

## **Policy Name: Communicating Primary Psychiatric Diagnosis**

**Policy Number: MED - 0002**

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Date

***Cross Reference(s)***

*None*

***Policy Statement***

Partners in Recovery Direct Care Clinic staff will communicate primary psychiatric diagnoses to the Clinical Team.

***Purpose***

To provide clear instructions on the procedure for identifying and updating the primary psychiatric diagnosis in the medical record.

***Scope***

Partners in Recovery Direct Care Clinics.

***Key Terms***

Should the reader need to inquire as to the definition of a term used in this policy, Partners in Recovery Key Term Glossary can be found in the back of the Policy and Procedure Manual.

***Standards***

- I. Responsible Behavioral Health Medical Practitioner (BHMP)
  - A. BHMPs and psychiatric nurse practitioners are the only authorized persons to determine the primary psychiatric diagnosis and make changes to it.
  - B. All clinical team members should be encouraged to provide input into the formulation of the primary psychiatric diagnosis.
  - C. In the situation where there is a contracted BHMP or psychiatric nurse practitioner, any changes to the primary psychiatric diagnosis must be staffed with the Chief Psychiatrist at the clinic, or if unavailable, the Area Medical Director.
- II. Documentation
  - A. The primary psychiatric diagnosis must be consistent throughout the medical record, (e.g. behavioral health (BH) recipient's face sheet, progress notes, assessments, service plans, legal documents, etc.).
  - B. The official source of the primary psychiatric diagnosis for clinical, administrative, and billing purposes must be the BH recipient's face sheet located under the first tab in the front of the medical record.
    1. The primary psychiatric diagnosis is based on the most recent annual updated Psychiatric Assessment or the initial psychiatric assessment which is the most comprehensive clinical assessment performed by a BHMP or psychiatric nurse practitioner.

2. The diagnosis on the psychiatric progress note must be consistent with the primary psychiatric diagnosis identified on the BH recipient's face sheet.
3. The justification for a change in the primary psychiatric diagnosis must be documented in the psychiatric progress note and any change must be immediately entered into ClaimTrak and reflected on the BH recipient's face sheet.

III. Procedure:

- A. The determination is made by a BHMP or nurse practitioner to change the primary psychiatric diagnosis.
- B. The justification for this change is documented in the psychiatric progress note and discussed with the clinical team.
- C. The change in the primary psychiatric diagnosis is communicated to the Clinical Coordinator and clinical team during the Morning Meeting.
- D. Contracted BHMPs (Locum Tenens) and psychiatric nurse practitioners must staff changes to a primary psychiatric diagnosis with the Chief Psychiatrist of the clinic, or if unavailable, the Area Medical Director. The Chief Psychiatrist or Area Medical Director will communicate approval/disapproval directly and formally to the Clinical Coordinator.
- E. The Clinical Coordinator will ensure the revised diagnosis is entered into ClaimTrak, reflected on the BH recipient's face sheet after the Morning Meeting, and filed into the consumer's medical record.

***Associated Partners in Recovery Direct Care Clinic Forms & Attachments***

*None*

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