) “Utilization Review” means the process of comparing requests for medical services to guidelines deemed appropriate for such services.

(r) “Volunteer assistance” means monitoring of a person detained under Wyo. Stat. Ann. § 25-10-109, by a member of the community independent of that person’s regular employment.

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 7
Rules and Regulations for Designated Hospitals and Treatment Providers
Standards for the Designation of Hospitals and Treatment Providers

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act, (“the Act”) at Wyo. Stat. Ann. §§ 25-10-101 through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish standards for the designation of hospitals and to define the conditions under which the Department may enter into a contract or agreement with a designated hospital or treatment provider for the inpatient psychiatric treatment or community-based treatment of persons with mental illness pursuant to Wyo. Stat. Ann. § 25-10-104.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules which reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

Section 3. Designated Hospital Requirements and Treatment Provider Requirements

(a) Designated hospitals or treatment providers shall have a safe and secure location to hold an individual who is emergently detained under Wyo. Stat. Ann. § 25-10-109 in a suitable setting pursuant to the Act and based on the patient’s condition.

(b) Designated hospitals or treatment providers shall provide treatment services with the patient’s consent or allow access to the patient by treatment provider staff or the patient’s private mental health provider for purposes of providing treatment with the patient’s consent. Treatment services may be provided without patient consent or the consent of his parent or guardian when treatment is limited to diagnosis or evaluation or when treatment is necessary to prevent immediate and serious physical harm to the person or others pursuant to Wyo. Stat. Ann. § 25-10-109(f).

(c) Designated hospital staff or treatment provider staff shall have access to ongoing psychiatric consultation services provided by the Wyoming State Hospital for purposes of prescribing and monitoring psychotropic medications.

(d) Designated hospital staff or treatment provider staff may also consult with the Wyoming State Hospital staff in advance of the following anticipated extended hospital stays:

- (i) An anticipated extension of an emergency detention beyond 72 hours;

(ii) An anticipated extended detention beyond 14 days;

(iii) An anticipation of an Involuntary Hospitalization order.

(e) If the patient's symptoms resolve so that emergency detention or involuntary hospitalization are no longer required prior to the patient's transfer to the Wyoming State Hospital, the designated hospital or treatment provider shall file the appropriate documentation evidencing the reason for the patient's release as required by Wyo. Stat. Ann. § 25-10-116(b). If a hearing is requested, the designated hospital or treatment provider must appear to explain and support its decision that the patient no longer meets the criteria for emergency detention or involuntary hospitalization.

(f) If conditions justifying hospitalization continue to exist, the designated hospital or treatment provider shall send the court notice of the determination for continued hospitalization, including a detailed statement of the factual basis for the determination. Notice of the determination shall also be sent to the patient and the person responsible for the patient's care and custody. As required by Wyo. Stat. Ann. § 25-10-116(c) the notice shall include:

(i) The patient's right to contest the determination;

(ii) The patient's right to a hearing; and

(iii) The patient's right to counsel.

Section 4. Contracts or Agreements with Designated Hospitals.

(a) Pursuant to Wyo. Stat. Ann. § 25-10-104, the Department may enter into a contract or agreement with a designated hospital for the provision of inpatient psychiatric treatment if the designated hospital meets one of the following qualifications:

(i) A hospital which meets the "special provisions applying to psychiatric hospitals," pursuant to 42 C.F.R. § 482.60;

(ii) A general hospital with a specific inpatient psychiatric unit;

(iii) A hospital without a specific inpatient psychiatric unit with psychiatric services available, to include a psychiatrist as a member of the medical staff of the hospital;

(iv) Other licensed treatment facilities which have psychiatrists available for consultation such as residential crisis stabilization centers; or

(v) A Wyoming hospital that does not have specific psychiatric services, but admits a patient on an emergency basis when no other appropriate level of care is available.

(b) To enter into a contract or agreement with the Department, the hospital or facility must submit a letter of intent to the Wyoming State Hospital. Enclosed with the letter of intent must be the following documents:

(i) A copy of the hospital's or facility's license issued by the state survey agency;
and

(ii) A copy of the hospital or facility's most recent JCAHO or CARF accreditation certificate or Centers for Medicare and Medicaid (CMS) certification.

(c) Once verification of all documents has been completed by the Wyoming State Hospital, notification of acceptance or rejection will be provided to the hospital. If the hospital is accepted, a contract or agreement outlining the hospital's or facility's responsibilities with regard to accepting patients and providing treatment for persons with mental illnesses, as defined in Wyo. Stat. Ann. § 25-10-110, will be initiated by the Division.

(d) Contract or agreement extensions or the development of new contracts or agreements will be completed biennially pending receipt by the Wyoming State Hospital of the documents listed in Section 4(b)(i) and (ii).

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 8

Rules and Regulations for Designated Hospitals and Treatment Providers Standards for Reimbursement of Designated Hospitals and Treatment Providers

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), codified at Wyo. Stat. Ann. §§ 25-10-101 through - 305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through - 115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish standards for the reimbursement of designated hospitals or other treatment providers and to establish standards to manage costs billed to the Department pursuant to Wyo. Stat. Ann. § 25-10-112.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

Section 3. Filing of Claims.

(a) Designated hospitals or treatment providers filing claims with the Department under Wyo. Stat. Ann. § 25-10-112 for services provided pursuant to Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110 or Wyo. Stat. Ann. § 25-10-110.1 shall provide documentation to the Department detailing the services rendered and the payment requested. This documentation shall include, but is not limited to:

(i) All relevant and requested medical records directly related to the services for which payment is being requested;

(ii) An itemized billing statement (for services provided by designated hospitals) for services, including:

(1) A universal billing form;

(2) A CMS 1500.

(iii) The emergency detention notice, Form 3-81, and the continued emergency detention court order, if applicable;

(iv) The involuntary hospitalization court order, if applicable, and any papers showing the patient’s release from involuntary hospitalization, Form 14-81.

(v) A certification signed by the designated hospital representative or treatment provider, indicating that the patient has no public or private health insurance and that there are no other governmental benefit programs from which it can recover the costs of treatment;

(vi) Documentation of all efforts made to recover costs of treatment from public and private health insurance, and from government benefit programs prior to seeking payment from the Department.

(b) The Department may not pay claims submitted more than one (1) year after the service date.

(c) The Department may not pay claims for medical treatment for conditions that are not directly related to the emergency detention or involuntary hospitalization.

Section 4. Payment of Claims.

(a) Payment made by the Department pursuant to Wyo. Stat. Ann. § 25-10-112, for services provided by a designated hospital or other treatment provider under Wyo. Stat. Ann. § 25-10-109 and Wyo. Stat. Ann. § 25-10-110, shall not exceed:

(i) The current rate for similar services as determined by Medicaid;

(ii) A fixed, all-inclusive per diem rate as determined by the Department; or

(iii) Payments arranged through mental health or substance abuse contracts with the Behavioral Health Division, if applicable.

