



STATE OF MARYLAND  
**DHMH**

Office of Health Services  
Medical Care Programs

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Maryland Department of Health and Mental Hygiene  
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, Secretary

**MARYLAND MEDICAL ASSISTANCE PROGRAM**  
**Health Home Provider Transmittal No. 2**  
**June 25, 2014**

TO: Health Home Providers  
FROM: Susan J. Tucker, Executive Director  
Office of Health Services  
RE: Health Home Participant Discharge

**NOTE: Please ensure that the appropriate staff members in your organization are informed of the content of this memorandum.**

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This transmittal outlines discharge procedures for participants in Health Home Programs. Providers must document any participant request for discharge from Health Home services, either verbal or written, in a case note or similar document on the date the Health Home receives the request for discharge.

Providers shall discharge the participant from their Health Homes services within three (3) business days of receiving the request. This shall include reporting the discharge in the eMedicaid system.

Questions regarding the information in this transmittal may be directed to  
[DHMH.HealthHomes@Maryland.gov](mailto:DHMH.HealthHomes@Maryland.gov)