



ALCOHOL, DRUG & MENTAL HEALTH SERVICES
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Memorandum

Date: August 12, 2013
To: Master Contract Providers
From: Kyree Klimist, MFT, QA Associate Administrator
Re: **Plan Development**

There have been many questions about Plan Development recently. This memo serves to clarify what service activities qualify as claimable Plan Development.

Definition:

“Plan Development” means a service activity which consists of the development of client plans, approval of client plans, and/or monitoring of a beneficiary’s progress.ⁱ

Service Activities:

Plan Development activities can be provided face-to-face or by telephone with the client or significant support persons and may be provided in the office or in the community. Plan Development may also include contact with other professionals or can be conducted without the client. It includes the following:

- Development of the Client Plan,
- Approval of the Client Plan,
- Updating of the Client Plan,
- Monitoring the client’s progress in relation to the Client Plan,
- Discharge Summary. (This is not a Discharge Note)ⁱⁱ

Plan Development is expected to be provided during the development/approval of the initial Client Plan and subsequent Client Plans. However, Plan Development can be provided at other times, as clinically indicated.

Examples of Medi-Cal Plan Development claiming include:

- Reviewing previous documents in order to develop the Client Plan of Care;
- Writing the Client Plan;
- Discussing the Client Plan with a parent/guardian;
- Treatment Plan meetings to discuss client progress on the Client Plan (see Multiple Staff Billing below);
- Consultation with another professional re: Client’s treatment resulting in a change to the Treatment Plan. Otherwise it is a Collateral if outside of the agency or inside the agency it is non-billable consultation (see Non-Billable Service Activities below);
- Meeting with the client to discuss the Client Plan and obtain client/caregiver signature as evidence of participation in the Client Plan.



Non-Billable Service Activities:

- Consultation involves getting advice from another professional regarding the treatment needs of the client and is a non-billable activity.
- Supervision is an ongoing process during which the focus of the discussion is on enhancing the supervisee's skills and managing workload, caseload, schedule, etc. If a discussion between a supervisor and supervisee is primarily about how s/he might be more effective with a client (adjust, change, improve his/her therapeutic techniques), this is considered supervision and is a non-billable activity.

Multiple Staff Billing:

Multiple Plan Development service activities for one event are at risk of disallowance, if inappropriately documented. For example, if several staff members are present at a team meeting in which a Client Plan is discussed or approved, the only staff that can bill are those who are actively involved in that client's treatment.

Documentation:

Progress Notes must specify which goals and/or objectives were reviewed, monitored, discussed, and/or altered as a result of the Plan Development activity. All changes to the Client Plan must be reviewed with the client/caregiver and updated on the Client Plan.

If you have questions, please send your inquiry to the Quality Assurance Office, QAOffice@acbhcs.org.

ⁱ CCR Title 9, Chapter 11, Section 1810.232

ⁱⁱ Clinical Record Documentation Standards, July 27, 2013, page 19- 20
[http://www.acbhcs.org/providers/QA/docs/qa_manual/7-1 CLINICAL DOCUMENTATION STANDARDS.pdf](http://www.acbhcs.org/providers/QA/docs/qa_manual/7-1_CLINICAL_DOCUMENTATION_STANDARDS.pdf)