(b) In considering a claim for payment, the Department shall determine if the costs submitted by the designated hospital or treatment provider are reasonably related to the care furnished to the patient and if the care furnished to the patient was medically necessary for the specific treatment of the patient's mental illness.

(c) After a designated hospital has submitted all documentation as required in Section 4(b) of Chapter 7, the Department shall pay each claim within 45 days of receipt of the claim pursuant to Wyo. Stat. Ann. § 16-6-602.

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 9
Rules and Regulations for Convalescent Leave
from Involuntary Hospitalization

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish definitions applicable to Chapter 10, Standards for Convalescent Leave, pursuant to Wyo. Stat. Ann. § 25-10-127.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

Section 3. General Provisions.

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

Section 4. Definitions.

The following definitions shall apply in the interpretation and enforcement of Chapters 9 and 10 of these rules:

(a) “Appropriate Parties” means the patient’s guardian, if applicable, the patient’s care giver, if applicable, the patient’s family, if applicable, the community treatment provider, and the county attorney involved in the involuntary hospitalization procedures for the patient.

(b) “Community Treatment Provider” means a community mental health center or other mental health treatment service provider chosen by the patient.

(c) “Convalescent Leave” means the placement of a patient who was involuntarily hospitalized under Wyo. Stat. Ann. § 25-10-110 and treated at the Wyoming State Hospital or designated hospital, into a community on a conditional status, for purposes of continued recovery.

(d) “Designated Hospital” means a psychiatric treatment hospital that provides care to an individual detained under Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110, or Wyo. Stat. Ann. § 25-10-110.1, and which bills the Department or the responsible county for the costs of care under the Act.

(e) “Involuntary hospitalization” mean the hospitalization of a person against their will under Wyo. Stat. Ann. § 25-10-110, at the Wyoming State Hospital or at a designated hospital under contract or agreement with the Department to provide inpatient psychiatric treatment.

(f) “Treating Medical Provider” means a physician, psychiatrist, advanced practice registered nurse, physician assistants, or other medical staff licensed in the State of Wyoming and employed by the Wyoming State Hospital or designated hospital.

(g) “Treatment Team” means staff of the Wyoming State Hospital or designated hospital representing the various disciplines needed to treat and promote the recovery of the patient. Treatment teams include, but are not limited to, the treating physician and a case manager.

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 10
Rules and Regulations for Convalescent Leave
from Involuntary Hospitalization
Standards for Convalescent Leave

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for releasing a patient on convalescent status pursuant to Wyo. Stat. Ann. § 25-10-127.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

Section 3. Conditions Necessary for Convalescent Leave.

(a) Convalescent Leave may be utilized by the State Hospital or designated hospitals when:

(i) The patient:

(A) Was previously involuntarily hospitalized and demonstrated an inability to follow past discharge plans, or has demonstrated a history of noncompliance with outpatient treatment;

(B) Will need additional assistance and support to adequately comply with the required plan of treatment on an outpatient or nonhospital basis; or

(C) Will likely need and will benefit from community-based services and support to avoid decompensation and additional involuntary hospitalizations, and those services and support are available in the community the patient wishes to return to, or in the community best suited to provide such aftercare of the patient.

(ii) When the treating medical provider, after consultation with the treatment team and appropriate parties, believes it is in the best medical interest of the patient.

(b) Wyoming State Hospital patients who have active or pending criminal charges may not be placed on convalescent leave.

Section 4. **Process to Initiate Convalescent Leave.**

(a) Request for Convalescent Leave.

(i) Treatment team. Members of the patient's treatment team and any designated gatekeeper must meet to discuss the potential benefits of Convalescent Leave. Although all members of the treatment team do not need to agree to the leave, all members of the team must be a part of the decision-making process. If the members of the treatment team do not arrive at a consensus for the use of Convalescent Leave, the patient's treating medical provider leading the treatment team will make the final decision. If a decision is made to pursue Convalescent Leave, the request must be documented and include the applicable conditions contained in Section 3(a) as justification for the request. If the patient's treatment team is located at a designated hospital, the treatment team shall consult with the Wyoming State Hospital on all convalescent leave orders and treatment plans.

(ii) Patient and Appropriate Parties. After a request for Convalescent Leave is made by the treatment team, one or more members of the treatment team shall provide written, email, or fax notice to and consult with the patient and appropriate relevant parties, including, when applicable, the guardian, parent, gatekeeper, and community treatment provider. A member of the treatment team shall document this process.

(iii) Wyoming State Hospital or designated hospital staff shall assist patients being discharged on convalescent leave in applying for Medicaid and securing Social Security benefits, if applicable.

(b) Convalescent Leave Plan.

(i) Using input from the patient and all appropriate parties, the treatment team shall develop a written Convalescent Leave Plan.

(ii) The Convalescent Leave Plan shall include:

(A) The roles and responsibilities of the patient and other appropriate parties and any areas for which the treating facility, Wyoming State Hospital, or designated hospital will retain responsibility while the patient is on Convalescent Leave;

(B) The community treatment services, medication, and supports to be provided, the entity responsible for providing them, and how they will be paid;

(C) Provisions for quarterly reports from the community treatment provider, or any designated gatekeeper, to the Department on the status and progress made by the patient. If more than one community treatment provider is selected by the patient to provide outpatient services and supports, the plan shall specify the community treatment provider or gatekeeper responsible for providing quarterly reports;

(D) The conditions under which Convalescent Leave will be revoked;

(E) The preferred location for detention and the method of detention of the patient if Convalescent Leave is revoked.

(iii) The Convalescent Leave Plan will be provided to the patient, the patient's treatment team, any designated gatekeeper, and other appropriate parties for signature. Signature shall constitute acknowledgment of the plan, and the role of each entity in achieving the goals of the Convalescent Leave.

(iv) The Convalescent Leave Plan, signed by the patient, the patient's treatment team and other appropriate parties, may act as the initial report to the court, or a separate report to the court outlining additional information may be drafted and submitted by the treating medical provider.

(v) The treatment team shall provide copies of the signed Convalescent Leave plan to the patient and the appropriate parties in a manner to ensure receipt of the copy prior to the beginning of convalescent leave.

(c) Notice for Convalescent Leave.

(i) The Wyoming State Hospital or designated hospital will file all notices for Convalescent Leave with the Court, and provide notice to the county attorney office that initiated involuntary hospitalization proceedings, any designated gatekeeper, and other interested parties. Notice shall consist of a copy of the notice for convalescent leave along with copies of the initial commitment documents, the signed Convalescent Leave Plan, and any other relevant information or documents, including any separate reports or documents in support of the Convalescent Leave.

(ii) The Wyoming State Hospital shall develop and utilize uniform forms for Convalescent Leave Plans.

Section 5. Return to Involuntary Hospitalization from Convalescent Leave.

(a) If the hospital reasonably believes that it is in the best interest of the patient, the patient shall be returned to the Wyoming State Hospital or designated hospital. The Wyoming State Hospital or designated hospital may return the patient to its care, subject to notice and hearing as provided by Wyo. Stat. Ann. §§ 25-10-116 and 127.

