alameda county behavioral health

SERVICES FOR MENTAL HEALTH & SUBSTANCE USE DISORDERS

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QA UPDATES FOR SUD ODS PROVIDERS
March 01, 2019

Any changes herein supersede prior information that was addressed in previous QA updates, trainings or technical assistance.

It is crucial to review this document in full for all updates/revisions,
which will also be posted here: http://www.acbhcs.org/providers/sud/Transition.htm,
and http://www.acbhcs.org/providers/QA/memos.htm

Immediate Attention: Change in CQRT Meetings Beginning in March!

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RES/OS/IOS CQRT

- SUD CORT reviews will occur virtually for March – May, 2019, rather than in-person at ACBH-QA 2000 Embarcadero, Oakland.
  - Internal Agency CQRT is required monthly and must be submitted via fax or secure email by the 25th of each month.
    - RES Providers shall submit four (4) full Clinical CQRT reviews along with the CQRT Meeting Minutes form.
    - OS/IOS shall submit four (4) full Clinical CQRT reviews, Brief CQRT/Authorization reviews (for all remaining charts), the Authorization Request form for all charts, and the CQRT Meeting Minutes form.
    - Forms :
      - *CQRT Full Clinical Review Sheet (RES and OS/IOS), aka SUD CQRT Combined BHCS Reg Compliance Tool and Comment Sheet*
      - *OS/IOS Brief MN and CQRT Review Sheet*
      - *CQRT Minutes Form*
      - *CQRT Attendance Sheet*

- *OS/IOS Authorization Request Form*
  - In-person County CQRT meetings are currently scheduled to resume in June, following the results of the upcoming audit.

RES/OS/IOS/WM/OTP SUD ODS Audit

- Beginning in April, ACBH—QA will be auditing all Providers for services (review time period expected to be January 1 – March 31, 2019).
- Providers will be notified of which charts are being audited and it is expected at least five charts from each agency (rather than each program) will be audited. For agencies with more than one program, a minimum of one chart will be selected from each program and/or level of care (which may result in more than five charts).

SUD ODS OTP and WM Training

- May 30, 2019: BHCS QA: Clinical Doc Training For SUD OTP & WM Programs.
- Each agency is required to send at least one (1) Quality Assurance staff.
  - Additional staff, including Counseling Staff may attend for training purposes.
- To register: please go to http://alameda.netkeepers.com

Case Management

- Care Coordination with external agencies, including report writing, may be claimed as Case Management.
  - The service provided must address one of the Client Goals and would further be elaborated in a Provider's Action Step.
    - Example:
      - Goal—Client desires to meet all Drug Court requirements in order to avoid incarceration so that they may continue to parent their child in the community.
      - Action steps (include): SUD Provider submitting quarterly reports to Drug Court to update the judge on the client's participation in SUD treatment.

RES Progress Notes

- Residential providers may now have a data entry clerk transcribe the data from a sign-in sheet into the daily Progress Note (indicating services provided).
  - This data includes ONLY: Counseling Session Type, Session Topic, Start and End Times, Staff and Location.
    - No other daily PN fields may be completed by the data entry clerk.
    - This data must be transcribed from a group (and/or individual) sign-in sheet in which all the data is present.
      - If the data is not present on the sign-in sheet they may not collect the data from elsewhere for entry purposes.
  - The clerk indicates data entry was performed by initialing the sign-in sheet next to the client's information transcribed.
  - The data entry clerk then assigns the PN to the SUD Counselor responsible for authoring the PN.

- Before transcribing the PN, the data entry clerk should ensure the responsible SUD Counselor will be available to author the PN as once it is assigned, it cannot later be reassigned to another Counselor.
    - Once received, the SUD Counselor verifies the data transcribed was entered correctly by reviewing the sign-in sheets and also initialing it.
    - Any additional PN fields are completed by the Counselor whom then electronically signs the notes.
    - See Group Sign-In Sheet (with relevant fields for initials) in Clinicians Gateway.
- Authors of daily PN's must be by a SUD Counselor (or LPHA) who served the client that day.
    - If only one Counselor served the client that day and is un-expectantly out for 7 calendar days, the agency should have another Counselor-who also worked that day-write the daily PN within the required timeframe.
        - This may only in the case of an unexpected week-long absence by the only SUD Counselor who served the client that day, and may result in a DMC PSPP audit disallowance.

Claiming for ALOC

- When entering the ALOC data into the CG template—do not enter the ALOC claiming code as that is already claimed through the Progress note. Entering it on both documents results in duplicate claiming. Only enter the ALOC tracking code on the ALOC template.
    - ACBH is in the process of reprogramming the CG ALOC's template to only accept the proper tracking code.
    - ACBH will reverse any prior duplicate claims made in error and will contact the Provider if any further action is required on their part.

Minimum of Claimable Residential Hours per Week

- If a client does not receive any claimable services on one of the seven calendar days in a given week, it is still expected that they will receive the minimum of 20 hours of claimable services over the course of the week (in order to claim for the remaining six days).
    - We are seeking guidance from DHCS to see if the minimum hours could be prorated per the number of days claimed. If we do receive permission for this we will let providers know ASAP.

Connectivity Issues with Clinician's Gateway EHR

- If an agency is having connectivity issues, IT recommends checking their broadband capability. It may be necessary to increase the agencies broadband capacity.
- Additionally, if there are connectivity issues it is a good practice to regularly save data after entered (rather than waiting until completion of the document).
    - In CG one may periodically use the "save and continue" command.
    - If data is lost and must be re-entered, the data reentry time is not a claimable service (RES may enter the additional documentation time in CG as they only claim the bundled day rate, and not documentation time by the minute).

Patient Education Groups

- If a Provider has a group that they are unsure if it meets the ODS standards for Group Counseling, or Patient Education, they may consult with their QA TA Contact: Sharon.Loveseth@ACgov.org.

Correcting Claims Made in Error in CG

- Claims entered into CG in error may be corrected.
- The process includes completing the form entitled: *Claims Correction Form (CCF)* found here: http://www.acbhcs.org/providers/Forms/Forms.htm#CCF
- The PN is then amended to include the information: that the claim was entered in error and has been reversed via the CCF.
- If a corrected service then needs to be entered—a new PN may created for that purpose.

Resources:

- BHCS SUD ODS Transitions Website: http://www.acbhcs.org/providers/sud/Transition.htm
- BHCS Quality Assurance SUD Treatment and Recovery Services: http://www.acbhcs.org/providers/QA/aod.htm
- BHCS Welcome to SUD Tx and Prevention Provider Site: http://www.acbhcs.org/providers/Sud/index.htm
- Quality Assurance Technical Assistance:
    - CQRT and Auditing Topics: Brion.Phipps@ACgov.org
    - Other QA Topics: Sharon.Loveseth@ACgov.org
    - QA Management: Tony.Sanders@ACgov.org