

## Drop-In Center

Drop-In Center services are day/night services provided in a centralized location to clients and non-clients on a regular or occasional drop-in basis. The service is designed to provide a safe and healthy environment for needy individuals who otherwise would be unlikely to respond to more structured programming. It is designed to meet some of the social, educational, health, and other non-treatment needs of the individual. It may include individual and group supports and training or retraining activities required for successful maintenance, or re-entry into the individual's vocational or community living situation. A Drop-In Center is distinguished from a "Day/ Evening Activity Program" in that participation is usually spontaneous on the part of the recipient and not necessarily a part of an official treatment plan'.

- (1) Day/Night services certified as one of the following *may not* be included in this category:
  - a. Partial Hospitalization;
  - b. Day Treatment and Education, ED Children;
  - c. Therapeutic Preschool;
  - d. Specialized Summer Day Treatment;
  - e. Therapeutic Day Camp Programs;
  - f. Adult Day Health;
  - g. Developmental Day;
  - h. Adult Developmental Activity Program; or
  - i. Psychosocial Rehabilitation.
- (2) Specific professional services provided (routinely or occasionally) to clients of the day program by professionals not assigned to (or cost found for) the program, shall be reported and accounted for as a part of regular periodic services as defined (e.g., individual or group Outpatient Treatment/Habilitation, for example).
- (3) This service is available for a period of three or more hours per day; although, an individual may attend for fewer than three hours.
- (4) Only direct client/non-client attendance time is to be reported.
- (5) Preparation, documentation and staff travel time are not to be reported.

### Therapeutic Relationship and Interventions

Drop in Center is a safe and healthy environment which provides supportive services on a drop-in basis to clients and non-clients.

### Structure of Daily Living

It is designed to meet some of the social, educational, health, and other non-treatment needs of the individual. It may include individual and group supports and training or retraining activities required for successful maintenance, or re-entry into the individual's vocational or community living situation.

### Cognitive and Behavioral Skill Acquisition

This service supports the individual through activities such as: social skills development, leisure activities, training in daily living skills, improvement of health status, and utilization of community resources.

### Service Type

This is a day/evening type of service. Under NC Administrative Code 10A NCAC 27G .5400. This service shall be available for the number of hours per day required by Licensure Rules; although, an individual may attend for fewer than three hours. This service is not Medicaid billable.

### Resiliency/Environmental Intervention

This service assists consumers in utilizing naturally occurring support systems and relationships in the community.

### Service Delivery Setting

This service may only be provided in a licensed facility.

<b>Medical Necessity/Clinical Appropriateness</b>	
<p>A. There is a mental health diagnosis present or the person has a condition that may be defined as a developmental disability as defined in GS 122C-3 (12a).</p> <p style="text-align: center;"><b>AND</b></p> <p>B. For individuals with an I/DD, NCSNAP or Supports Intensity Scale</p> <p style="text-align: center;"><b>AND</b></p> <p>C. The recipient is experiencing difficulties in at least one of the following areas:</p> <ol style="list-style-type: none"> <li>1. functional impairment</li> <li>2. crisis intervention/diversion/aftercare needs, and/or</li> <li>3. at risk of placement outside the natural home setting.</li> </ol> <p style="text-align: center;"><b>AND</b></p> <p>D. The recipient's level of functioning has not been restored or improved and may indicate a need for clinical interventions in a natural setting if any of the following apply:</p> <ol style="list-style-type: none"> <li>1. At risk for out of home placement, hospitalization, and/or institutionalization due to symptoms associated with diagnosis.</li> <li>2. Presents with intensive verbal, and limited physical aggression due to symptoms associated with diagnosis, which are sufficient to create functional problems in a community setting.</li> <li>3. At risk of exclusion from services, placement or significant community support systems as a result of functional behavioral problems associated with the diagnosis.</li> <li>4. Requires a structured setting to foster successful integration into the community through individualized interventions and activities.</li> </ol>	
<b>Service Order Requirement</b>	
N/A	
<b>Continuation/Utilization Review Criteria</b>	
N/A	
<b>Discharge Criteria</b>	
N/A	
<b>Service Maintenance Criteria</b>	
N/A	
<b>Provider Requirement and Supervision</b>	
Each drop in Center shall have at least one staff member on site at all times when clients are present in the facility.	
<b>Documentation Requirements</b>	
Documentation is required in a client record, or in a separate or pending file (some type of form which identifies the individual by name, or unique identifier on a daily basis is recommended).	
<b>Appropriate Service Codes</b>	
<b>Medicaid</b>	<b>NC TRACKS</b>
<b>Not Billable</b>	<b>YP690 (Attendance)</b>
	<b>YP692 (Coverage Hrs.)</b>