(b) Any member of the patient's treatment team, the patient, any designated gatekeeper, or other appropriate parties may request that the Wyoming State Hospital or designated hospital return the patient to its care to comply with the Convalescent Leave Plan. The Wyoming State Hospital or designated hospital shall review requests under subsection (b) to determine whether return from Convalescent Leave pursuant to subsection (a) is in the best interests of the patient.

(c) If the patient is not able or is unwilling to return to the hospital, or if the Wyoming State Hospital or designated hospital refuses to return the patient to its care for a violation of the

Convalescent Leave Plan, the party seeking the patient's return may request a hearing before the court that ordered the patient's involuntary hospitalization.

(d) The Wyoming State Hospital shall arrange transportation for a patient returning to the Wyoming State Hospital.

(e) The Wyoming State Hospital shall pay for the detention and transportation expenses to detain and return the patient to the hospital, pursuant to Wyo. Stat. Ann. § 25-10-127.

(f) The hospital shall file a Notice of Return from Convalescent Leave with the court, and will provide copies to the appropriate parties, notifying the parties that the patient is being or will be returned to the Wyoming State Hospital or designated hospital.

(g) Upon the patient's return to the Wyoming State Hospital or designated hospital, the patient shall be notified of his/her rights, including the right to contest his return to the hospital, the right to a hearing, and the right to counsel.

(h) If the patient is returned to the Wyoming State Hospital or designated hospital, the Convalescent Leave is revoked.

Section 6. One Year Follow Up.

(a) Prior to the end of one (1) year on convalescent leave, and not less than annually thereafter, the patient's treatment team shall consult with the patient, any designated gatekeeper, and other appropriate parties to reconsider and reexamine the facts relating to the original involuntary hospitalization of the patient.

(b) If the patient's treatment team and the community treatment provider determine that involuntary hospitalization is no longer anticipated for the patient, the community treatment provider and any designated gatekeeper, in collaboration with the Wyoming State Hospital or designated hospital, shall submit a 14-81 form to the Court for the discharge of the patient, following the procedures set forth in Wyo. Stat. Ann. § 25-10-116(b). With the participation of the patient, the patient's guardian, the patient's caregiver, the patient's family, if applicable, and the community treatment provider, the Wyoming State Hospital or designated hospital shall prepare a discharge plan.

(c) If a patient on Convalescent Leave is returned to the Wyoming State Hospital, designated hospital, or treatment provider and later re-placed on Convalescent Leave status, the one year follow up shall be based on the date of the most recent Convalescent Leave.

Section 7. Two Year Discharge Process.

(a) After two (2) years on Convalescent Leave, the community treatment provider, in collaboration with the Wyoming State Hospital or designated hospital, and any designated gatekeeper, shall submit a 14-81 form to the court, seeking the discharge of the patient, pursuant to Wyo. Stat. Ann. § 25-10-116(b). The 14-81 form should note the client's success during the two year Convalescent Leave period, and include a discharge plan prepared by the Wyoming State

Hospital or designated hospital in conjunction with the patient, the patient's guardian, if applicable, the patient's caregiver, if applicable, the patient's family, if applicable, and the community treatment provider and any designated gatekeeper.

(b) If the patient is returned from Convalescent Leave to the Wyoming State Hospital, designated hospital, or treatment provider and re-placed on Convalescent Leave status, the required discharge after two (2) years of Convalescent Leave shall be based on the date of the most recent Convalescent Leave.

Section 8. Responsibilities of the Wyoming State Hospital or Designated Hospital While Patient is on Convalescent Leave.

(a) While the patient is on Convalescent Leave, the Wyoming State Hospital or designated hospital shall periodically review, with the community provider and any designated gatekeeper, the treatment progress of the patient as documented in the quarterly report submitted by the community treatment provider.

(b) Neither the physicians nor the caseworkers at the Wyoming State Hospital or designated hospital will have ongoing responsibilities for the direct care or treatment of the patient while the patient is on Convalescent Leave unless otherwise documented in the treatment plan, although they shall be available for consultation with community treatment providers. This provision recognizes the patient's best interests in being placed in his or her local community, which may be a great distance from the Wyoming State Hospital or designated hospital.

Section 9. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 10. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter 8-3.

Section 11. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

Chapter 11

Rules and Regulations for Directed Outpatient Commitment (Wyo. Stat. Ann. § 25-10-110.1)

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. § 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities of Wyoming Department of Health treatment providers for the treatment of patients court-ordered to Directed Outpatient Commitment as provided in Wyo. Stat. Ann. § 25-10-110.1.

(b) The Department may issue manuals or bulletins to interpret the provisions of this rule, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

Section 3. Directed Outpatient Commitment Treatment Provider Requirements

(a) If an individual is determined mentally ill under the Act (Wyo. Stat. Ann. §§ 25-10-109 through -110.1) and is ordered by a court for directed outpatient commitment to a treatment provider as defined in Chapter 6 of these rules, the treatment provider shall comply with the court order and admit the patient unless it demonstrates to the court that it cannot comply with the court order for directed outpatient commitment.

(b) The treatment provider shall prepare a treatment plan, as required by the court order, in consultation with any gatekeeper designated by the Department. In preparing the treatment plan, the treatment provider shall consult with the county attorney, any relevant healthcare providers, and the patient or the person responsible for the care and custody of the patient. The treatment plan may not exceed two (2) years.

(c) The treatment provider shall issue a report to the court, the county attorney, and any gatekeeper designated by the Department every six (6) months. The report shall contain the patient’s status in the directed outpatient commitment treatment plan, any past non-compliance with the treatment plan by the patient, and any barriers to the patient’s continued maintenance in the community setting.

Section 4. Payment of Treatment Providers for Directed Outpatient Commitment

(a) Services provided by a treatment provider, pursuant to Wyo. Stat. Ann. § 25-10-110.1, shall be reported under mental health and substance abuse treatment contracts and agreements between treatment providers and the Department.

(b) If a court orders an individual to directed outpatient commitment under a court-approved provider not under contract with the Behavioral Health Division, it is not the responsibility of the Department to arrange for payment and reimbursement of such a provider.

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

Chapter 12
Rules and Regulations for Exchange of Information under Title 25

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for the treatment of patients court-ordered to emergency detention, involuntary hospitalization, or Directed Outpatient Commitment as provided in Wyo. Stat. Ann. §§ 25-10-101 through -127.

Section 3. Exchange of Patient Information under Title 25

(a) When an individual is determined mentally ill under Wyo. Stat. Ann. §§ 25-10-109 through -110.1, protected health information regarding the individual’s condition, diagnoses, history, and detention or hospitalization may be exchanged between relevant healthcare providers, treatment providers, the county attorney, the examiner, any gatekeeper designated by the Department, and the court. Any exchange of protected health information under the Act shall comply with requirements under all applicable state and federal law.

