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MENTAL HEALTH SERVICES







CURES Database

Effective as of July 1, 2021, prescribers must check the CURES database upon initial prescription and every 6 months thereafter if a controlled substance remains a part of the client's treatment. Previously this was required every 4 months. (Refer to OPOH update Section L, pg L.7)

Medi-Cal Site Recertification Visits to Resume

QM will resume onsite Medi-Cal Site visits to complete site recertifications which were placed "on hold" during the previous FY20-21 due to COVID protocols, as well as scheduling site visits for programs that will be due for recertification for FY 21-22. Programs will be contacted by the assigned QI Specialist to schedule their site visit; all COVID protocol requirements in effect at the time of your scheduled site visit will be observed by program and QI staff.

Optum Website Updates MHP Provider Documents

OPOH Tab:

- Section D: pg D.42-56 edits to • PWB/CCR/TFC sections
- Section G: pg G.20 un-bolded "Reports of Sexual Misconduct by a Healthcare Provider"
- **Section L:** pg L.7 updated to reflect • change requiring prescribers to check CURES database every 6 months, effective 7/1/21
- Section M: pg M.7 update to indicate **Professional Licensing Waiver Request** form

Forms Tab:

Updated DHCS 1739 Mental Health • **Professional Licensing Waiver form**

Updating Diagnosis Forms

For any client that has not been open in the system of care for 12 months or more will require a new diagnosis form to be completed upon admission to a new program.

OPOH Updates

- Section D: pgs D.42-56 edits to the PWB/CCR/TFC sections added language regarding AB2083, CFT Facilitation • program, RHIS training for new hires, and various other minor edits.
- Section G: pg G.20 un-bolded "Reports of Sexual Misconduct by a Healthcare Provider"
- Section L: pg L.7 updated to reflect change effective July 1, 2021 prescribers must check the CURES database • every 6 months if a controlled substance remains part of the client's treatment. Previously this was every 4 months.
- Section M: pg M.7 updated to indicate that the DHCS 1739 Mental Health Professional Licensing Waiver Request ٠ form can be found on the Forms tab of the Optum website.

Knowledge Sharing

Aid Paid Pending (APP)

When a client receives a notice of adverse benefit determination (NOABD) which terminates, reduces or suspends services they have the right to appeal the decision if they are not in agreement. In addition, clients also have the right to request APP pending the appeal determination. APP indicates that the client's benefits shall continue pending resolution of the appeal. Clients qualify for APP when all of the following criteria are met:

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- 1. The client files the appeal request in a timely manner;
- 2. The appeal involves the termination, suspension, or reduction of previously authorized services;
- 3. The services were ordered by an authorized provider;
- 4. The period covered by the original authorization has not expired; and
- 5. The client requests APP within 10 calendar days of the NOABD, or before the intended effective date of the proposed adverse benefit determination, whichever is later.

If an appeal is submitted to one of the advocacy agencies with a request for APP, they will be responsible for determining the client's eligibility and notifying the provider. Once the provider is informed of the client's APP eligibility, services must continue or resume pending the appeal determination. While it is required that APP be requested by the client in a timely manner, there are times when a client may be eligible for APP even though it has been more than 10 calendar days from the date they received the NOABD. For example, if the provider did not issue the NOABD in a timely manner the client would still qualify for the APP benefit.

Reminder: Use of Interim Folders

Interim Folders are only to be created and utilized for services or documented activities from the client assignment date until the Client Plan Folder is opened and the plan developed. The Interim Folder is <u>not</u> to be used at any other time. <u>An</u> <u>Interim Folder should never be used if a Client Plan folder expires.</u> Its purpose is to only provide a pre-Client Plan folder for holding notes within the first 30 days of admission to the program.

Resources for Assistance with Billing Corrections

When completing Billing Corrections that are required as a result of Medical Record Reviews, QM provides a variety of Billing Correction Tutorials and Guides to assist programs to complete all disallowances/corrections accurately. Please be sure to review the following resources listed below when completing billing corrections. As always, programs may reach out to their assigned QI Specialist with any questions and additional assistance.

- For assistance with Billing Corrections please use the following link to access the Billing Correction Tutorials which will walk through the process step-by-step. <u>https://sdoh-tres-</u> stage.uhc.com/tres3/public/decisiontree/progressnotes.html
- Progress Note Correction Resources on the Optum Website > BHS Provider Resources > MHP Documents > Training Tab:
 - Individual Progress Note Corrections for Administrative Staff (<u>pdf manual</u>)
 - Individual Progress Note Corrections for Clinical Staff (pdf link)
 - o Group Progress Note Corrections for Clinical Staff (pdf manual)
 - o Group Progress Note Corrections for Administrative Staff (pdf manual)
 - Progress Note Corrections for Admin and Clinical Staff (presentation)

QI Matters Frequently Asked Questions

Q. Is there a "rule" regarding the amount of time that can be billed for documentation when completing progress notes?

A. There is no set amount of time that needs to be entered and billed for on your progress notes. The expectation is that the service time, travel time and documentation time for any progress note is claimed accurately to the minute and there is no trend or pattern of services being rounded or "same time" claimed across progress notes. The time billed for service time, travel time or documentation time should be substantiated in the documentation.

