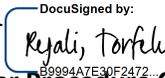


- MEMORANDUM -

DATE: December 1, 2021
 TO: Alameda County Behavioral Health Care Services (ACBH) Staff and Providers
 FROM: Torfeh Rejali, ACBH Quality Assurance Administrator 
 SUBJECT: **Immediate Action Needed- New Healthcare Provider Procedure Code**

This memo will introduce and provide guidance on a new Procedure Code.

New Healthcare Provider Procedure Code

According to the policy titled [Adult and Older Adult System of Care Coordination Medi-Cal Specialty Mental Health Services](#), ACBH SMHS providers are to support adult beneficiaries in receiving a preventative physical health appointment at least annually. Procedure code **580 Case Management/Brokerage Medical Services** has been added to the appropriate Reporting Units for this activity and went into effect on November 1, 2021.

Procedure Code **580 Case Management/Brokerage- Medical Services** is a sub-category of 571 Case Management and was designed to be used for Case Management activities related to **medical services ONLY**. Since this code rolls up to 571 Case Management, the interventions documented and billed under this code should meet the general criteria for Case Management Services. The table below describes the two codes in more detail.

Procedure Code	Description	Unique Attributes	Examples
Case Management 571	<ul style="list-style-type: none"> • Help clients to access medical, educational, social, vocational, rehabilitative, or other community services that are identified in the Client Plan and Assessment. • Services activities may include, but are not limited to: <ul style="list-style-type: none"> • Communication with client & other individuals. • Coordination of care • Referrals • Monitoring service delivery to ensure client’s access to services. • Monitoring client’s progress toward making use of services. 	<ul style="list-style-type: none"> • Linkage to wrap-around services • Ensuring access to services • Assisting in removing barriers to access and full client participation 	<ul style="list-style-type: none"> • Referring the client to the Housing Authority to learn about Section-8 Housing. • Referring the client to a Vocational program to develop job skills. • Checking with the client to see if they were able to access the services they were referred to and if not, to problem solve regarding next steps.
Case Management/Brokerage-Medical Services 580	<ul style="list-style-type: none"> • Subcategory of Case Management 571 • Unique to Alameda County • Only used for case management services related to medical services 	Same as above but only for medical services.	<ul style="list-style-type: none"> • Referring the client to a medical provider. • Following up with the client regarding their medical appointment.





		<ul style="list-style-type: none">• Working with the client and provider to remove barriers to accessing medical care (missed appointment, childcare, transportation issues, etc.)
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Incorporating Case Management/Brokerage- Medical Services Into the Client Record

Effective immediately, ACBH SMHS providers are asked to begin incorporating these Case Management/Brokerage- Medical Services into their work with clients in the following ways:

Assessment and Reassessment:

- **New clients:**
 - Evaluate and provide medical care coordination services at initial assessment and annually thereafter.
- **Current clients:**
 - Beginning with any Client Plan update following November 1, 2021, assess the client’s medical needs, refer to medical providers, follow up and support the client in fully engaging in their medical care. Re-evaluate at least every 12 months, when updating the assessment.

Client Plans:

- If not connected to medical care or if there are barriers to fully engage in care, encourage the client to incorporate this as a goal in their Client Plan. Document your conversation in a Progress Note.
- **Note:** In order to bill for these services, coordination with medical care needs to be noted in the Client Plan, either as a goal/objective or as a specific detailed intervention for the Case Management modality.

Please join us for a Training/Q&A related to these changes.
Thank you for your attention and partnership.

Training/Q&A for QA Coordinators:

*580 Case Management/Brokerage- Medical Services
Friday, December 10th, 2021, from 12:00 p.m. – 1:00 p.m.*

Please Register by using this link:

<https://attendee.gotowebinar.com/register/4956152435721011471>