Section 4. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 5. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 6. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 6
Rules and Regulations for Designated Hospitals
General Provisions

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), at ~~W.S. Wyo. Stat. Ann. §§ 25-10-101, et seq. through -305,~~ and the Wyoming Administrative Procedure Act at ~~W.S. Wyo. Stat. Ann. §§ 16-3-101, et seq through -115.~~

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish definitions applicable to Chapter 7, Standards for the Designation of Hospitals pursuant to ~~W.S. Wyo. Stat. Ann. §§ 25-10-104 and Chapter 8, Standards for the Reimbursement of Designated Hospitals or Other Treatment Providers pursuant to W.S. Wyo. Stat. Ann. §§ 25-10-112.~~

(b) The Department may issue manuals, or bulletins ~~or both~~ to interpret the provisions of these rules, ~~which. Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

Section 3. General Provisions.

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

Section 4. Definitions.

The following definitions shall apply in the interpretation and enforcement of Chapters 6, 7, and 8 of these rules: ~~Where the context in which words are used in these rules indicates that such is the intent, words in the singular shall include the plural and vice versa. Throughout these rules gender pronouns are used interchangeably, except where the context dictates otherwise. The drafters have attempted to utilize each gender pronoun in equal numbers, in random distribution. Words in each gender shall include individuals of the other gender.~~

(a) “CARF Accreditation” means accreditation according to the Commission on Accreditation of Rehabilitation Facilities.

(b) “Centers for Medicare and Medicaid (CMS) Certification” means the state survey agency has determined that a healthcare entity has been determined to meet the Social Security Act’s provider or supplier definitions, and is in compliance with standards required by Federal regulations.

(c) “Claims” means the process of billing the allowable cost of services under the Act to the Department or responsible county pursuant to ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-112.

(d) “CMS 1500” means the billing claim form for healthcare services approved by the Centers for Medicaid and Medicare Services, which is used by physicians (formerly the HCFA 1500).

(e) “Department” means the Wyoming Department of Health.

(f) “Designated Hospital” means a holding hospital or psychiatric treatment hospital.

(g) “Directed Outpatient Commitment” means as defined at Wyo. Stat. Ann. §25-10-110.1.

(gh) “Emergency Detention” means the detention of a person pursuant to W.S. § 25-10-109.

~~(h) “Holding Hospital” means any hospital that provides care to an individual detained under W.S. § 25-10-109 and which bills the Department or the responsible county for the costs of that care under W.S. § 25-10-112.~~

~~(i) “Hospital” means a licensed institution or a unit in a licensed institution which provides one (1) or more of the following to patients by or under the supervision of an organized medical staff, as indicated in the Department’s Rules and Regulations for Licensure of Hospitals, Chapter 12, Section 4, Definitions (m):~~

~~(i) Diagnostic and therapeutic services for medical diagnosis, treatment and care of injured, disabled or sick persons;~~

~~(ii) Rehabilitation services for the mental health rehabilitation of injured, disabled or sick persons;~~

~~(iii) Acute care;~~

~~(iv) Psychiatric care; and/or~~

~~(v) Swing Beds.~~

(j) “Inpatient psychiatric treatment” means the medical diagnosis, treatment and care of persons with mental illness requiring hospitalization which is provided under the direction of a licensed, board certified psychiatrist, directed at reducing the risk, symptoms and impact of the psychiatric disorder.

(~~kj~~) “Involuntary hospitalization” means the hospitalization of a person against their will under ~~W.S. Wyo. Stat. Ann. §§ 25-10-110~~, at the Wyoming State Hospital or at a ~~psychiatric treatment designated hospital under contract agreement~~ with the Department to provide inpatient psychiatric treatment.

(~~kk~~) “JCAHO” means the Joint Commission for the Accreditation of Healthcare Organizations.

(~~ml~~) “Medicaid” means medical assistance and services provided pursuant to Title XIX of the Social Security Act and/or the Wyoming Medical Assistance and Services Act, at ~~W.S. Wyo. Stat. Ann. §§ 42-4-101, et seq.~~

(~~mm~~) “Medically necessary” means items and services which may be justified as reasonable, necessary, and/or appropriate, based on evidence-based clinical standards of care as measured by the Level of Care Utilization System (LOCUS) tool.

(~~on~~) “Medical Records” means all documents, in whatever form, in the possession of or subject to the control of the designated hospital, which describe the patient’s diagnosis, condition and/or treatment.

(~~po~~) “~~Other Treatment provider~~” or “treatment center” means a ~~licensed physician, who provides services under W.S. § 25-10-109 and W.S. § 25-10-110 and who bills the Department or responsible county for those services independent of a designated hospital. Community mental health center under contract or agreement with the Department to provide outpatient or residential treatment to persons with mental illness or substance abuse disorders.~~

(~~qp~~) “Patient” means ~~an individual receiving care by a designated hospital or other treatment provider for a mental illness pursuant to W.S. §§ 25-10-101 through 25-10-305.~~

(~~rq~~) “Physician” means ~~an individual licensed to practice medicine.~~

(~~sr~~) “Treatment” means ~~diagnosis, evaluation, intervention, which may include psychiatric medication, individual and group mental health counseling, illness management and diversion services such as immediate linkages to mental health services in the community, and discharge planning. These services begin at the time of detention and continue throughout involuntary hospitalization. Treatment does not mean observation or supervision.~~

(~~tp~~) “Universal billing claim form” means the national standardized form used by hospitals and other healthcare facilities or treatment providers which summarizes the allowable costs for services provided by the hospital or other treatment provider.

(q) “Utilization Review” means the process of comparing requests for medical services to guidelines or criteria that are deemed appropriate for such services.

(r) “Volunteer assistance” means monitoring of a person detained under ~~W.S. Wyo. Stat. Ann. §§ 25-10-109~~, by a member of the community independent of that person’s regular employment.

~~(s) “Wyoming State Hospital” means the state healthcare facility serving persons with mental illness located in Evanston, Wyoming.~~

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 57. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 7
Rules and Regulations for Designated Hospitals and Treatment Providers
Standards for the Designation of Hospitals and Treatment Providers

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act, (“the Act”) at ~~W.S. Wyo. Stat. Ann. §§ 25-10-101, *et seq.* through -305,~~ and the Wyoming Administrative Procedure Act at ~~W.S. Wyo. Stat. Ann. §§ 16-3-101, *et seq.* through -115.~~

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish standards for the designation of hospitals and to define the conditions under which the Department may enter into a contract or agreement with a designated hospital or ~~other licensed treatment facility~~ provider for the inpatient psychiatric treatment or community-based treatment of persons with mental illness pursuant to ~~W.S. Wyo. Stat. Ann. § 25-10-104.~~

(b) The Department may issue manuals or bulletins ~~or both~~ to interpret the provisions of these rules, ~~which. Such manuals and bulletins shall be consistent with~~ and reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

Section 3. Designated Hospital Requirements and Treatment Provider Requirements

(a) Designated hospitals or treatment providers, ~~which bill the Department for services pursuant to W.S. § 25-10-112,~~ shall have a safe and secure location to hold an individual who is emergently detained under ~~W.S. Wyo. Stat. Ann. § 25-10-109 in a suitable setting pursuant to the Act and based on the patient’s condition,~~ with or without law enforcement or volunteer assistance.

