

## Health Care Agency, Behavioral Health Service, AQIS CYBH Support



August 2017

## **Child Family Team (CFT) Modifier**

A CFT Modifier was added to IRIS to track the clinician's attendance at a Child Family Team (CFT) meeting. The new modifier is titled MCFT and must be used to track all CFT meetings attended. It was originally designed for Katie A clients but has since been expanded to include two additional groups of clients that also require CFTs:

- 1.Katie A.: All clients that meet Katie A subclass criteria must have a CFT
- 2. Intensive Services: All Medi-Cal beneficiaries who meet Intensive Services criteria must have a CFT
- **3. CCR:** Child welfare/probation reform that requires all children/youth who enter into the systems have a CFT

CYBH EHR county clinics, please select the MCFT modifier in the charge details window.

CYBH contractors **with an EHR**, please add this to your EHR modifier codes.

CYBH non-EHR county clinics or CYBH contractor, who uses only the county ED PDF, please add this as free text in the drop down under CPT Modifier I Service Strategies.

## **Interpretive Services**

Interpretive services must be available, provided and documented in the Care Plans and also in the progress notes.

**Note:** Family members **should never** be expected to act as interpreters for the client.

**Care Plans:** When we ask the clients and/or caregivers who are not English speaking to sign the Care Plan, CYBH clinicians must demonstrate that they provided interpretation and that the client and legal guardian understood what they were signing. It must also be documented this on the Care Plan to whom interpretive services were provided to (i.e., client and/or caregiver) and who provided the interpretive services (i.e., clinician, support staff, language line). Please note that there is a location on the Care Plan to document this information.

If the care plan is translated into the client/caregiver's primary language, please indicate so with the checkbox and fields above the "Legal Guardian" signature line. Also, please include in the progress note (referenced on your CP) whether or not the care plan was explained to the caregiver in their primary language if they signed/co-signed the CP.

**Progress Notes:** On the form for your progress notes, this is easily accomplished by typing or using the drop down box for "Language Used" and checking the box for "Interpreter Utilized."

For clinics still not converted to the County EHR: On the Master Treatment Plan there are checkboxes under Treatment Recommendations to indicate if the services were provided in the primary language of both the client and parent/guardian. The Master Treatment Plan will no longer be in use once clinics go-live with the County EHR.

**Correspondence:** This must be provided in the client's or legal guardian's preferred language. Copies of such correspondence must always be filed in the client's chart record. A progress note describing the interpretation procedure should be completed.