




B1



SMC BHRS Documentation Manual (for SMHS)

June 2024






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Housekeeping

- Reminder- Please keep your mic muted
- Type your questions into the chat –Q&A will be at the end of the webinar
- Today’s session will be recorded



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AGENDA

- New Sections of the Documentation Manual
- Review format of the new Documentation Manual
- Demo of the new Documentation Manual

We will *not* be covering specific content in the manual. More information will be provided in the section specific trainings that will be offered throughout the rest of the year.

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C4



What's New?

DHCS' efforts to both streamline and standardize documentation standards have added several new processes to the behavioral health system.

The new Documentation Manual includes information on these new processes under CalAIM, including new ways to:

- ✓ Conceptualize Medical Necessity
- ✓ Screen individuals for SMHS
- ✓ Communicate transitions with MCPs
- ✓ Document focuses of treatment



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What's New?

New Sections have been added to the Documentation Manual to support staff in understanding these CalAIM changes.

Criteria to Access SMHS, Medical Necessity

Screening Tools

Additional Assessment Tools

Problem List

Transition of Care Tool



NAVIGATING THE MANUAL



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Navigating the Manual

Due to these additions, the Documentation Manual is much longer than previous documentation manuals.

Therefore, we have created several **new features** to help staff navigate the manual.

| BHRM Documentation Manual for SMHS | | BHRM Documentation Manual for Specialty Mental Health Services | | Date Updated |
|--|----|--|----|--------------|
| Introduction | 4 | Introduction | 4 | |
| Compliance | 8 | Behavioral Health System of Care | 4 | |
| Documentation Requirements | 11 | Compliance | 8 | |
| Access to SMHS and Medical Necessity | 13 | General Information About Compliance | 9 | |
| Screening Tools | 3 | Fraud, Waste, and Abuse (FWA) | 10 | |
| Assessment | 15 | Alerts, Incident Reports, Breaches | 11 | |
| Additional Assessment Tools | 8 | Documentation Requirements | 13 | |
| Diagnosis | 28 | Overview | 13 | |
| Problem List | 10 | Access to SMHS and Medical Necessity | 3 | |
| Care Planning | 15 | Overview | 3 | |
| Coordination of Care | 15 | Criteria to Access Specialty Mental Health Services (SMHS) | 4 | |
| Discharges and Transfers | 16 | Medical Necessity Criteria | 8 | |
| Coding Services | 20 | Screening Tools | 10 | |
| Progress Notes | 22 | CaSAM Adult and Youth Screening Tools for SMHS | 10 | |
| Appendices | 25 | ICC Eligibility | 13 | |
| A - Service Code, Location Code, Time Field Matrix | 25 | Assessment | 15 | |
| B - Service Definitions | 26 | Scope of Practice | 15 | |
| | | Assessment Domains | 16 | |
| | | Additional Assessment Components | 20 | |
| | | Assessment Types | 22 | |
| | | Assessment Timelines | 24 | |
| | | Multiple Teams or Providers for A Single Beneficiary | 25 | |
| | | Additional Required Assessment Tools | 26 | |
| | | CANS and PSC-35 | 26 | |
| | | Diagnosis | 28 | |



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Navigating the Manual

A Table of Contents has been added to show each section and the main categories within each section.


| | |
|---|----------|
| Assessment | 9 |
| Scope of Practice..... | 9 |
| Assessment Domains..... | 10 |
| Additional Assessment Components..... | 14 |
| Assessment Types..... | 16 |
| Assessment Timelines..... | 18 |
| Multiple Teams or Providers for A Single Beneficiary..... | 21 |