(b) Designated hospitals or treatment providers shall provide treatment services with the patient’s consent ~~and~~ or allow access to the patient by community mental health center staff or the patient’s private mental health provider for purposes of providing treatment with the patient’s consent. Treatment services may be provided without patient consent or the consent of his parent or guardian when treatment is limited to diagnosis or evaluation or when treatment is necessary to prevent immediate and serious physical harm to the person or others pursuant to ~~W.S. Wyo. Stat. Ann. § 25-10-109(f).~~

(c) Designated hospital staff or treatment provider staff shall have access to ongoing psychiatric consultation services provided by the Wyoming State Hospital for purposes of

prescribing and monitoring psychotropic medications. ~~The Wyoming State Hospital shall notify designated hospitals of the process to receive consultative services.~~

(d) Designated hospital staff or treatment provider staff shall consult with the Wyoming State Hospital staff in advance of the following anticipated extended hospital stays: ~~This consultation shall be conducted in a manner to reasonably function as a utilization review of the recommended continued stay.~~

(i) An anticipated extension of an emergency detention beyond 72 hours; ~~and~~

(ii) An anticipated extended ~~involuntary hospitalization~~ detention beyond 14 days; and

(iii) An anticipation of an involuntary hospitalization order.

(e) If the patient's symptoms resolve so that ~~they no longer meet the statutory requirements for emergency detention or involuntary hospitalization~~ are no longer required prior to the patient's transfer to the Wyoming State Hospital, the designated hospital or treatment provider shall ~~be responsible for, and shall~~ file the appropriate documentation evidencing the reason for the patient's release as required by ~~W.S.~~ Wyo. Stat. Ann. §25-10-116(b). If a hearing is requested, the designated hospital or treatment provider shall ~~must~~ appear to explain and support its decision that the patient no longer meets the criteria for emergency detention or involuntary hospitalization.

~~(f) Three months after the patient's admission to the designated hospital, and every six (6) months thereafter, the head of the designated hospital or his designee shall evaluate the treatment and progress of each patient.~~

~~(g)~~ If conditions justifying hospitalization continue to exist, the designated hospital or treatment provider shall ~~be responsible for, and~~ send to the court notice of the determination for continued hospitalization ~~and, including~~ a detailed statement of the factual basis for the determination. Notice of the determination shall also be sent to the patient and the person responsible for the patient's care and custody. As required by ~~W.S.~~ Wyo. Stat. Ann. § 25-10-116(c) the notice shall include:

(i) The patient's right to contest the determination;

(ii) The patient's right to a hearing; and

(iii) The patient's right to counsel.

Section 4. **Contracts or Agreements with Designated Hospitals.**

(a) Pursuant to ~~W.S.~~ Wyo. Stat. Ann. § 25-10-104, the Department may enter into a contract or agreement with a designated hospital for the provision of inpatient psychiatric treatment if the designated hospital meets any of the following qualifications:

(i) A hospital which meets the “special provisions applying to psychiatric hospitals,” pursuant to 42 CFR § 482.60, ~~as being qualified to treat persons with mental illness;~~

(ii) A general hospital with a specific inpatient psychiatric unit;

(iii) A hospital without a specific inpatient psychiatric unit with psychiatric services available, to include a psychiatrist as a member of the medical staff of the hospital; ~~or~~

(iv) Other licensed treatment facilities and limited licensed hospitals which have psychiatrists available for consultation, such as residential crisis stabilization centers; or

(v) A Wyoming hospital that does not have specific psychiatric services, but admits a patient on an emergency basis when no other appropriate level of care is available.

(b) To enter into a contract or agreement with the Department, the hospital or facility must submit a letter of intent to the Wyoming State Hospital. Enclosed with the letter of intent must be the following documents:

(i) A copy of the hospital or facility’s license issued by the state survey agency; and

(ii) A copy of the hospital or facility’s most recent JCAHO or CARF accreditation certificate and/or Centers for Medicare and Medicaid (CMS) certification.

(c) Once verification of all documents has been completed by the Wyoming State Hospital, notification of acceptance or rejection will be provided to the hospital. If the hospital is accepted, a contract outlining the hospital or facility’s responsibilities with regard to accepting patients and providing treatment for persons with mental illnesses, as defined in ~~W.S.~~ Wyo. Stat. Ann. §25-10-110, will be initiated by the Division.

(d) Contract or agreement extensions or the development of new contracts will be completed ~~annually~~ biennially pending receipt by the Wyoming State Hospital of the documents listed in Section 4(b)(i) and (ii).

~~Section 5. Visitation to Designated Hospitals.~~

~~The Wyoming Department of Health or its designee will conduct annual visits to designated hospitals pursuant to W.S. § 25-10-104(d) and review compliance with these rules and with the contract requirements as applicable.~~

Section 6. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 7. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals ~~and~~ or bulletins, which are inconsistent with this Chapter.

Section 8. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 8

Emergency Rules and Regulations for Designated Hospitals and Treatment Providers Standards for Reimbursement of Designated Hospitals ~~or Other~~ and Treatment Providers

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), codified at ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-101, ~~et seq.~~ through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101, ~~et seq.~~ through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish standards for the reimbursement of designated hospitals or other treatment providers and to establish standards to ~~control~~ manage costs billed to the Department pursuant to Wyo. Stat. Ann. §§ 25-10-112.

(b) The Department may issue manuals, ~~or~~ bulletins, or both to interpret the provisions of these rules, ~~which. Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

Section 3. Filing of Claims.

(a) Designated hospitals or ~~other~~ treatment providers filing claims with the Department under Wyo. Stat. Ann. § 25-10-112 for services provided pursuant to Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110 or Wyo. Stat. Ann. § 25-10-110.1 shall provide documentation to the Department detailing the services rendered ~~to patients for which payment is being~~ payment requested. This documentation shall include, but is not limited to:

(i) All relevant and requested medical records directly related to the services for which payment is being requested;

(ii) An itemized billing statement (for services provided by designated hospitals) ~~for which payment is requested, to include, as applicable~~ services, including:

(1) A universal billing form;

(2) A CMS 1500.

