

Below are the definitions for the Discharge options:

- **Client does not meet Medical Necessity** – Client does not display signs and symptoms that lead to the inclusion of a covered diagnosis and/or an established level of impairment. See QM P&P 01-07.
- **Client has completed services** – Client has met treatment goals as defined in the Client Plan.
- **Client is deceased**
- **Client is receiving services elsewhere - step up** – Client requires mental health services that are at a higher level of intensity and/or frequency. Services can be provided by either a public or private entity.
- **Client is receiving services elsewhere - step down** – Client no longer requires an intensive level of mental health services and can be served in a lower service level. Services can be provided by either another County Mental Health Plan provider or self-pay private provider. This does not include referral to GMC or PCP.
- **Client is receiving services elsewhere – transfer** – Client does not require a change in level of services but is receiving services from another Sacramento County Mental Health Plan provider or self-pay private provider.
- **Client moved out of Sacramento County** – Client moved out of Sacramento County **and** is no longer receiving services through a Sacramento County Mental Health Plan provider.
- **Client refused/declined services** – After engaging in services client chose not to complete the treatment program, with or without specific advice to continue treatment.
- **Client's whereabouts unknown** – After engaging in services, client has not received treatment for 3 or more months and attempts to contact client have been made but client has not responded and whereabouts are unknown.
- **Other** – Client left for some other specific reason that is not included in another category. Reason should be documented.
- **Reason Not Available** - Client was referred and opened to provider as a result of a service request but client never engaged in (showed up) services of any kind; Administrative Discharge
- **Referred to GMC – Kaiser (170)** – Client is known to be linked to Kaiser GMC and is being referred to Kaiser GMC for their MH services. This selection would include PCP (on-going medication support)
- **Referred to GMC - Health Net (150)** - Client is known to be linked to Health Net GMC and is being referred to Health Net GMC for their MH services. This selection would include PCP (on-going medication support)
- **Referred to GMC - Blue Cross (190)** - Client is known to be linked to Blue Cross GMC and is being referred to Blue Cross GMC for their MH services. This selection would include PCP (on-going medication support)
- **Referred to GMC - Molina (130)** - Client is known to be linked to Molina GMC and is being referred to Molina GMC for their MH services. This selection would include PCP (on-going medication support)
- **TBS – Caregiver Refused** – Caregiver refused Therapeutic Behavioral Services.
- **TBS – Primary Provider Refused** – Primary Provider declines to continue TBS services.