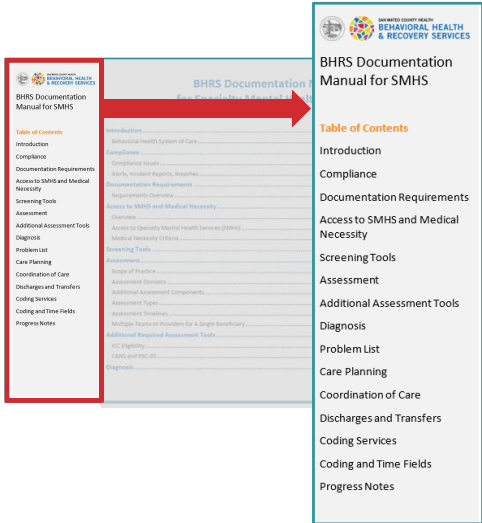
| BHRM Documentation Manual for SMHS | | BHRM Documentation Manual for Specialty Mental Health Services | | Date Updated |
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Navigating the Manual






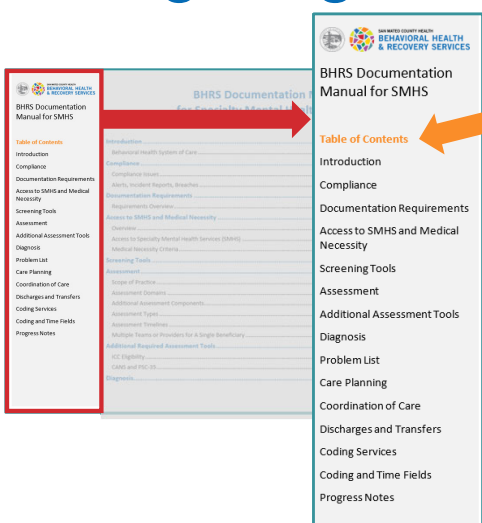
This menu bar has been added to left side of every page of the manual to allow staff to:

- See where they are in the manual
- Easily navigate to another section of the manual



Navigating the Manual






The current section you are in will be highlighted in **orange** in the menu bar.

Each section is also linked to the appropriate section in the manual.

This means that if you access the manual on a computer, you can click on the section name to navigate to that section.





Navigating the Manual

There is a column to the left of the table of contents called **“Date Updated”** that will note if and when a particular section or subsection was updated since the original publication of the documentation manual.

| | Date Updated |
|--|--------------|
| BHRS Documentation Manual for SMHS | |
| Table of Contents | |
| Introduction | |
| Compliance | |
| Documentation Requirements | |
| Access to SMHS and Medical Necessity | |
| Screening Tools | |
| Assessment | |
| Additional Assessment Tools | |
| Diagnosis | |
| Problem List | |
| Care Planning | |
| Coordination of Care | |
| Discharges and Transfers | |
| Coding Services | |
| Progress Notes | |
| Appendices | |
| A - Service Code, Location Code, Time Field Matrix | |
| B - Service Definitions | |

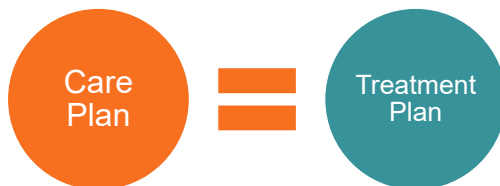


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Navigating the Manual

“Care Planning” and **“Care Plans”** are the terms we will use moving forward for what we used to call **“Treatment Planning”** and **“Treatment Plans”**




| | Date Updated |
|--|--------------|
| Diagnosis Scope of Practice | 29 |
| Diagnosis and Billing | 30 |
| Other Diagnosis-Related Issues | 31 |
| Problem List | 33 |
| Care Plans | 34 |
| Pre-CalAIM Care Plans (Treatment Plans) | 34 |
| CalAIM Care Plans | 41 |
| Coordination of Care | 42 |
| Co-Occurring Substance Use Disorders | 43 |
| Documentation Requirements | 45 |
| Coordination of Care | 47 |
| Discharges and Transfers | 48 |
| Coding Services | 4 |
| Progress Notes | 8 |
| Appendices | 9 |
| A - Service Code, Location Code, Time Field Matrix | 10 |
| B - Service Definitions | 12 |
| Diagnosis Scope of Practice | 12 |
| Diagnosis and Billing | 13 |
| Other Diagnosis-Related Issues | 14 |
| Problem List | 15 |




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Navigating the Manual




Compliance Alerts 


Information here.