(iii) The emergency detention notice, Form 3-81 and, if applicable, the continued emergency detention court order, if applicable;

(iv) The involuntary hospitalization court order, if applicable, and any ~~any~~ papers showing the patient's release from involuntary hospitalization, Form 14-81;

(v) A certification, signed by the designated hospital representative or treatment provider, indicating that the patient has no public or private health insurance and that there are no other governmental benefit programs from which it can recover the costs of treatment;

~~(vi) An affidavit from the patient or the legal representative of the patient providing the patient's financial condition to document the patient's inability to pay for treatment. The format for the affidavit and the certification shall be developed by the Department;~~

~~(vii) Documentation of all efforts made to recover costs of treatment from public and private health insurance, from the patient, and from government benefit programs prior to seeking payment from the Department;~~

~~(b) Claims for payment to the Department must be submitted within~~ The Department may not pay claims submitted more than one (1) year of the service date to be considered for payment;

~~(c) The Department may not pay~~ claims for medical treatment for those conditions that are not directly related to the emergency detention or involuntary hospitalization. ~~shall not be paid by the Department.~~

Section 4. **Payment of Claims.**

(a) Payment made by the Department pursuant to Wyo. Stat. Ann. § 25-10-112, for services provided by a designated hospital or other treatment provider under Wyo. Stat. Ann. § 25-10-109 and Wyo. Stat. Ann. § 25-10-110, shall not exceed:

(i) The current rate for similar services as determined by Medicaid; ~~or~~

(ii) A fixed, all-inclusive per diem rate as determined by the Department; or

(iii) Payments arranged through mental health or substance abuse contracts with the Behavioral Health Division, if applicable.

(b) ~~The Department,~~ In considering a claim for payment, the Department shall determine if the costs submitted by the designated hospital or ~~other~~ treatment provider are reasonably related to the care furnished to the patient and if the care furnished to the patient was medically necessary for the specific treatment of the patient's mental illness.

(c) After a designated hospital ~~or other treatment provider~~ has submitted all documentation as required in Section 4(b), the Department shall pay each claim within 45 days of receipt of the claim pursuant to Wyo. Stat. Ann. § 16-6-602.

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals ~~and/or~~ bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 9
Rules and Regulations for Convalescent Leave
from Involuntary Hospitalization
General Provisions

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. **Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at ~~W.S.Wyo. Stat. Ann. §§ 25-10-101 through -127,~~ and the Wyoming Administrative Procedure Act at ~~W.S.Wyo. Stat. Ann. §§ 16-3-101, *et seq.* through -115.~~

Section 2. **Purpose and Applicability.**

(a) These rules have been adopted to establish definitions applicable to Chapter 10, Standards for Convalescent Leave, pursuant to ~~W.S.Wyo. Stat. Ann. § 25-10-127.~~

(b) The Department may issue manuals, or bulletins, ~~or both~~ to interpret the provisions of this rule, which. ~~Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

Section 3. **General Provisions.**

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

Section 4. **Definitions.**

The following definitions shall apply in the interpretation and enforcement of Chapters 9 and 10 of these rules: ~~Where the context in which words are used in these rules indicates that such is the intent, words in the singular shall include the plural and vice versa. Throughout these rules gender pronouns are used interchangeably, except where the context dictates otherwise. The~~

~~drafters have attempted to utilize each gender pronoun in equal numbers, in random distribution. Words in each gender shall include individuals of the other gender.~~

(a) “Appropriate Parties” means the patient’s guardian, if applicable, the patient’s care giver, if applicable, the patient’s family, if applicable, the community treatment provider, and the county attorney involved in the involuntary hospitalization procedures for the patient.

(b) “Community Treatment Provider” means a community mental health center or other mental health treatment service provider chosen by the patient.

(c) “Convalescent Leave” means the placement of a patient who was involuntarily hospitalized under ~~W.S.~~Wyo. Stat. Ann. § 25-10-110 and treated at the Wyoming State Hospital, into a community on a conditional status, for purposes of continued recovery.

~~(d) “Department” means the Wyoming Department of Health.~~

~~(e)~~ (ed) “Designated Hospital” means a ~~holding hospital or psychiatric treatment hospital~~ psychiatric treatment hospital that provides care to an individual detained under Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110, or Wyo. Stat. Ann. § 25-10-110, and which bills the Department or the responsible county for the costs of care under the Act.

~~(f) “Holding Hospital” means any hospital that provides care to an individual detained under W.S. § 25-10-109 and which bills the Department or the responsible county for the costs of that care under W.S. § 25-10-112.~~

~~(g)~~ (ge) “Involuntary hospitalization” mean the hospitalization of a person against their will under W.S. § 25-10-110, at the Wyoming State Hospital or at a psychiatric treatment hospital under contract with the Department to provide inpatient psychiatric treatment.

~~(h) “Patient” means a person who is involuntarily hospitalized under W.S. § 25-10-110, at the Wyoming State Hospital.~~

~~(i)~~ (if) “Treating Medical Provider” means a physician, psychiatrist, advanced practice registered nurse, physician assistants, or other medical staff licensed in the State of Wyoming and employed by the Wyoming State Hospital or designated hospital.

~~(j)~~ (jg) “Treatment Team” means staff of the Wyoming State Hospital or designated hospital representing the various disciplines needed to treat and promote the recovery of the patient. Treatment teams include, but are not limited to, the treating physician and a case manager.

~~(k) “Wyoming State Hospital” means the state healthcare facility serving persons with mental illness located in Evanston, Wyoming.~~

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 57. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

CHAPTER 10
Rules and Regulations for Convalescent Leave
from Involuntary Hospitalization
Standards for Convalescent Leave

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at ~~W.S.~~ Wyo. Stat. Ann. §§ 16-3-101, ~~et seq.~~ through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for releasing a patient on convalescent status pursuant to ~~W.S.~~ Wyo. Stat. Ann. § 25-10-127.

(b) The Department may issue manuals, or bulletins, ~~or both~~ to interpret the provisions of this rule, which. ~~Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

Section 3. Conditions Necessary for Convalescent Leave.

(a) Convalescent Leave may be utilized by the State Hospital or designated hospitals when:

(i) The patient:

(A) ~~has~~ Was previously ~~been~~ involuntarily hospitalized and ~~has~~ demonstrated an inability to follow past discharge plans or has demonstrated a history of noncompliance with outpatient treatment;

(ii) ~~The patient w~~Will need additional assistance and support to adequately comply with the required plan of treatment on an outpatient or nonhospital basis; or

(iii) ~~The patient w~~Will likely need and will benefit from community-based services and support to avoid decompensation and additional involuntary hospitalizations, and

those services and support are available in the community the patient wishes to return to, or in the community best suited to provide such aftercare of the patient.

(ii) When the treating medical provider, after consultation with the treatment team and appropriate parties, believes it is in the best medical interest of the patient.

~~(b) Convalescent Leave may only be considered when at least one of the above requirements are met, and when the treating medical provider, after consultation with the treatment team and appropriate parties, believes it is in the best medical interests of the patient.~~

~~(e) No person placed at the Wyoming State Hospital with active or pending legal charges will be eligible for Convalescent Leave. Wyoming State Hospital patients who have active or pending criminal charges may not be placed on convalescent leave.~~

Section 4. **Process to Initiate Convalescent Leave.**

(a) Request for Convalescent Leave.

