alameda county behavioral health
MENTAL HEALTH & SUBSTANCE USE SERVICES

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- MEMORANDUM -

DATE: March 21, 2023

TO: Specialty Mental Health Adult Residential Treatment and Crisis Residential Treatment Providers

FROM: Juliene Schrick, Utilization Management Division Director, Juliene Schrick

Torfeh Rejali, Quality Assurance Administrator Torfeh Rejali

SUBJECT: **NEW Level of Care Determination Tool for Adult and Crisis Residential Services and Clarification of Documentation Requirements**

Purpose:
This memo is to introduce the new required *Residential Level of Care Determination Tool* and clarify documentation standards for Specialty Mental Health Adult Residential Treatment (ART) and Crisis Residential Treatment (CRT) providers.

New Residential Level of Care Documentation Form
To assist residential providers and the ACBH Utilization Management (UM) team in making level of care decisions, a new *Level of Care Determination Tool for Residential Services* has been created, and is to be included as part of the initial authorization request for ART or CRT services.

Effective April 10th, 2023, upon a client's admission to the program, ART and CRT providers are required to submit the *Level of Care Determination Tool* along with the *Service Authorization Request* (SAR) and *referral form* to the ACBH UM team. The *Level of Care Documentation Tool* replaces the previous version of the Brief Screening Tool. The LOC Tool and the SAR can be located on the Provider's Website Utilization Management page.

The *Level of Care Determination Tool* consists of admission criteria for Adult Residential and Crisis Residential treatment services. When using the tool, complete the section that matches the level of service your facility is providing (ART or CRT). Typically, ACBH will be looking for each box to be checked in order for the client to meet the criteria for that level of care. Please make sure to also complete the narrative sections at the bottom of the form. The information in that section will assist ACBH UM in making the authorization decision and understanding the focus of treatment.

Documentation Requirements for ARTs and CRTs:
The table below is an overview of the documentation requirements and due dates for ART and CRT levels of care.

Document Type	When due	Authority
Admission Agreement	Upon admission to program	CCR, tit. 9, § 532.2
Level of Care Determination Tool (NEW) and Service Authorization Request (SAR) and referral form	When requesting authorization for services	
Assessment	Upon admission to program	CCR, tit. 9, § 532.2 BHIN 22-019
Problem List	Following initial assessment and updated when there is a change in the client's condition.	BHIN 22-019
Treatment Plan	ARTs-Within 30 days of admission CRTs-Within 72 hours of admission	CCR, tit. 9, § 532.2 BHIN 22-019
Treatment Plan Updates	ARTs: At least once every 30 days and whenever there is a significant change CRTs: At least once every week and whenever there is a significant change	CCR, tit. 9, § 532.2 BHIN 22-019
Daily Notes	Within 3 days of the date of service. **To bill a daily note, the client must have received a face to face service that day.**	Tit. 9, § 1840.332
Discharge Summary	Prior to discharge	CCR, tit. 9, § 532.2

Documentation of Daily Notes

Daily Notes are considered Progress Notes and must include enough detail to demonstrate the value of the services provided in addressing the client's behavioral health needs. Below is a list of items that must be included in a daily note:

- Date services are provided
- Type of services (assessment, therapy, groups, collateral) provided throughout the day
- ICD 10 code
- Current procedural terminology (CPT) code or Healthcare Common Procedure Coding System (HCPCS) code
- The service provider's typed or legibly printed name, Medi-Cal credential, signature and date of signature
- Narrative sections to include the following information:

- Description of services provided throughout the day, including how the services addressed the person's behavioral health needs (e.g. symptom, condition, diagnosis and/or risk factors).
- Treatment plan changes or progress made towards achieving treatment goals
- Groups attended, significant information shared during groups, concerns about participation, insights or progress made during groups
- Next steps, including but not limited to planned action steps by the provider or client, collaboration with the client, other providers, family or significant others and any updates to the problem list, as appropriate.

Please note that the Shift Log may be a good source for some of this information. Providers can consider summarizing the information from the log to meet the requirements of the daily note.

Next Steps:
Please communicate these changes to your team.

- Starting 4/10/23 please complete the *Level of Care Determination Tool* along with the *Service Authorization Request* form for all initial authorizations. Please send both forms along with the referral for the client to your assigned ACBH reviewer for initial authorization requests.
- The documentation requirements outlined above are in effect currently. Please ensure your staff are trained and documenting to these standards.

ACBH Utilization Management (UM) and ACBH Quality Assurance (QA) departments are updating the recorded documentation and authorization process training for staff of ARTs and CRTs. We will send each ART and CRT the link to the recording once posted on the Provider's website.

Support:
If you have questions about the use of the new *Level of Care Determination Tool*, please contact UM Clinical Review Specialist Supervisor, Deanna Kolda at Deanna.Kolda@acgov.org.

For questions and/or comments regarding the documentation requirements, please contact QATA@acgov.org.