Documentation 

Tips will be listed here

OTHER USEFUL INFO 

Information here.

RELATED POLICIES TO REVIEW 

The following are the main policies related to Topic.

Policy XX-XX: Name of Policy


These text boxes have been added throughout the manual to highlight key concepts or helpful information for staff.

Navigating the Manual



Compliance Alerts 

Info

Documentation 

re


OTHER USEFUL INFO

Information here.

RELATED POLICIES TO REVIEW

The following are the main policies related to Topic.

Policy XX-XX: Name of Policy

Compliance Alerts 

Information here.

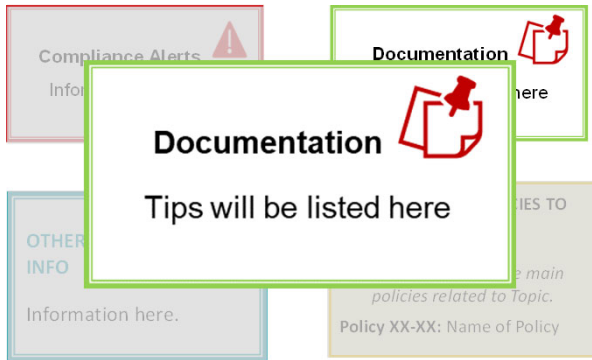
COMPLIANCE ALERTS

This manual is comprised mostly of documentation requirements that are necessary for compliance to state and federal regulations. Red boxes call out specific elements of the process that many staff forget or might not have been aware of.

Navigating the Manual



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DOCUMENTATION REMINDERS/TIPS

These boxes are used to provide reminders and tips on how to document certain services.

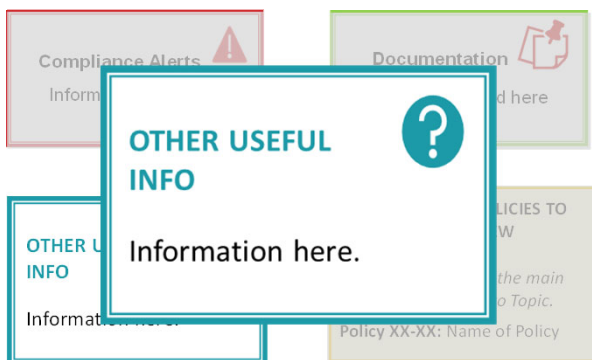


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Navigating the Manual



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OTHER USEFUL INFORMATION

This box provides definitions of terminology or other information that is general to behavioral health or how the system functions.



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Navigating the Manual



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RELATED POLICIES TO REVIEW

The following are the main policies related to Topic.

Policy XX-XX: Name of Policy

POLICIES TO REVIEW

Policies related to the topic are noted in a yellow box. The policies that are listed are the main policies associated with the topic, but do not necessarily include ALL policies related to the topic.

Please contact your program supervisor directly or contact QM's Ask inbox at hs_bhers_ask_qm@smcgov.org if you have questions about what additional policies might be applicable to your program.



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RELATED POLICIES TO REVIEW

The following are the main policies related to Topic.

Policy XX-XX: Name of Policy

Note Regarding Policies

BHRS is actively working on updating policies to meet the new regulatory requirements and processes.

QM will notify staff as soon as any new policy updates are finalized.



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Navigating the Manual



Because some requirements are still yet to be implemented, **certain sections of the documentation manual are marked as “under construction.”**

Each section will be released when the corresponding training is provided.




CONCEPTUALIZING DOCUMENTATION REQUIREMENTS



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Conceptualizing Documentation Requirements



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The foundational pieces to documentation **should all inform each other and paint a clear picture of the beneficiary's** medical necessity and appropriate treatment.