(i) Treatment team. Members of the patient's treatment team and any designated gatekeeper must meet to discuss the potential benefits of Convalescent Leave. Although all members of the treatment team do not need to agree to the leave, all members of the team must be a part of the decision-making process. If the members of the treatment team do not arrive at a consensus for the use of Convalescent Leave, the patient's treating medical provider leading the treatment team will make the final decision. If a decision is made to pursue Convalescent Leave, the request must be documented and include the applicable conditions contained in Section 3(a) as justification for the request. If the patient's treatment team is located at a designated hospital, the treatment team shall consult with the Wyoming State Hospital on all convalescent leave orders and treatment plans.

(ii) Patient and Appropriate Parties. After a request for Convalescent Leave is made by the treatment team, one or more members of the treatment team shall provide written, email, or fax notice to and consult with the patient and appropriate relevant parties, including, when applicable, the guardian, parent, gatekeeper and community treatment provider. ~~Members of the treatment team shall document the date of notice to and consultation with the above parties, noting the participants of the consultation and any concerns or support expressed by these parties. A member of the treatment team shall document this process.~~

(iii) Wyoming State Hospital or designated hospital staff shall assist patients being discharged on convalescent leave in applying for Medicaid and securing Social Security benefits, if applicable.

(b) Convalescent Leave Plan.

(i) ~~Once the treatment team has obtained input from the patient and all appropriate parties, a written Convalescent Leave Plan will be developed by the patient's treatment team, with the documented input of the patient and the community treatment provider. Using input from the patient and all appropriate parties, the treatment team shall develop a written Convalescent Leave Plan.~~

(ii) The Convalescent Leave Plan shall include:

(A) The roles and responsibilities of the patient and ~~the~~ other appropriate parties and any areas for which the treating facility, Wyoming State Hospital, or designated hospital will retain responsibility while the patient is on Convalescent Leave;

(B) The community treatment services, medication, and supports to be provided, the entity responsible for providing them ~~the services, medication, and supports~~ and how they will be paid. ~~Wyoming State Hospital staff will assist patients in applying for Medicaid and securing Social Security benefits, if applicable. Community treatment providers will bill third party pay sources prior to billing the patient for services provided;~~

(C) Provisions for quarterly reports from the community treatment provider, or any designated gatekeeper, to the ~~Wyoming State Hospital~~ Department on the status and progress made by the patient. If more than one community treatment provider is selected by the patient to provide outpatient services and supports, the plan shall specify the community treatment provider responsible for coordinating care and providing quarterly reports;

(D) The conditions under which Convalescent Leave will be revoked;

(E) The preferred location for detention and the method of detention of the patient if Convalescent Leave is revoked.

(iii) The Convalescent Leave Plan will be provided to the patient, the patient's treatment team, any designated gatekeeper, and other appropriate parties for signature, ~~thereby acknowledging its terms and the role of each entity in achieving the goals of the Convalescent Leave. Signature shall constitute acknowledgment of the plan, and the role of each entity in achieving the goals of the Convalescent Leave.~~

(iv) The Convalescent Leave Plan, signed by the patient, the patient's treatment team and other appropriate parties, may act as the initial report to the court ~~having jurisdiction over~~

~~the location in which the case originated in support of Convalescent Leave, or a separate report to the court outlining additional information may be drafted and submitted by the treating medical provider.~~

~~(v) Copies of the signed Convalescent Leave plan shall be provided to the patient and the appropriate parties in a manner to ensure receipt of the copy prior to the patient's release. The treatment team shall provide copies of the signed Convalescent Leave plan to the patient and the appropriate parties in a manner to ensure receipt of the copy prior to the beginning of convalescent leave.~~

(c) ~~Application~~ Notice for Convalescent Leave.

~~(i) Upon completion of the Convalescent Leave plan, the Wyoming State Hospital will notify the Attorney General's Office of the request for Convalescent Leave. Notification to the Attorney General's Office may be by email or by fax, and must include copies of the initial commitment documents for the patient's involuntary commitment, the signed Convalescent Leave Plan, and any other relevant information or documents, including any separate reports that are drafted in support of the Convalescent Leave.~~

~~(ii) The Attorney General's Office Wyoming State Hospital or designated hospital will file an all application notices for approval of the Convalescent Leave as soon as possible upon receipt of all required information as set forth in Section 4(e)(i). A copy of the application will be sent to the county attorney who initiated involuntary hospitalization procedures, the attorney that originally represented the patient and the community treatment provider. with the Court and provide notice to the county attorney office that initiated involuntary hospitalization proceedings, any designated gatekeeper, and other interested parties. Notice shall consist of a copy of the notice for convalescent leave and copies of the initial commitment documents, the signed Convalescent Leave Plan, and any other relevant information or documents, including any separate reports or documents in support of the Convalescent Leave.~~

~~(iii) If no objection is filed by the county attorney or the court within fourteen (14) days of receipt of the application, the patient may be released on Convalescent Leave subject to being returned to the hospital for noncompliance.~~

~~(iv) If an objection to Convalescent Leave is filed by either the county attorney or the court, a hearing shall be scheduled by the court. At the hearing, the parties may appear to testify in support of or against the Convalescent Leave.~~

~~(vii) The Wyoming State Hospital shall develop and utilize uniform forms for Convalescent Leave Plans.~~

Section 5. **Return to Involuntary Hospitalization from Convalescent Leave.**

(a) If the ~~requirements of the Convalescent Leave Plan are not followed by~~ hospital reasonably believes that it is in the best interest of the patient, the patient ~~will~~shall be returned to the Wyoming State Hospital or designated hospital. The Wyoming State Hospital or designated hospital ~~shall alone have the discretion to~~ may return the patient to its care, ~~recognizing that the client retains the right to question this decision at a hearing~~ subject to notice and hearing as provided by Wyo. Stat. Ann. §§ 25-10-116 and 127.

(b) Any member of the patient's treatment team, the patient, any designated gatekeeper, or ~~the other~~ appropriate parties may request that the Wyoming State Hospital or designated hospital return the patient to its care. ~~Requests to return the patient to the Wyoming State Hospital must be based on the inability of the patient or unwillingness of the patient to comply with the Convalescent Leave Plan. The Wyoming State Hospital or designated hospital, however, must reasonably believe that a return from Convalescent Leave is in the best interests of the patient, before a return from Convalescent Leave is appropriate.~~ shall review requests under subsection (b) to determine whether return from Convalescent Leave pursuant to subsection (a) is in the best interest of the patient.

(c) If the patient is not able or is unwilling to return to the hospital, or if the Wyoming State Hospital or designated hospital refuses to return the patient to its care for a violation of the Convalescent Leave Plan, the party seeking the patient's return may request a hearing before the court that ordered the patient's involuntary hospitalization. ~~The action shall be a continuation of the involuntary hospitalization proceeding, and the request for hearing shall be under the same docket number as the involuntary hospitalization proceeding. At this hearing, the court must determine that return to the Wyoming State Hospital from Convalescent Leave is in the best interests of the patient.~~

(d) ~~Transportation for a patient returning to the~~ The Wyoming State Hospital shall be arranged by the Wyoming State Hospital ~~arrange~~ transportation for a patient returning to the Wyoming State Hospital.

