In order to assure a timely consultative process, Care Management Entity (CME) should assure that the following checkpoints are completed prior to requesting Tier II Consultation:

- If you are seeking consultation due to the “30 days on Youth Link” rule, you have made reasonable efforts to exhaust all provided Youth Link options.
- If you are seeking consultation due to the “three denial rule”, assure that all “not accept” referrals are consistent with the identified Intensities of Service, (IOS).
- Confirm that youth’s referral is active on Youth Link. If the referral is no longer active, you have taken steps to have the referral reposted.
- Assure that all “not accept” referrals are documented in Youth Link.
- Examined denial reasons and made efforts to follow-up with providers when deemed appropriate; examples may include, but not limited to, the following:
  - **Lack of required clinical information** - (refer to CSOC Policy #4, Admission to Out-of-Home Treatment Settings for acceptable referral packet information);
  - **Lack of care management follow-up within reasonable timeframe**;
  - **Not educationally classified** (refer back to Provider PIF);
  - **The denial reason is not consistent with PIF/population served** (i.e. “too psychiatric” for PCH IOS);
  - **Clinical information that is +12 months old**;
  - **Court order for specific provider or IOS** - Case/Care Manager should immediately e-mail Court Liaison, Mike Higginbotham (CCIS/Family Court) at Michael.Higginbotham@dcf.state.nj.us or Kim Maloney (Juvenile Court) at Kimberle.Doyle-Maloney@dcf.state.nj.us for further assistance;
  - **No bed availability** - The Care Management Entity should advocate for a meet-and-greet in order to place youth on waiting list for next available bed;
  - **Identified as “inappropriate” however lacks detail** - The Care Management Entity should seek more specifics as to why referral was inappropriate;

Confirmed if there has been any updated clinical information since the initial OOH Referral Request or TJCR that may change current IOS:

- Youth’s location may be a clue that updated information is available (i.e. recent hospitalization, EDRU, etc);
- Confirm if youth is/has been receiving any outpatient or community services in which updated clinical reports are available for review.
- Confirm if any specialized evaluations have been completed since initial OOH review, which may include, but not limited to, fire setting evaluation, sex-specific evaluation, IEP/FSIQ, or substance use evaluation.
- If new clinical information arises, inquire date of evaluation, evaluator name with credentials, and treatment recommendations.