- ✓ Screening Tools (if applicable)
- ✓ Assessments (including Diagnosis and Mental Status Exam)
- ✓ CANS (beneficiaries ages 6 through 20 years old)
- ✓ PSC-35 (beneficiaries ages 3 through 18 years old)
- ✓ ICC Eligibility Screening (beneficiaries under 21 years of age)
- ✓ Trauma Screening Tool (To Be Determined...)
- ✓ Problem List
- ✓ Care Planning Requirements (for select services and programs)
- ✓ Transition of Care Tool (if applicable)
- ✓ Progress Notes



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Conceptualizing Documentation Requirements



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```

    graph LR
      Screenings((Screenings)) --> Assessment((Assessment))
      Assessment --> ProblemList((Problem List / Diagnosis))
      ProblemList --> CarePlanning((Care Planning))
      CarePlanning --> Transition((Transition))
      CarePlanning --> Assessment
      CarePlanning --> OngoingNotes((Ongoing Progress Notes))
      OngoingNotes --> Assessment
      Transition --- Note["(Might be in the form of the formal Transition Tool)"]
  
```



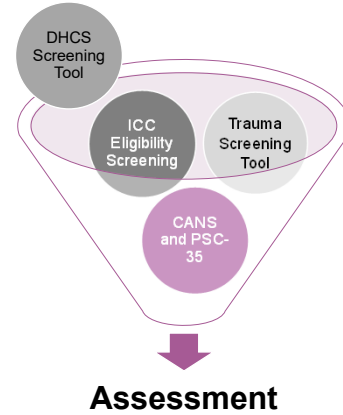
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Conceptualizing Documentation Requirements



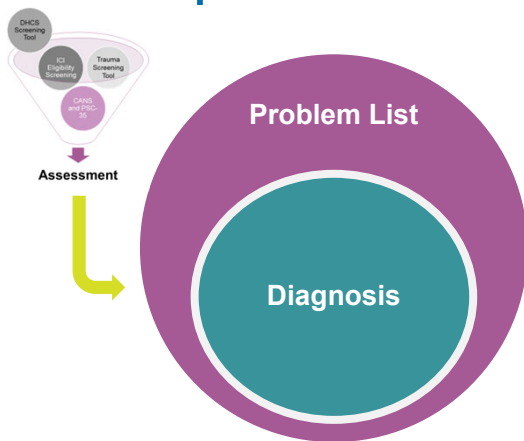
Note:

- DHCS has not yet identified a trauma screening tool for Counties to use to support determination of Access Criteria.
- ICC Eligibility Screening has not been implemented yet, but will be implemented soon!
- Training will be provided in the next few weeks for those programs that will be administering the DHCS Adult and Youth Screening Tools.



