



QM ... UP TO THE MINUTE January 2020



MENTAL HEALTH SERVICES



Knowledge Sharing

CYF Utilization Management Outpatient Cycle Expansion

The CYF Outpatient Utilization Management (UM) Cycle is expanding to allow for a second assessment session. Traditionally one assessment session was followed by a treatment planning session to inform the subsequent treatment phase. With the shift to the new outcome tools, the system has identified a need to add a second assessment option to incorporate results from the Child and Adolescent Needs and Strengths

(CANS) and Pediatric Symptom Checklist (PSC-35) into the Client Plan and BHA.

It is important that the goals are informed and developed based on the symptoms, needs and strengths identified in the CANS and PSC-35 results.

Effective January 1, 2020, Treatment session cycle will move from:

- 13 to 14 Individual Session Cycle
- 18 to 19 Family or Group Session Cycle
- Program may utilize one or multiple assessment sessions within the 14 or 19 session cycle, as indicated.

Please discard the UM Request Form dated 9-1-19 and replace with the 1-1-20 version. The two impacted and attached updated forms can be found at the Optum website: https://www.optumsandiego.com/

AOA and CYF No Show and Follow Up Standard

County of San Diego MHP has adopted a SOC average "No Show" rate for both licensed/registered/waivered clinicians and psychiatrists. The SOC average "No Show" rate is 15% for licensed/registered/waivered clinicians and 20% for psychiatrists. As data is collected, the County will

Optum Website Updates
MHP Provider Documents

Communications Tab

CYF Memo – UM
 Outpatient Cycle Expansion

UCRM Tab

- CYF UM Request Form
- CYF UM Request Explanation

OPOH Tab

- Section D: No Show standard
- Section D: CYF UM
 Outpatient Cycle Expansion
- **Section F:** NOABD Termination
- **Section S:** Serious Incident Reporting

continue to evaluate the SOC average "No Show" rates and work with providers to adjust standards as necessary. All providers shall have policies and procedures in place regarding the monitoring of "No Show" appointments for clients (and/or caregivers, if applicable). These policies and procedures shall cover both new referrals and existing clients.

No Show definition: when a new or current client (and/or caregiver, if applicable) is scheduled for an appointment and does not show up or call to reschedule.

Medication Monitoring Submission Requirements

In order to reduce the extra items reviewed during the Medical Record Review, we will be changing the Medication Monitoring Submission requirements.



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Beginning with the **January 2020** submission, programs are now required to submit the following items:

- Medication Monitoring Screening Tool
- QI Medication Monitoring Summary
- Medication Monitoring Feedback Loop Form (McFloop), if applicable

The quarterly submission timeline will remain the same. All forms can be faxed to 619-236-1953 or sent by secure email to QIMatters.hhsa@sdcounty.ca.gov

CSI Diagnosis Error Corrections

Effectively immediately, when opening a client, providers are required to date the Diagnosis Form as the date of intake.

CSI (Client Services Information) requires that both the form date (date of diagnosis form) and the start date of the Mental Health diagnosis to cover the first date of service.

This change may impact when a provider encounters a diagnosis billing error, such as an AQ Suspense issue.

- To correct both CSI and billing errors, the form must be dated for the date of service (DOS).
- If when dating the Diagnosis form you receive a stop message notifying that it is not the most recent form, a second diagnosis form dated with the current date must also be entered. The same edits must be made to both forms.
- Starting January 2020, the Monthly Reports Package will include a report capturing all CSI errors for your program.
- A CSI Correction Guide has been sent out which will assist in completing all necessary updates and corrections, along with **BHS QM Memo issued 12/26/19**.

For guidance with the correction process, direct questions to the Optum Help Desk at 1-800-834-3792. Any other questions and/or comments may be directed to QIMatters.HHSA@sdcounty.gov

NOABD Clarifications

Q: What if a termination notice needs to be issued to a homeless client and the program is unable to reach them?

A: Review client's chart for an emergency contact and if the program has an ROI on file for the individual, send the NOABD to them. If not, document the inability to reach client on the NOABD log and place a copy of the NOABD in the log as well.

Q: When is the NOABD Termination Notice issued?

A: A Termination Notice is <u>REQUIRED</u> for all clients that have an unsuccessful discharge. Some examples include AWOL, client doesn't return for services, client chooses to terminate AMA, etc. If the client has a planned, successful termination and the client is in agreement with the discharge, then no NOABD is required.

Q: What if a client voluntarily chooses to end treatment?

A: In the event that a client chooses to voluntarily end treatment or "self-discharges" in writing, an NOABD would still be required.

OPOH Updates

Section D

- updated to address CYF treatment session cycle expansions.
- updated to include the "No Show" standard for A/OA and CYF Systems of Care.



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Section F: updated to include NOABD Termination must be sent to the client when there is not a successful discharge, AWOL, or leave AMA. It also includes update addressing sending NOABD to homeless client.

Section G: updated to indicate no SIR is needed in the event of a beneficiary's natural death.

Management Information Systems (MIS)

Welcome!

Christopher Guevara, who was with the Performance Improvement Team (PIT) has now moved over to MIS as the Program Administrative Analyst. We welcome him and know the expertise he is bringing from PIT will greatly enhance our team! Christopher will head up the PAC Committee and be a support for both Mental Health and SUD.

Cerner Reminder

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

Training and Events

Documentation Training

• **CYF Documentation Training:** Wednesday **February 19, 2020** from 9:00AM to 12:00PM, County Operations Center, 5500 Overland Ave, Room 120, San Diego 92123

QI Practicum

- Audit Leads' Practicum: Thursday February 6, 2020 from 9:00AM to 12:00PM, County Operations Center, 5500 Overland Ave, Room 120, San Diego CA 92123
- This practicum is intended for program level QI staff and PM's who have been designated as Leads during the audit or Medical Record Review (MRR) process.

Other 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.
- Registrations for trainings will be done via Eventbrite, cancellations will also be done via your Eventbrite account.
- 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 the waitlist 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.

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