

QR Tips

Behavioral Health Services
Authority and Quality Improvement Services
AOABH / CYPBH Support Teams

Medi-Cal Specialty Mental Health Services Reasons for Recoupment: Fiscal Year 18-19

The Department of Health Care Services (DHCS) has released “Reasons for Recoupment” for Medi-Cal Specialty Mental Health Services (SMHS) for this fiscal year. AQIS will begin auditing to the updated standards for the services provided on or after July 1, 2019. Here are some of the changes:

Medical Necessity/Assessment

1. The Mental Health Plan (MHP) did not submit documentation substantiating it complied with the following requirements:
 - a. Provider used DSM-V Criteria Sets as the clinical tool to make diagnostic determinations.
 - b. Provider determined the corresponding ICD-10 DX code used when submitting claim for billing purposes.
2. The chart did not show documentation substantiating the beneficiary’s need for services was established by an Assessment.
 - a. The required elements of an assessment are:
 - i. Presenting Problem
 - ii. Relevant conditions and psychosocial factors affecting the beneficiary’s physical health and mental health
 - iii. Mental Health History
 - iv. Medical History
 - v. Medications
 - vi. Substance Exposure/Use
 - vii. Client Strengths
 - viii. Risks
 - ix. Mental Status Exam (MSE)
 - x. Diagnosis
 - xi. Additional clarifying formulation information as needed per the MHP Contract.

TRAININGS & MEETINGS

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AOABH

New Provider Training (Documentation & Care Plan)

**We are transitioning to the online version of this training. We will notify as soon as it is available.*

Thank you for your patience.

AOABH Core Trainers Meetings

County Core Trainers Meeting

Thurs June 6th 10 – 11:30am Rm 433

Contract Core Trainers Meeting

Thurs June 13th 1:30 – 3pm Rm 433

CYPBH Trainings

**Please see CYPBH Support Team website for online trainings.*

HELPFUL LINKS

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[AOIS AOABH Support Team](#)

[AOIS CYPBH Support Team](#)

[BHS Electronic Health Record](#)

[Medi-Cal Certification](#)

Client Care Plan

- Services shall be provided based on medical necessity established by an Assessment and CP. Services were claimed when the planned service intervention (type of service) was not on the current CP.

Progress Notes

- The focus of the intervention did not address at least one below re: the beneficiary's included mental health condition:
 - A significant impairment in an important area of life functioning
 - A probability of significant deterioration in an important area of life functioning
 - A probability the child will not progress developmentally as individually appropriate; and
 - If full-scope Medi-Cal <21 years old; condition a result of MI that SMHS can improve
- No documentation substantiating the expectation that the intervention will do at least one of the following:
 - Significantly diminish the impairment
 - Prevent significant deterioration in an important area of life functioning
 - Allow the child to progress developmentally as individually appropriate; or
 - If full-scope Medi-Cal <21 years old; correct or ameliorate the condition
- Progress note does not describe how services provided reduced impairment, restored functioning, prevented significant deterioration in area of life functioning, or how services were necessary to improve a beneficiary's (if under the age of 21) mental health condition

REMINDERS

Service Chiefs and Supervisors, the Change of Provider/2nd Opinion logs and Med Monitoring packets are due on July 10th, 2019.

Service Chiefs and Supervisors, the updates for the Provider Directory are due on the 3rd Monday of each month. An email reminder will also be sent shortly.

Service Chiefs and Supervisors, please document the review of QRTips in staff meetings. Thank you!

Non-Licensed Mental Health Professionals and Assessment

Per the Information Notice (17-040) released by the DHCS on chart documentation requirement clarifications, the diagnosis, MSE, medication history, and assessment of relevant conditions and psychosocial factors affecting the beneficiary's physical and mental health must be completed by a provider, operating in his/her scope of practice under California State law, who is licensed, waived, and/or under the direction of a Licensed Mental Health Professional (LMHP).

However, the MHP may designate certain other qualified providers to contribute to the assessment, including gathering the beneficiary's mental health and medical history, substance exposure and use, and identifying strengths, risks, and barriers to achieving goals.

Grievances and Change of Provider/Second Opinions

AQIS is responsible for tracking and monitoring Grievances and Change of Provider/Second Opinions. It has come to our attention that grievances are not always being filed as necessary when there is a Change of Provider/Second Opinion request. Only a Change of Provider/Second Opinion is being completed.

Please remember, when completing a Change of Provider/Second Opinion, a grievance may also need to be filed. If the Change of Provider/Second Opinion that is being requested by the client is related to the **quality of care** that he or she is receiving, then a grievance should also be filed. If the grievance is resolved with the Change of Provider/Second Opinion process, please document in the 'Resolved by End of Next Business Day' section when completing and submitting the Grievance Tracking Form.

If you are unsure if a grievance needs to be filed, please consult with your supervisor or contact AQIS at (714) 834-5601.

ANNOUNCEMENTS

AOABH ONLY:

AQIS Refresher Workshop: Psychosocial Assessment is now available on the AQIS AOABH Support Team website under *Trainings*. The next workshop will be on Community Functioning Evaluation (CFE). Please stay tuned!

AQIS SUPPORT TEAMS

714.834.5601

AOABH

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