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Q. When claiming travel time, am I able to claim all time, from the time leaving the office until meeting client and time leaving client to time returning to desk – including time spent walking to/from parking to car or client? Can a clinician claim travel time when using public transportation such as the bus or trolley?

A. Travel time should be calculated based on the time you spend traveling in your vehicle as billing for travel time is solely dedicated to vehicle commute time which is needed to provide a specialty mental health intervention. Time spent walking to/from office or parking cannot be claimed as travel time. Thus, modes of transportation like public transit and walking are not included in billable travel time (Reference: *Travel Time Guidelines Final 2.01.18* found on the Optum Website, under <u>References Tab</u>)

Management Information Systems (MIS)

MIS Questions?

MIS manages all things related to the system, including authorizations for all trainings/skills assessments/reactivations, account management. Our email is: <u>MISHelpDesk.HHSA@sdcounty.ca.gov</u>

Cerner Reminder

For questions regarding Cerner products or functions, please call or email the Optum Support Desk at 800-834-3792 or email <u>SDHelpdesk@optum.com</u>. Please do not call Cerner directly!

Training and Events

A/OA Documentation Training: Monday, June 21, 2021 from 12:30p – 3:30p via WebEx. Registration Required.

Support Partners Documentation Training: Wednesday, **June 23, 2021** from **12:30p** – **3:30p** via WebEx. Registration required.

Quality Improvement Partners (QIP) Meeting: Tuesday, June 22, 2021 from 2:00p – 4:00p via Webex.

Important information regarding training registrations:

- Please be aware when registering for required or popular trainings, either with the county or a contracted trainer, there may be a waiting list.
- When registered for a training, please be sure to cancel within 24 hours of the training if you are unable to attend. This allows those on a wait list the opportunity to attend. Program Managers will be informed of no shows to the trainings.
- If registered for a training series, please be aware that attendance for all dates in the series are required to obtain certification, CEU's or credit for the training.
- When registering for a training please include the name of your program manager.
- We appreciate your assistance with following these guidelines as we work together to ensure the training of our entire system of care.
- If you have any questions, or if you are having difficulty with registration, please reply to this email or contact <u>BHS-QITraining.HHSA@sdcounty.ca.gov</u>. We hope to see you there.

CCBH Training :

- Optum has transitioned to a **fully virtual training format**, thus eliminating travel and allowing for expanded registration.
- Continue to enroll through <u>www.regpacks.com/Optum</u>.

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- Most courses include a video tutorial which orients attendees to training and illustrates successful completion of the practice exercises. Video tutorials are available under the Training tab at: https://www.optumsandiego.com/content/SanDiego/sandiego/en/county-staff---providers/orgpublicdocs.html
- The courses which do not yet include a video tutorial offer a 1-hour live Webex instead.
- Attendees contact trainers for support via phone or email as they complete the practice exercises. A screensharing option is also available.
- Once attendee practice exercises are complete and accurate, they are granted access to begin documenting in the live environment.
- Please email <u>sdu_sdtraining@optum.com</u> if you have any questions about the process.

Helpful Tips to Consider <u>Prior</u> to CCBH Training:

- Set up dual monitors to make it simpler to toggle between handouts, a video tutorial, and the CCBH application.
- Review/print the training resources prior to training. The resources are located on the Optum website; click <u>HERE</u> and then click on the "Training" tab. Please note: This is only for the purpose of reviewing/printing the training materials; please do not attempt to complete the training early.
- Ensure the computer you will be using for training has the Citrix Receiver installed. If your computer does not have the Citrix Receiver installed, contact your program IT department for assistance.
 - Link to Citrix Receiver for Windows click <u>HERE</u>.
 - Link to Citrix Receiver for Mac click <u>HERE</u>.

Resources and Links

BHS COVID-19 Resources and Links

Remember, for the most current and updated information regarding COVID-19 as well as QM updates and memos, including provider FAQ's, please access the <u>COVID-19 tab</u> on the Optum Website.

Your QI Specialist = a Valuable Resource!

Programs are reminded that your assigned QI Specialist is not only available during your MRR process, but throughout the fiscal year to assist with program specific questions, concerns, documentation feedback and/or education and staff training needs. Programs are encouraged to reach out to your assigned QI Specialist directly, we are here to support you and your staff! If you are unsure who your assigned QI Specialist is, please reach out to QI Matters via email: <u>QIMatters.hhsa@sdcounty.ca.gov</u>

Is this information filtering down to your clinical and administrative staff? Please share UTTM with your staff and keep them *Up to the Minute*! Send all personnel contact updates to **QIMatters.hhsa@sdcounty.ca.gov**