(e) The Wyoming State Hospital shall pay for the detention and transportation expenses to detain and return the patient to the hospital, pursuant to ~~W.S.~~Wyo Stat. Ann. § 25-10-127.

(f) The ~~Wyoming Attorney General's Office~~ hospital shall file a Notice of Return from Convalescent Leave with the court, and will provide copies to the appropriate parties, notifying the parties that the patient is being or will be returned to the Wyoming State Hospital or designated hospital.

(g) Upon the patient's return to the Wyoming State Hospital or designated hospital, the patient shall be notified of his/her rights, including the right to contest his return to the Wyoming State Hospital, the right to ~~an administrative~~ a hearing, and the right to counsel.

(h) If the patient is returned to the Wyoming State Hospital, the Convalescent Leave is revoked.

Section 6. One Year Follow Up.

(a) Prior to the end of one (1) year on convalescent leave, and not less than annually thereafter, patient's one year anniversary on Convalescent Leave status, the patient's treatment team shall consult with the patient, any designated gatekeeper, and ~~each of the other~~ appropriate parties to reconsider and reexamine the facts relating to the involuntary hospitalization of the patient.

(b) If the patient's treatment team and the community treatment provider determine that involuntary hospitalization is no longer anticipated for the patient, the community treatment provider and any designated gatekeeper, in collaboration with the Wyoming State Hospital or designated hospital, shall submit a 14-81 form to the Court for the discharge of the patient, following the procedures set forth in ~~W.S.~~ Wyo. Stat. Ann. § 25-10-116(b). With the participation of the patient, the patient's guardian, if applicable, the patient's caregiver, if applicable, the patient's family, if applicable, and the community treatment provider, the Wyoming State Hospital shall prepare a discharge plan.

(c) If ~~the~~ a patient is on Convalescent Leave ~~but~~ is later returned to the Wyoming State Hospital or designated hospital and then placed on Convalescent Leave status, the one year follow up shall be based on the date of the most recent Convalescent Leave.

Section 7. Two Year Discharge Process.

(a) ~~At the patient's two year anniversary~~ After two (2) years on Convalescent Leave, the community treatment provider, in collaboration with the Wyoming State Hospital or designated hospital, and any designated gatekeeper, shall submit a 14-81 form to the court, seeking the discharge of the patient, pursuant to ~~W.S.~~ Wyo. Stat. Ann. § 25-10-116(b). The 14-81 form should note the client's success during the two year Convalescent Leave period, and include a discharge plan prepared by the Wyoming State Hospital in conjunction with the patient, the patient's guardian, if applicable, the patient's caregiver, if applicable, the patient's family, if applicable, and the community treatment provider and any designated gatekeeper.

(b) If the patient is returned from Convalescent Leave to the Wyoming State Hospital or designated hospital, or treatment provider and subsequently again re-placed on Convalescent Leave status, the required discharge after two (2) years of Convalescent Leave shall be based on the date of the most recent Convalescent Leave.

Section 8. Responsibilities of the Wyoming State Hospital or Designated Hospital While Patient is on Convalescent Leave.

(a) While the patient is on Convalescent Leave, the Wyoming State Hospital or designated hospital shall periodically review, with the community provider and any designated gatekeeper, the treatment progress of the patient as documented in the quarterly report submitted by the community treatment provider.

(b) Neither the physicians nor the caseworkers at the Wyoming State Hospital or designated hospital will have on-going responsibilities for the direct care or treatment of the patient while the patient is on Convalescent Leave unless otherwise documented in the treatment plan, although they ~~will~~ shall be available for consultation with community treatment providers. This provision recognizes the ~~client's~~ patient's best interests in being placed in his or her local community, which may be a great distance from the Wyoming State Hospital or designated hospital. ~~The responsibility for the medical and/or mental health of the patient will follow the patient into the community setting as set forth in the Convalescent Leave Plan.~~

Section 9. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 10. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 11. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

~~**Section 9. Superseding Effect.**~~

~~When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals and/or bulletins, which are inconsistent with this Chapter.~~

~~Section 10. **Severability.**~~

~~If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.~~

Chapter 11
Rules and Regulations for Directed Outpatient Commitment
(Wyo. Stat. Ann. § 25-10-110.1)

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. § 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities of Wyoming Department of Health treatment providers for the treatment of patients court-ordered to Directed Outpatient Commitment as provided in Wyo. Stat. Ann. § 25-10-110.1.

(b) The Department may issue manuals or bulletins to interpret the provisions of this rule, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

Section 3. Directed Outpatient Commitment Treatment Provider Requirements

(a) If an individual is determined mentally ill under the Act (Wyo. Stat. Ann. §§ 25-10-109 through -110.1) and is ordered by a court for directed outpatient commitment to a treatment provider as defined in Chapter 6 of these rules, the treatment provider shall comply with the court order and admit the patient unless it demonstrates to the court that it cannot comply with the court order for directed outpatient commitment.

(b) The treatment provider shall prepare a treatment plan, as required by the court order, in consultation with any gatekeeper designated by the Department. In preparing the treatment plan, the treatment provider shall consult with the county attorney, any relevant healthcare providers, and the patient or the person responsible for the care and custody of the patient. The treatment plan may not exceed two (2) years.

(c) The treatment provider shall issue a report to the court, the county attorney, and any gatekeeper designated by the Department every six (6) months. The report shall contain the patient’s status in the directed outpatient commitment treatment plan, any past non-compliance with the treatment plan by the patient, and any barriers to the patient’s continued maintenance in the community setting.

Section 4. Payment of Treatment Providers for Directed Outpatient Commitment

(a) Services provided by a treatment provider, pursuant to Wyo. Stat. Ann. § 25-10-110.1, shall be reported under mental health and substance abuse treatment contracts and agreements between treatment providers and the Department.

(b) If a court orders an individual to directed outpatient commitment under a court-approved provider not under contract with the Behavioral Health Division, it is not the responsibility of the Department to arrange for payment and reimbursement of such a provider.

Section 5. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 6. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 7. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

Chapter 12
Rules and Regulations for Exchange of Information under Title 25

Emergency rules are no longer in effect 120 days after filing with the Secretary of State

Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for the treatment of patients court-ordered to emergency detention, involuntary hospitalization, or Directed Outpatient Commitment as provided in Wyo. Stat. Ann. §§ 25-10-101 through -127.

Section 3. Exchange of Patient Information under Title 25

(a) When an individual is determined mentally ill under Wyo. Stat. Ann. §§ 25-10-109 through -110.1, protected health information regarding the individual’s condition, diagnoses, history, and detention or hospitalization may be exchanged between relevant healthcare providers, treatment providers, the county attorney, the examiner, any gatekeeper designated by the Department, and the court. Any exchange of protected health information under the Act shall comply with requirements under all applicable state and federal law.

Section 4. Implementation of Chapter.

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

Section 5. Superseding Effect.

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

Section 6. Severability.

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.