

# MECKLENBURG COUNTY Area Mental Health, Developmental Disabilities and Substance Abuse Services July 09, 2010

#### PROVIDER HOT SHEET

### ⇒ Privacy, Security, HIPAA, Identify Theft

As providers of health care services, you are required to comply with the HIPAA privacy and security rules, the NC rules about privacy and confidentiality. If you provide Substance Abuse treatment, federal substance abuse privacy rules apply. If you are doing business in North Carolina you are likely covered under the NC Identity Theft Laws as well. Please be aware that these privacy and security rules address the disposition and destruction of protected personal information. If your agency determines that records can be destroyed, the destruction of paper records should be done by shredding, burning, pulping, or pulverizing the records so that PHI is rendered essentially unreadable, indecipherable, and otherwise cannot be reconstructed. For Protected Information on electronic media, clearing (using software or hardware products to overwrite media with non-sensitive data), purging (degaussing or exposing the media to a strong magnetic field in order to disrupt the recorded magnetic domains), or destroying the media (disintegration, pulverization, melting, incinerating, or shredding) should be completed. There are many publications to help inform your organization's policies and practices.

http://www.hhs.gov/ocr/privacy/hipaa/enforcement/examples/disposalfaqs.pdf http://www.idtheftcenter.org/artman2/publish/states/North\_Carolina.shtml http://www.hhs.gov/ocr/privacy/hipaa/administrative/securityrule/index.html

### ⇒ Implementation Update #76

- Reporting provider Fraud and Abuse
- Changes to Administrative Requirements
- CAP-MR/DD Clinical Policy/Manuals & Technical Amendment Number One
- Direct Billing for I/DD TCM Providers
- Update on New PA Guidelines for Outpatient
- CABHA Transition Updates
- CABHA Review Process
- Medicaid Enrollment for CABHA Applicants
- Incident Response and Improvement System
- Community Support Team Providers <u>Attachment 1</u> | <u>Attachment 2</u>

**Direct Billing for Intellectual and Developmental Disabilities Targeted Case Management Providers**System changes for direct billing of DD targeted case management (TCM) are in process but not yet completed and tested. To ensure cash flow for DD TCM providers, providers must continue billing though the LMEs until August 1, 2010.

DMA is close to receiving the Centers for Medicaid and Medicare Services (CMS) approval for a case rate for DD TCM. It is imperative that DD TCM providers complete and submit their Medicaid enrollment applications immediately in order to access this rate when it is approved.

### **Priority Processing of Medicaid Enrollment for CABHA Applicants**

CABHA applicant agencies that are endorsed for the services that make up their continuum <u>but have not</u> had a response to their application(s) for enrollment for one or both of their continuum services, or for core services, **must contact CVS EVC Call Center at 866-844-1113 or email NCMedicaid@csc.com**. Priority

will be given to issue provider enrollment numbers so that the agency can continue through the CABHA certification process.

### Change in Community Support Team Enrollment Numbers Effective July 1, 2010

As you were informed in Implementation Updates #63 and #65 and Medicaid Bulletins November and December 2009, DMA is engaged in the re-verification of Notifications of Endorsement Actions (NEA) letters for Community Intervention Services and specifically for providers of Community Support Team (CST). CST providers were required to submit the verification packet with appropriate credentials including all current NEAs to qualify for continued enrollment as a provider of CST services. Further verification has also occurred through the endorsing LMEs. This process is now complete and new provider enrollment numbers have been issued for CST using your core number with a V suffix to provide a unique provider number for CST (H2015 HT) separate from other Community Support services (H0036 HA, HB and HQ) beginning July 1, 2010. With this separation, all new service authorization requests submitted to ValueOptions on July 1st and thereafter must include the V suffix. PLEASE NOTE: If you have already submitted authorization requests for CST on or after July 1 using your number with the B Suffix, please know that ValueOptions has been instructed to transfer automatically any approved requests received from July 1 through July 31 to your number with the V suffix. This will offer a limited 30 day time period to ensure providers are informed of these changes. After July 31, 2010, service requests for CST services will be returned as Unable to Process if the provider number retains the B suffix rather than the V suffix. Service authorizations approved prior to July 1, 2010, under the B suffix will be honored until these authorizations expire.

Please be attentive to which suffix you use for billing of claims to HP Enterprise Services. Please note: You must use the NPI associated with the Medicaid provider number that matches the CST authorization for proper adjudication of claims.

⇒ Mecklenburg County Juvenile Crime Prevention Council (JCPC) has decided to reopen the RFP for the Gang Prevention and Intervention Pilot Program Grant. Note that the funding dates for this program have been revised to September 1, 2010-August 31, 2011. If you have not already done so, we encourage you to apply. The RFP can be accessed at the Mecklenburg County JCPC website at <a href="http://www.charmeck.org/Departments/JCPC/Home.htm">http://www.charmeck.org/Departments/JCPC/Home.htm</a>. Note that the RFP is in the process of being posted on the website; you can contact Tangela White (<a href="mailto:Tangela.White@mecklenburgcountync.gov">Tangela.White@mecklenburgcountync.gov</a>) if it is not yet posted and you would like a copy. Required Program Agreement forms can be accessed at <a href="http://www.ncdjjdp.org/jcpc/gang\_violence.html">http://www.ncdjjdp.org/jcpc/gang\_violence.html</a>.

