## PREGNANCY INDICATOR

**Q**: I was told I now have to indicate if a client is pregnant. Does this mean I have to ask every client I see whether they are pregnant?

A: No. You are not required to ask if a client is pregnant or post partum unless being pregnant is a requirement for the type of services being provided (such as Prenatal Programs). The State has said that when you are aware the client is pregnant you must report this information. If a client self discloses during a session with you, a family member during collateral contact shares information, the client's physical appearance makes it obvious, whatever the mechanism by which you become aware the person is pregnant you must code the service with a pregnancy indicator of "Y".

**NOTE:** Medi-Cal clients whose benefits are restricted to pregnancy or emergency services will have services denied by the State when a pregnancy indicator is missing from the Medi-Cal claim.

## **EMERGENCY INDICATOR**

**Q**: Is a Crisis service considered an Emergency Visit? Can't all Crisis services be coded with the emergency indicator?

**A**: On 11/02/2009 DHCS provided the following information regarding the definition of emergency service for DMH and ADP services:

Title 9 Section 1810.216 defines "Emergency Psychiatric Condition" in terms of an inpatient. There is no separate definition for outpatients. The definition (with the exception of facility specifics) should be construed to apply to outpatients as well.

Title 9 CCR, Section 1810.216 says: "Emergency Psychiatric Condition' means a condition that meets the criteria in Section 1820.205 when the beneficiary with the condition, due to a mental disorder, is a danger to self or others, or immediately unable to provide for or utilize, food, shelter or clothing, **and** requires

psychiatric inpatient or psychiatric health facility services."

We are continuing with our request for further clarification from DMH and ADP. Until we receive clarification please continue with the following procedure: *When a service provided meets the current criteria of an EMERGENCY you must code the service with an emergency indicator of "Y" using the Single Service entry screen.* 

**NOTE:** Medi-Cal clients whose benefits are restricted to pregnancy or emergency services will have services denied by the State when a pregnancy indicator is missing from the Medi-Cal claim.

## Reports

**Q:** The MHS 696 Monthly Chart Audit report comes so late in the month following the month of service that we have little time to work it. Can we get the report sooner?

**A:** Due to the size of the report and system limitations it is not currently feasible to send the MHS 696 report directly to a provider's printer queue. Currently the report is printed, separated and mailed to providers by our IS staff. Providers

wishing to obtain their reports earlier may contact our IS Help Desk (www.HIS@acbhcs.org or 510-567-8181) to arrange the picking up of their reports. This would reduce the delay somewhat from waiting for the mailed reports.

**Q:** There are some reports such as the PSP119 Absence of Service that we are no longer receiving. What happened, how do I get them?

**A:** Occasionally a provider will contact the Help Desk requesting a report be held or stopped. Check with the Help Desk (www.HIS@acbhcs.org or 510-567-8181) to determine if there is a printer problem or if someone from your agency requested a report to be stopped. The Help Desk will troubleshoot and work with you resolve.

## **Service Entry Screens**

Q: The Daily screen now requires a staff number. Whose staff number do I use?

**A:** The staff number of the person providing the service should be used. If the service is provided by multiple staff (such as in Methadone Dosing Program, or a Residential facility), it is the program/agency's responsibility to determine the staff person/s who are primarily responsible for the client and decide which staff person will be reported as providing the service. Hint: Many providers use the staff person responsible for signing off on orders and charts or the clinician/physician assigned at the episode level.

**Q:** The Daily screen requires a staff number. Is there a way I can enter one staff number and have it populate all the staff number fields?

**A:** Yes. When entering services using the Daily Screen, you may tab to the bottom of the screen, enter the staff number in the DEFAULT staff number field and hit enter. The default staff number will now be displayed in the staff number field for each service. In the event you have different staff you may choose to enter the default and then update the staff number for services provided by different staff.