





To facilitate integration and communication, QI's "Up to the Minute" is proud to include a section dedicated to AOD programs in the County's BHS System of Care (SOC). Any AOD related information and announcements will be made in this section. Unless explicitly stated in other portions of the newsletter, only the information in this section will apply to AOD programs.

AODPOH UPDATES COMING SOON

- Recently, a SAPT BG review was conducted and provided opportunities for continuous quality improvement efforts in the AOD programs within our System of Care.
- To support these efforts, some updates have been made to the AOD Provider Operations Handbook (AODPOH).
- Communications regarding these changes will be provided to programs within the next few weeks.
- Stay tuned!

ANNOUNCEMENTS

AOD and Mental Health Programs - Help Spread the Word!

- Did you know that pregnant women seeking alcohol or drug services have priority admission to AOD programs?
- Please help us spread the word to the clients and their supports who might benefit from this information!
- o Those interested may contact the ACL line at 888-724-7240 for referral assistance.

Update to Demographic Form

- o Please note that the Demographic form question, "Is client AB2726?" is no longer needed.
- o The question has been removed from the form.

Quarterly Status Report – Notice of Action form

- The "Client ID" field was revised. It is now called "Client Initials" and requires use of initials rather than an identification number.
- This change supports compliance with protection of PHI.

Discontinue Use of Service Code 23: Med Check MD Brief

- As of January 1, 2015, CMS no longer accepts the procedure code attached to this service code.
- A memo was sent out to the System of Care about this on April 24, 2015.
- o As of the date of that memo, service code 23 should no longer be used.
- o Consult the service code definitions to determine the most appropriate code to use for MD services.

Appointment Reminder Calls

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 Program Managers - If you are interested in your program using the automated appointment reminder system for your client appointments, email a request to <u>QIMatters.hhsa@sdcounty.ca.gov</u>









Reminder: Recorded Webinar Sessions for Documentation Training are Available!

- Do you have new staff that need Documentation Training? Or staff who would benefit from a review of documentation standards?
- o There are recorded webinar sessions available for "on demand" viewing.
- Webinar content is the same as the content covered in "live" classroom sessions
- <u>Program managers</u>: email QI Matters to request a personalized link. Indicate if you are requesting links for the Adult or Children's version of the webinars.

DOCUMENTATION STANDARDS

Cultural Assessment

- For many years, BHS has emphasized the importance of cultural competence in providing behavioral health services.
- In spite of this focus, capturing cultural assessment information on the BHA remains an area for continued quality improvement.
- Everyone has a culture, and it is important to consider the client's presenting problems from a contextual perspective – including, but not limited to, how race, ethnicity, religion, geographic origin, and other factors intersect with the clients' understanding of their presenting problems, potential solutions to those problems, and interaction with/perception of behavioral health providers/services.
- With the publication of DSM-5, a new "cultural formulation interview guide" became available as a tool
 to guide clinicians when assessing cultural factors and their influence on a client's perspectives of their
 symptoms and treatment options.
- You may want to review this as a potential resource for you and your staff to increase the quality of cultural assessment and documentation.

BILLING

KTA Service Codes

- There are two service codes to use for billable "Pathways to Well-Being" (PWB) services. They are KTA ICC 82 and KTA IHBS 83.
- They are only to be used for children who meet specific criteria for enhanced PWB services.
- If you make an error and accidently use these codes for a child who does not meet the specific criteria (or who did meet criteria at one time, but then had a status change) you must make the appropriate progress note corrections in order to reflect the accurate service codes.
- This must be done in order to preserve data integrity.
- Please refer to the Progress Note Corrections packet for instructions which will guide you with the process depending on the status of the service (not claimed, claimed, paid, etc.)

Client Categories Maintenance and PWB Clients

- When a child has been assessed for PWB criteria and found to meet either Class or Subclass, the program must "flip the switch" in Anasazi.
- This is done via "Client Categories Maintenance" (CCM).
- o When checking the CCM, do not "overwrite" a previous entry of data for Class or Subclass.







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- The appropriate procedure is to end the current classification by adding an end date in the "End Date" column.
- Then tab down to the next blank line and enter the new classification there.
- o If you "overwrite" what was entered by another program, that data is lost forever.

FROM THE PIT TEAM

Spring 2015 State Surveys

- Notice for Mental Health providers: The next YSS (children's programs) and MHSIP (adult programs) State Survey period will take place Monday, May 11 through Friday, May 15, 2015.
- The format of data collection will be identical to the process for the Fall 2014 survey administration.
- The programs will be contact by the Research Centers (CASRC and HSRC) no later than April 17, 2015, regarding the pick-up of survey materials.

New Reports Available on TRL

- Visit the Technical Resource Library at: <u>www.sandiegocounty.gov/hhsa/programs/bhs/technical_r</u> <u>esource_library.html</u> to access recently published FY 2013-14 systemwide reports:
- Reports include the BHS Databook, IMR Outcomes Systemwide Report, Behavioral Health Services Factsheets, PEI Systemwide Reports, April-May 2014 YSS Children's State Survey Results, April-May 2014 MHSIP Adult State Survey Results.
- To access program-specific FY 2013-14 results, please contact your COR.

Is this information filtering down to your clinical and administrative staff?

Keep them Up To the Minute!

And remember to send all personnel contact updates to **QIMatters.hhsa@sdcounty.ca.gov**

MIS Corner

My ARF: Is it New or Modify?

A lot of people find themselves wondering how to properly classify an ARF they are creating. This is in Section 1, so you probably want to start off right. Here are some questions to consider:

Is this worker new to my Unit? Is this worker new to my company (or Legal Entity)?

If both the answers here are <u>Yes</u>, then this ARF would be considered "New". If either answer is <u>No</u>, then this would be a "Modify ARF". (For these, add the existing Staff ID number).

Is this ARF changing the last name of the user?

If <u>Yes</u>, then this will be "New" because this user will get a new ID with that new last name. (For name changes, we look at all systems, such as NPI and the State boards to make sure the name is consistent. Your ARF must be rejected if the names don't match).

I'm only adding Sub-Units, that's a Modify ARF, right?

Maybe - Again, you'd want to think about the first question – are they new to your company/LE? For example, Wendy's can't add some sub-units to a Taco Bell profile. This would be "New" if this profile is not already within your company (or Legal Entity).

We hope this has been helpful! And remember, the MHMIS Help Desk is here and ready to assist you at (619) 584-5090.



