

# Residential Rehabilitation Program (RRP) Services in Baltimore County

## APPLICATION PACKET

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Please take a moment to familiarize yourself with the basic qualifications and general information about RRP services before completing and submitting an application. The Baltimore County Bureau of Mental Health/Core Services Agency contracts with five providers to offer Residential Rehabilitation Program (RRP) services for eligible Residents of Baltimore County. The Core Services Agency acts as a “gatekeeper” for RRP services. One application for RRP services may be completed and submitted to the Core Services Agency for consideration for all RRP provider programs. Because RRP services are in high demand, there is a wait list for ALL applicants, and each applicant must wait until his or her name reaches the top of the wait list before being considered for any available opening.

### WHO IS ELIGIBLE?

- Applicants with Medical Assistance, Medicaid, MA, or who can get these benefits. *Individuals with private insurance or Medicare may still qualify if they are able/willing to relinquish those benefits and if they do not have assets which exceed the MA eligibility guidelines (this typically involves having less than \$2,000 in savings, assets, car, house, etc...)*
- Applicants with a qualifying diagnosis and a clear need for rehabilitation. *Please see the list of Included Diagnosis for RRP Eligibility (page 2 of this packet) to determine whether or not the applicant’s diagnosis meets eligibility for RRP services. In addition, all applicants must have a clear need for rehabilitation such as needing assistance with Activities of Daily Living, Medication Monitoring, and/or development of other skills needed to become independent.*
- Applicants who are willing and able to be responsible for their cost of care. *Individuals who are applying should have Social Security Income (SSI), Disability Income (SSDI), VA benefits, or other regular monetary benefits that are sufficient to cover room and board expenses. TEHMA benefits are NOT SUFFICIENT to cover these costs. Individuals who do not have monetary benefits are encouraged to apply for them as soon as possible. Any individual who receives more than \$1,600 in monthly assets will be in-eligible for MA and thus, ineligible for RRP. If an applicant has other financial obligations (child support, debts, court fines) which would prevent payment for cost of care, he/she will have to wait until they are no longer financially obligated in order to apply for RRP services.*
- Applicants who are willing and able to participate in RRP services. *RRP services are completely voluntary and so it is required that all applicants be in agreement with their application for RRP services. In addition, all applicants must be willing to participate in their treatment planning and to take their medications as prescribed by their psychiatrist. Anyone who indicates that they are not interested in their treatment or in taking their medications will not be considered for RRP services. Levels of Service at the RRP*

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### General Level RRP Provides:

- *at least one face-to-face staff visit per individual per week*
- *limited medication monitoring/assistance (ie... weekly med pack coordination)*
- *staff on-call, 24 hours per day, 7 days per week to respond to emergencies*

### Intensive Level RRP Provides:

- *daily support, including medication monitoring when necessary*
- *staff availability at a minimum of 40 hours a week and in limited cases, up to 24 hours a day, 7 days a week (but never one-on-one or all male/all female staffing)*
- *staff on-call, 24 hours per day, 7 days per week to respond to emergencies*

MISA Level RRP Provides: *Same services as Intensive Level with added substance abuse component in the residence as well as in the day program to address substance abuse issues for dually diagnosed consumers.*

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**Included Diagnosis for RRP Qualification**  
DSM IV-TR/ ICD:9 Codes

- 295.10** Schizophrenia, Disorganized Type
- 295.20** Schizophrenia, Catatonic Type
- 295.30** Schizophrenia, Paranoid Type
- 295.40** Schizophreniform Disorder
- 295.60** Schizophrenia, Residual Type
- 295.70** Schizoaffective Disorder
- 295.80** *ICD:9 Schizophrenia, Unspecified*
- 295.90** Schizophrenia, Undifferentiated Type
- 296.33** Major Depressive Disorder, Recurrent, Severe, without Psychotic Features
- 296.34** Major Depressive Disorder, Recurrent, Severe, with Psychotic Features
- 297.1** Delusional Disorder
- 298.9** Psychotic Disorder, NOS
- 301.22** Schizotypal Personality Disorder
- 301.83** Borderline Personality Disorder
- 296.43** Bipolar I Disorder, Most Recent Episode, Manic, Severe without Psychotic Features
- 296.44** Bipolar I Disorder, Most Recent Episode, Manic, Severe with Psychotic Features
- 296.53** Bipolar I Disorder, Most Recent Episode, Depressed, Severe without Psychotic Features
- 296.54** Bipolar I Disorder, Most Recent Episode, Depressed, Severe with Psychotic Features
- 296.63** Bipolar I Disorder, Most Recent Episode, Mixed, Severe without Psychotic Features
- 296.64** Bipolar I Disorder, Most Recent Episode, Mixed, Severe with Psychotic Features
- 296.80** Bipolar Disorder, NOS
- 296.89** Bipolar II Disorder

Individuals with extreme behavioral problems such as fire setting, needing an all female/male staff to accommodate sexually inappropriate behaviors, assault of staff or fellow residents, etc... *may* not be appropriate for RRP. In addition, individuals who are in need of constant staff support for activities of daily living are generally inappropriate for RRP, as the ultimate goal of RRP is preparing individuals for independent life in the community. One on one staffing services are not currently available in any level of RRP services.

