April 2021 | VOL. 1 | NO. 24

QRTips

Behavioral Health Services
Authority and Quality Improvement Services
Quality Assurance & Quality Improvement Division
AOABH / CYPBH / Managed Care / Certification and Designation Support Teams

No Documentation Report

County Only

The No Documentation Report in IRIS should be run on a weekly basis by front office staff. Supervisors are expected to review the reports weekly and follow up with staff who have outstanding documentation. An additional report called the Scheduling Appointment Type Query should also be utilized moving forward toidentify any appointments on the IRIS schedule that are still in "confirmed" status. This report should aid providers and supervisors to follow up on scheduled appointments to ensure an action is completed for the scheduled service. There should be no appointments left on IRIS scheduling in "confirmed" status. AQIS will also be utilizing these reports to monitor any ongoing documentation issues and a compliance case will be opened up for providers who continue to show up on these reports with excessive outstanding documentation.

LPS Outpatient Designation Reminders

Only the current Outpatient Designation forms posted will be accepted. For the most update forms go to https://www.ochealthinfo.com/bhs/about/aqis/certification_and_designation

Do not return your valid and non-expired LPS Outpatient Designation card as part of your Re-Designation packet. Only expired LPS Outpatient Designation Cards must be returned as part of the Re-Designation packet. The expired card must be returned with the completed Return LPS Outpatient Designation Card form to the address listed on the bottom of the form.

TRAININGS & MEETINGS

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AOABH Online Trainings

New Provider Training (Documentation & Care Plan)

2019-2020 AOABH Annual Provider Training

AOABH MHP QI Coordinator's Meeting

WebEx Mtg. 4/1/21 10:30-11:30am

CYPBH Online Trainings

2019-2020 CYPBH Integrated Annual Provider Training

CYPBH QRT Meeting

TBD

**More trainings on CYPBH ST website*

HELPFUL LINKS

• • •

AQIS AOABH Support Team

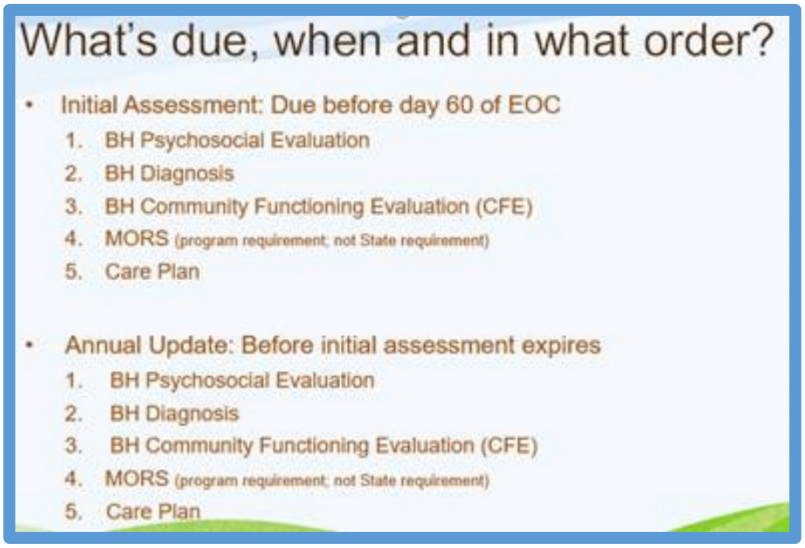
AQIS CYPBH Support Team

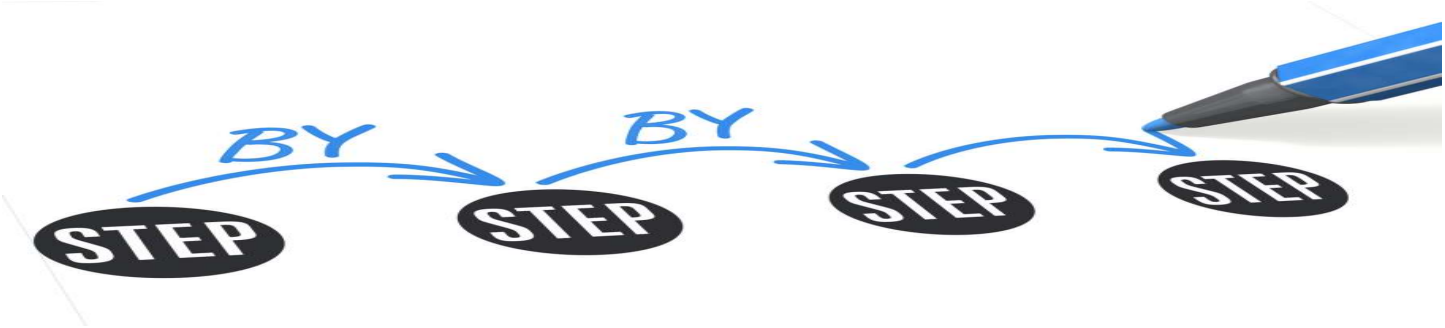
BHS Electronic Health Record

Medi-Cal Certification

Diagnosis Form Reminders

As a reminder, the Diagnosis Power Form is to be completed after the Psychosocial has been completed during the initial evaluation period and annual reassessment. In the first 60 days of a MHP County Treatment EOC, all of the initial assessment paperwork including a full Initial Assessment - (Psychosocial and Mental Status Exam (MSE), Community Functioning Evaluation (CFE), Diagnosis Form and valid Care Plan must be completed. Please note that with the upcoming revision of combining all forms into one assessment evaluation, all elements are still expected to be completed within the first 60 days of the MHP EOC.