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Conceptualizing Documentation Requirements

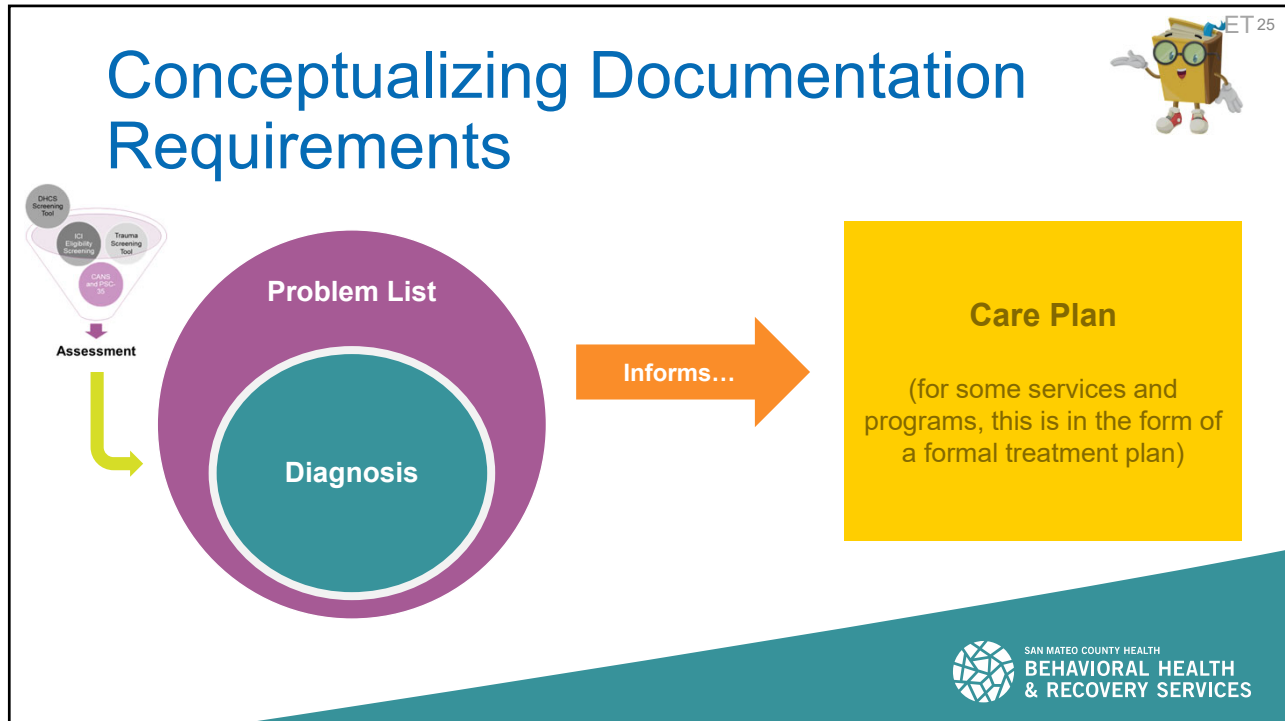


While a mental health diagnosis would be included in the problem list, the problem list itself is a broader list that also includes additional conditions and risk factors that may be self-reported by the beneficiary or identified by other health care providers.

The **“Problem List”** will be required for all clients, regardless of program and services.



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Updates to the QM Website

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Updates to Website

- Updates will be made to our QM Website to improve your experience finding resources.
- Previously, we separated our CalAIM Webinars and FAQs into a dedicated CalAIM tab. Since we are beginning the process of full implementation, the following will change:
 - We will still retain the CalAIM Tab for background information regarding CalAIM, including links to our CalAIM Policies.
 - Items like FAQs and Webinar PPTs will be moved to the respective tabs that already exist on the QM website.



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Let's Take a Look at the Doc Manual!



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Special Note about Coding Section



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Service Code Cheat Sheet

Special Note about the Service Code Cheat Sheet

- The Service Code Cheat Sheet will be located in a separate file outside of the Documentation Manual. A link to the Service Code Cheat Sheet is included in the Manual.