**APPLICATION FOR RESIDENTIAL REHABILITATION SERVICES**

*Return to: Baltimore County Health Department, Bureau of Mental Health  
6401 York Rd, 3<sup>rd</sup> Floor  
Baltimore, MD 21234  
410-887-2731, FAX 410-887-4859*

**(I) Applicant's Name:** \_\_\_\_\_  
(Last) (First) (M.I.)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Current Entitlements and Income (fill in amounts and / or insurance numbers)

SSI \_\_\_\_\_ SSDI \_\_\_\_\_ Other Income: \_\_\_\_\_

Medicaid (MA): \_\_\_\_\_ Medicare: \_\_\_\_\_ Other Insurance: \_\_\_\_\_

**(II) Referral Source:** Name \_\_\_\_\_ Agency \_\_\_\_\_ Telephone #: \_\_\_\_\_

Psychiatrist Name \_\_\_\_\_ Telephone: \_\_\_\_\_

Other Providers (Mobile Treatment, PRP, Case Management, Outpatient) - (Please Circle)

Name of Program \_\_\_\_\_ Contact Person \_\_\_\_\_ Telephone # \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Primary Contact (Applicant, therapist, family member, friend, other)- (Please Circle)

Name of Contact \_\_\_\_\_ Telephone No. \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

\_\_\_\_\_

**(III) Current Psychiatric Diagnosis:** \_\_\_\_\_ DSM-IV Code: \_\_\_\_\_

Axis I: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Axis II: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Axis III: \_\_\_\_\_

Axis IV: \_\_\_\_\_

Axis V: (GAF) \_\_\_\_\_

Number of psychiatric hospitalizations: \_\_\_\_\_

Date, Location & Length of Stay: \_\_\_\_\_

\_\_\_\_\_

**(IV) Name of Primary Medical Provider :(PMP)** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Significant Somatic Issues \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(V) All Current Medications: (Psychiatric and Somatic)**

CurrentType\_

Dosage- Frequency

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Current ability to take medicine:

Independently\_\_\_\_\_ With reminders\_\_\_\_\_ With daily supervision\_\_\_\_\_

Refuses medication\_\_\_\_\_ Meds not prescribed\_\_\_\_\_

Comments:\_\_\_\_\_

**(VI) Legal History/ forensic Involvement**

Has the applicant ever been arrested? Y\_\_\_\_N\_\_\_\_ On Probation or Parole? Y\_\_\_\_N\_\_\_\_

List any reported conviction\_\_\_\_\_

Parole or probation officer & Phone # : \_\_\_\_\_

Has applicant been found NCR ? Y\_\_\_\_N\_\_\_\_. Is on (or will be) Conditional Release ?

Y\_\_\_\_N\_\_\_\_

**(VII) Substance Use/ Abuse History**

Drug Used (including alcohol)      Period of Use      Frequency/Cost      How Used

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Drug Last used	Date	Amount	How Used
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Substance Abuse Treatment History (date and location)

A.A.\_\_\_\_\_ N.A.\_\_\_\_\_

Detox\_\_\_\_\_

Inpatient Services\_\_\_\_\_

Outpatient Services\_\_\_\_\_

**(VIII) Risk Assessment (Never, past week-month, past month-year, past 2+years)**

Suicidal attempts:\_\_\_\_\_

Suicidal Ideation:\_\_\_\_\_

Aggressive Behavior/ Violence:\_\_\_\_\_

Fire Setting:\_\_\_\_\_

**(IX) Activities of Daily Living**

\_\_\_\_\_Independent; \_\_\_\_\_Needs significant support; \_\_\_\_\_Needs moderate support

**(X) Previous RRP involvement? Yes\_\_\_ No\_\_\_ If yes, reason for discontinuation of RRP**

Consumer preference of provider\_\_\_\_\_

Cultural preference of consumer\_\_\_\_\_



**Baltimore County Bureau of Mental Health/ Core Services Agency  
Residential Rehabilitation Program (RRP) for Baltimore County**

Description of RRP Services

Residential Rehabilitation Programs are designed to assist those who have a serious mental illness and are in need of psychiatric rehabilitation in a supervised residential setting (assistance with Activities of Daily Living, community integration, medication monitoring, etc.). There are three types of support available in RRP:

- **General Support: Staff provide a minimum of one face to face contact per individual per week and are available on-call 24 hours per day, 7 days per week.**
- **Intensive Support: Staff provide services daily on site in the residence with a minimum of 40 hours per week support and up to 24 hours per day, 7 days per week.**
- **MISA Support: Intensive support with additional structure to address the needs of individuals who are also working on remaining substance free.**

The housing provided is furnished and supervised by staff, and is secondary to the rehabilitation services offered. All residents are expected to contribute to their cost of care. Money for food and personal needs is allotted. The most common household set- up includes three residents in a community residence (house, apartment, or town home) with each resident having their own bedroom and sharing common areas of the residence. There are a small number of shared bedroom units, and also a small number of units which are considered group homes with four or more other residents in the home. Residents have rights and responsibilities, and each program has their own unique variances to the rules that need to be followed. The residents are responsible for housekeeping. A productive daytime activity is required for residing in RRP. The goal of residential rehabilitation is to work towards independent living.

I have read the description of Residential Rehabilitation above and I understand that:

1. I will be living with others who receive RRP services.
2. I will be assisted by staff.
3. I will be required to follow rules and participate in a day activity or work.
4. I will be required to contribute to the cost of my care.

I wish to apply for the service.

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Client Signature

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Date

*Revised 04/19/2007*