

SOLANO COUNTY QUALITY ASSURANCE QA INFORMATION NOTICE 23-09

SEPTEMBER 1, 2023

PURPOSE: To inform our Solano County staff, contractors and general community of changes in programs, policies, or procedures at the local, State and Federal levels. QA Information Notices (INs) are sent out monthly and posted on our <u>website</u>.

GENERAL UPDATES

23-09 (A) CaIAIM – CALIFORNIA ADVANCING & INNOVATING MEDI-CAL (COUNTY & CONTRACTOR) This section of the QA IN provides updated information regarding Payment Reform.

23-09 (A.1) Updated Solano Outpatient Program CPT Code List: An updated Solano Outpatient Program CPT Code List has been created to replace all previous versions. It will be emailed to all Contractor programs and is <u>posted on SharePoint</u> for County staff. This version reflects the following changes:

- A new tab entitled "Psych Testing". These codes are to be used by primarily by Psychologist staff as appropriate
- A new code to bill for Individual Therapy when provided to a youth receiving IHBS (see item 23-09 (A.4) for full details
- Updated codes specific to Mobile Crisis to use for follow-up contact activity

23-09 (A.2) List of Billing Codes by Provider Type: A "Billing Codes by Provider Type" resource will be emailed to all Contractor programs with the CPT Code list above and is <u>posted on SharePoint</u> for County staff. There are tabs that identify the new Payment Reform billing codes for specific provider types to select. QA hopes that this will be an easy reference guide of appropriate codes for staff to utilize.

23-09 (A.3) G2212 Maximum Minutes: At this time, the add-on code G2212 (displayed in the Avatar progress notes as "Psychotherapy Add-On") has a maximum of 210 minutes. If a service time goes beyond the total duration allowed between the primary code and G2212, staff are asked to indicate the actual total time in the body of the progress note.

23-09 (A.4) Assessment Codes and Scope of Practice: Please ensure that the appropriate Assessment code is selected based upon the **provider's scope of practice** and **type of service rendered**. If this is not accurate, that could be a reason for recoupment and could be considered fraud. If any errors have been made at this time as staff are getting used to the new codes, a NOBE should be completed to correct this.

- LPHA Staff
 - Assessment 90791
 - Assessment (Collateral) 90791COL
 - Assessment (IHBS) 907911HBS
- <u>Non-LPHA Staff</u>
 - MH Assessment H0031
 - MH Assessment (Collateral) -Non-LPHA & Student Trainees H0031COL
 - o MH Assessment (IHBS) -Non-LPHA & Student Trainees H00311HBS

23-09 (A.5) IHBS Clarifications: The definition of IHBS has been updated by DHCS to reflect that IHBS "may include but are not limited to assessment, plan development, therapy, rehabilitation and collateral". With this update, Solano County identified additional IHBS codes so that services can be documented accurately based on service type and also include the modifier to indicate that the youth receiving those services is receiving IHBS. This provides data to the State that the County is providing IHBS to youth who should be receiving them.

IHBS codes can be billed once agreed upon within a CFT meeting and authorization is completed. For all clients receiving IHBS, the accurate IHBS code should be selected based upon the service provided and scope of the provider. IHBS codes include:

- Intensive Home Based Services (IHBS) H2017IHBS
 - This code will continue to be billed for Rehab and Collateral type services
- Assessment (IHBS) 907911HBS
- MH Assessment (IHBS) -Non-LPHA & Student Trainees H0031IHBS
- Plan Development (IHBS) H0032IHBS
- Individual Therapy (IHBS) 90832IHBS
 - This has been added as a service code as of mid-August 2023 see updated Solano Outpatient Program CPT Code List
 - Contractors will need to update their EHRs to reflect this option

23-09 (B) AB1278 PHYSICIAN NOTICE TO CLIENTS – OPEN PAYMENTS DATABASE (COUNTY & CONTRACTOR):

<u>Assembly Bill 1278</u> has identified requirements that a physician or surgeon must put patients on notice of the Open Payments database. The Open Payments database is a federal tool used to search payments made by drug and device companies to physicians and teaching hospitals. Please read the bill closely as it outlines various requirements for the content and the provision of notices.

All programs with physicians on staff must now complete the following:

- Provide each client at the initial office visit a written or electronic notice of the Open Payment Database
 - The client must sign a notice indicating they received it. A copy should be placed in the client's chart and a copy provided to the client
 - This is required for new patients only
 - Post an Open Payments Lobby Notice in each location that the physician practices (i.e. clinic lobby)
- The same notice must be posted on the program's website by January 1, 2024

Please refer to the email that will be sent from QA for specific requirements and resources for County and Contractor programs.

23-09 (C) SIGNATURE REQUIREMENTS ON MENTAL HEALTH FORMS & CHANGE IN MEDICATION CONSENT REQUIREMENT (COUNTY & CONTRACTOR):

As the DHCS COVID-19 waivers and flexibilities have expired, QA would like to remind the system of requirements regarding signatures on Intake forms. There are some exceptions in emergency situations.

Forms that require client/authorized representative signature:

- Consent to Treat
- Acknowledgement of Receipt
- Authorization to Release Information (ROI)
- Text/Email Consent

Consent that allows written signature or documented verbal consent of client/authorized representative:

• Telehealth Consent

Change in Medication Consent Requirement:

It was recently confirmed that Medication Consents are no longer included in the MHP Contract with DHCS. Due to this information, Solano County will not be requiring the completion of Medication Consents by psychiatric providers in outpatient programs. At this time medication consents are still required in other specific programs (e.g. CSU, CRT, LPS facilities, other locked settings).

- As standard practice, medical staff is advised to clearly document necessary information regarding medication prescription and review with patient in a progress note
- JV220s are still a requirement for youth clients that need them
- Minors still may **not** consent to psychotropic medication and require a parent to verbally consent

AVATAR UPDATES

23-09 (D) VALID EMAIL ADDRESS REQUIRED FOR AVATAR ACCESS (COUNTY AND CONTRACTOR)

It is a requirement for all Avatar users to have a valid email address. When requesting Avatar access for new staff, please ensure that a valid email address is included in the setup paperwork. A work-related email address is preferred but if that is not available, a private email address may be provided.

We look forward to continuing to partner on implementing this and future State and Federally mandated initiatives that help to inform and protect the rights of those we serve.

Approved by Rob George, LCSW MH Services Manager, Sr., Quality Assurance, Access/Managed Care, Avatar Planning

CONTACT QA: <u>QUALITYASSURANCE@SOLANOCOUNTY.COM</u> PHONE: (707) 784-8323 FAX: (707) 427-2774