- Over the next few years, the Service Code Cheat Sheet will be updated on a more frequent basis than the Documentation Manual.



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Service Code Cheat Sheet

Special Note about the Service Code Cheat Sheet

- DHCS is planning to continuously update the Medi-Cal billing manual and coding guidance in order to:
 - Ensure Medi-Cal's use of CPT codes is aligned to CMS specifications.
 - Ensure billing meets County needs.



Coding Update!



Service Code Updates from DHCS

- Minute ranges for several services have been changed
- G2212 has been discontinued
- For services that have a maximum bracket of time, **you no longer need to use the prolonged service add-on code**. For services in the maximum time range, you should add all minutes in the service time.

Example: Med Support Services

- Code 99212CA for 10-19 min
- Code 99213CA for 20-29 min
- Code 99214CA for 30-39 min
- Code 99215CA for 40+ minutes

If the service lasted 78 minutes, then you would use code 99215CA and input 78 in the Service Time field.

Effective July 1, 2024!

Coding Update!

Location Code Index

- There have been changes to some lockout location guidelines with the recently published update to the Medi-Cal Billing Manual. MIS and QM are currently analyzing the changes and will provide the new Location Code Index as soon as it is ready.



Special Note about “Under Construction” Sections



Unimplemented Processes/Forms

FAST



SLOW



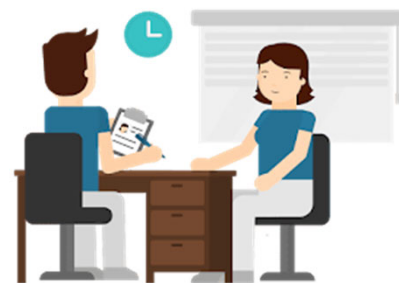
Some information regarding upcoming Tools/Processes is included in this manual to help staff understand changes that are coming soon.