Intensive Services (IS)

CYPBH Only

All mental health cases are assessed to determine if they meet Pathways to Well-Being (PWB) or Intensive Services (IS) Eligibility. If it is determined that the client qualifies for Intensive Services (IS), providers are required to adhere to the same guidelines established for the Pathways to Well-Being (PWB) cases.

For **IS** cases, the **Care Plan** must be reviewed, in lieu of the CFT Plan, no less frequently than every 90 days.

I. Guidelines for Intensive Services (IS):

- Providers are required to complete the **PWB/IS Eligibility Assessment Form**: 1) after Medical Necessity is established; 2) at any point when the client's status or circumstances change; and 3) at Discharge.
- The mental health provider must update the Care Plan to authorize ICC and IHBS services.
- The provider must complete and document in a progress note, the details of the CFT Meeting and/or the Care Plan review.

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II. CFT Documentation for Intensive Services (IS):

- The CFT Meeting must be documented in a progress note with the service clearly labeled as a "CFT Meeting".
  - The progress note should be billed as ICC.
  - List the names of the CFT members.
  - Indicate what language the CFT Meeting was conducted in, if other than English, and if an interpreter was used.
  - If the Care Plan was reviewed, the specific date of the Care Plan should be noted.
  - Document input from all CFT members and action items.
- Indicate the purpose of the CFT Meeting.

III. Medi-Cal Interruptions:

- For a youth who meets PWB/IS criteria *and* enrolled in an Intensive Mental Health Program (i.e. FSP, STRTP, etc.), the youth would likely continue to meet eligibility criteria for PWB/IS, even during Medi-Cal interruptions that result from brief incarcerations or hospitalizations.
- **DO NOT** re-do the **PWB/IS Eligibility Assessment Form** during the brief incarcerations or hospitalizations, and the timeline would **NOT** reset.
- **DO NOT** bill Medi-Cal for any services during the brief Medi-Cal interruption, but continue to document any services under the non-billable ICC code.

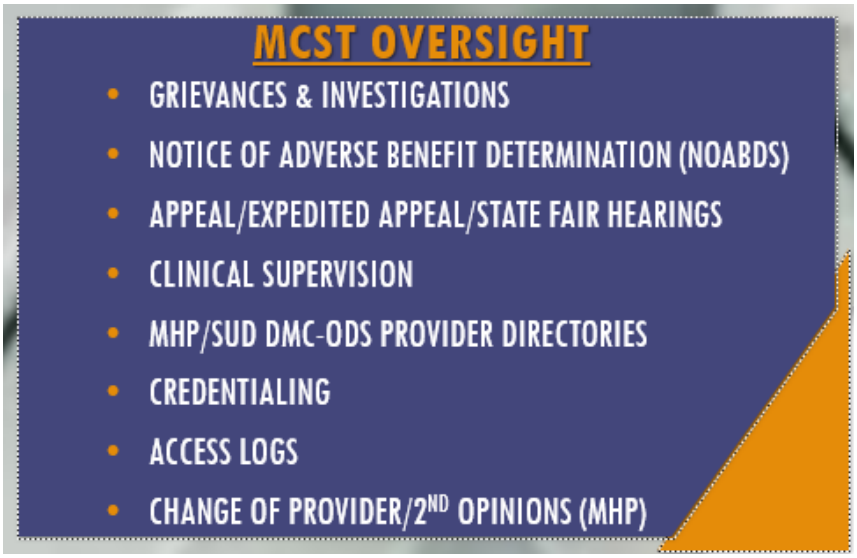
Care Plan and Interim Care Plan Memo

A memo was sent to Division Managers from AQIS on 3/17/21 providing guidance/clarification on questions AQIS has received from multiple providers on the validation and requirements of the CP and ICP. AQIS requested this memo be forwarded to all providers to ensure compliance and understanding of the expectations. The memo includes frequently asked questions and required elements to guide providers in the process of creating and validating Care Plans. If providers have additional questions regarding documentation of a Care Plan or Interim Care Plan, they are encouraged to email the AQIS Support Teams inbox at AQISSupportTeams@ochca.com

Managed Care Support Team (MCST)

General Reminders

- Formal Grievance and Appeal Forms must be available in all of the threshold languages in the lobby. It must be accessible for the client to pick-up without having to make a request.
- All registered/waivered mental health professionals, interns and volunteers are required to submit their Clinical Supervision Reporting Forms and BBS Responsibility Statement for Supervisors Form to MCST when the provider is a new hire or when there is a change in status (e.g. termination, change in Clinical Supervisor).
- Every access point should be entering an Access Log in IRIS for Medi-Cal beneficiaries upon the initial request to access Specialty Mental Health Services (SMHS) for serious and persistent mental illness (SPMI) or Substance Use Disorder (SUD) Drug Medi-Cal Organized Delivery System (DMC-ODS).
- All Medi-Cal Certified Sites are required to provide an updated provider list to maintain a current Provider Directory for the County to MCST every month by the 15th.



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E-MAIL ADDRESSES

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AQISManagedCare@ochca.com

REMINDERS

Service Chiefs and Supervisors:

All Quarterly logs are due on **April 10, 2021**.
Change of Provider/2nd Opinion logs:
AOABH - AQISManagedCare@ochca.com
CYPBH – AQISManagedCare@ochca.com

Please remember to submit monthly updates on program and provider changes for Provider Directory to AQISManagedCare@ochca.com
Please document the review of QRTips in staff meetings. Thank you!

***Disclaimer**: The AQIS Quality Assurance (QA) and Quality Improvement (QI) Division develops and distributes the monthly QRTips newsletter to County and County Contracted Behavioral Health providers as a tool to assist with compliance with various QA/QI regulatory requirements. IT IS NOT an all-encompassing document. Programs and providers are responsible for ensuring their understanding and compliance with all local, state, and federal regulatory requirements.*

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