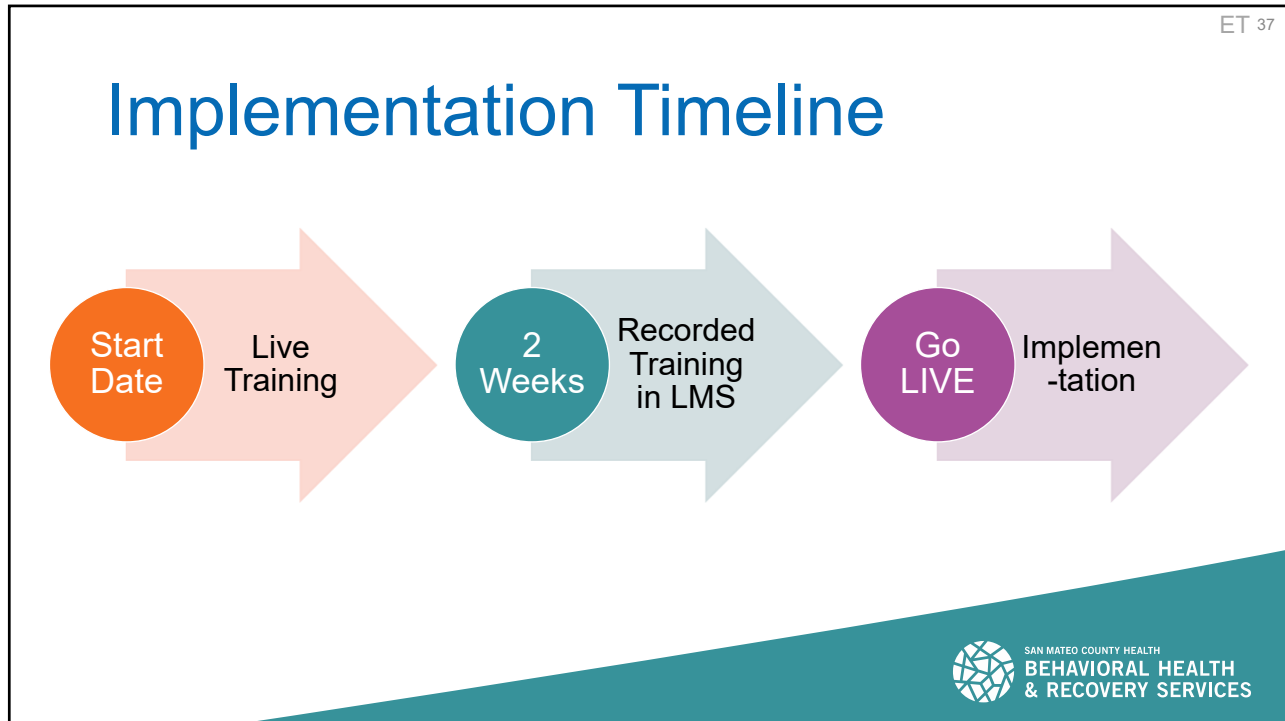
Until certain forms (like the Transition of Care Tool) are fully implemented, **staff should continue to use current (Pre-CalAIM) processes.**

Assessment

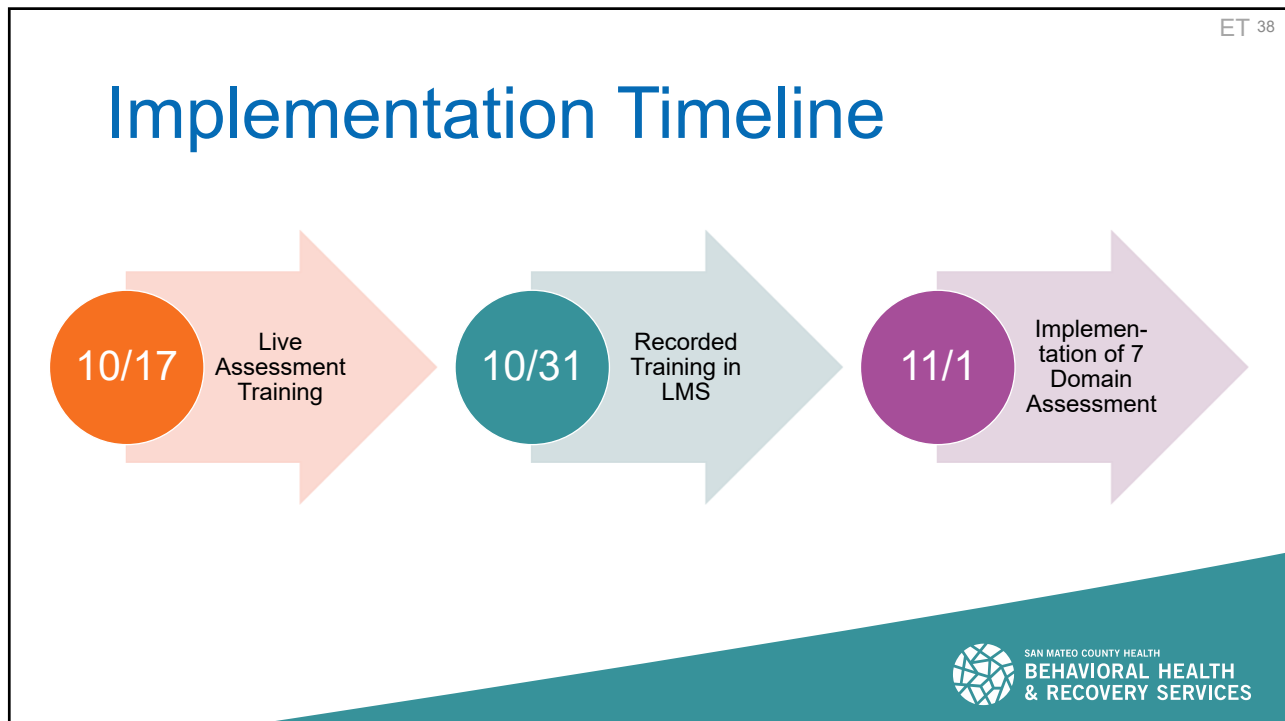
Staff and contract agencies may continue to use the current Assessments (a.k.a. “V2” assessments) until the new CalAIM Assessment is implemented in the Fall of 2024.

However, staff should use the information regarding the required elements of the CalAIM Assessment (a.k.a. the 7 Domains) as a guide to help them ensure that all the required information is included somewhere in the assessment.






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2024 BHRS CalAIM Training Schedule





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SAVE!
 THE DATE!

CalAIM Trainings

Join QM every 3rd Thursday of the month from 10:30am - 12pm at the [Zoom link here!](#)

Training is mandatory for all contractors and BHRS. Please mark your calendars!

JUN 20 Documentation Manual Training
(MH only)

JUL 18 Access/Medical Necessity Training
(MH only)

AUG 15 Service Codes Training*
(MH only)

SEP 19 Progress Notes Training*
(MH & SUD)

OCT 17 Assessment Training
(MH only)

NOV 21 Care Planning/Problem List Training
(MH & SUD)

COMING SOON! Bonus Z-Code Training
(MH only)

All trainings will include live Q&A!

* Contractors have completed these trainings but are welcome to attend again.

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Questions?

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