#### Please note the following:

- Only government agencies, housing authorities, and non-profit organizations are eligible to receive funding. For-profit organizations are not eligible.
- Organizations that previously submitted complete Program Agreements will have their previous applications considered, unless they otherwise notify the local area consultant, Dean Vick (dean.vick@djidp.nc.gov) and submit revisions by the deadline herein.
- The deadline for completed Program Agreements and all required accompanying documentation is August 6, 2010. All paperwork must be completed and received by the Mecklenburg County JCPC by this date to be eligible. Late or incomplete applications will not be considered. Organizations will be notified of decisions by August 26, 2010.

Any questions may be directed to Tangela White at email <a href="mailto:Tangela.White@mecklenburgcountync.gov">Tangela.White@mecklenburgcountync.gov</a>. Please use "Funding Committee - Gang Grant - Organization Name" in the Subject line to ensure your email is forwarded properly.

⇒ Reminder: Required Out of County Placement Notification for Child and Adolescent Consumers
Please remember that per North Carolina Administrative Rule 10A NCAC 27G .0506 a Notification of Out of
County Placement form must be completed by the clinical home and sent to the LME prior to placing a Child

and Adolescent consumer out of county. This only applies to mental health, substance abuse or developmental disability placement that is funded by Medicaid, State or County funds. The Notification of Out of County Placement form is attached along with an "Example" for providers to use as a guide when completing the form. These forms can also be accessed on the AMH website at <a href="http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Library/Forms.htm">http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Library/Forms.htm</a> under MeckCares forms.

Completed forms should be faxed to: Angie Jackson, Provider Relations Manager, Fax (704) 336-5661

- ⇒ CAP-MR/DD 2008 Waiver Manuals are now available online.
  - Comprehensive Waiver Manual: <a href="http://www.ncdhhs.gov/mhddsas/cap-mrdd/update/cap-compmanual7-10.pdf">http://www.ncdhhs.gov/mhddsas/cap-mrdd/update/cap-compmanual7-10.pdf</a>
  - Supports Waiver Manual: http://www.ncdhhs.gov/mhddsas/cap-mrdd/update/cap-supportsmanual7-10.pdf
- ⇒ June Medicaid Bulletin
- ⇒ Special Implementation Update #75
  - Transition Timeframe for Full CABHA Implementation
  - Revised CABHA Letter of Attestation Submission Process
  - Update on Subcontracting between a CABHA and Provider Agencies
  - Extension of Case Management Services under CSS
  - Update on CST, IIH and Day Treatment Training Requirements
  - CST Service Revised Rate and Effective Date
  - CST Revised Authorization Limit and Effective Date
  - Attachment A: Child and Adolescent Day Treatment Training Requirements
  - Attachment B: Intensive In-Home Training Requirements
  - Attachment C: Community Support Team Training Requirements
- ⇒ Balanced Scorecard Data will again be collected on an Excel spreadsheet in Provider Connect. Data is required from agencies who provided Community Support, Community Support Team, ACT, Psychosocial Rehab and Targeted Case Management to IPRS consumers from January June 2010. The spreadsheets contain the reporting form with instructions. The spreadsheets are currently accessible in the eCura Provider Connect download folder in a subfolder titled "Balanced Scorecard Data." Providers are to complete the spreadsheet and upload it to Provider Connect no later than the due date on the form, July 16, 2010. If you did not provide the above services from January June 2010, there is no spreadsheet for your agency and no report is required for this reporting period. Questions regarding Balanced Scorecard Data should be directed to Evelyn Cross; evelyn.cross@mecklenburgcountync.gov, 704-432-3058. Questions regarding Provider Connect should be directed to Jeremy Pollard; jeremy.pollard@MecklenburgCountyNC.gov, 704-432-0356.
- ⇒ Clarification Regarding "Pass Through" for SAIOP and SACOT Implementation Update# 65 outlined changes effective January 1, 2010 allowing Medicaid recipients of SAIOP to be seen for the initial 30 days of treatment without a prior authorization and Medicaid recipients of SACOT to be seen for the initial 60 days of treatment without a prior authorization. Although the State has allowed this "Pass Through" period, providers of SAIOP and SACOT are responsible for ensuring the following:
  - 1. Being fully aware of any other providers i.e. Community Support Team, Psychosocial Rehabilitation Services or ACTT that are also delivering services to the consumer during this time
  - 2. Being fully aware of the Service Definition exclusions and collaborating with other providers involved regarding the service limitations allowed for transition and discharge hours
  - Collaborating with other providers involved with the consumer on the length of time the consumer will receive SAIOP or SACOT services

Failure to follow through with these responsibilities could result in SAIOP and SACOT providers being denied for additional authorizations after the "Pass Through" period <u>or</u> denial of reimbursement from Medicaid due to continued service delivery and billing from another provider.

- ⇒ For IPRS Dually Diagnosed Consumers Enter All Diagnoses in Auth Requests and Claims
  As providers know, many consumers have diagnoses in more than one disability category. A consumer may
  be in treatment for a substance use disorder and will also have a mental health diagnosis. Also, there are a
  number of developmental disability consumers with mental health diagnoses. Since the implementation of
  IPRS Simplification, it is critical that all applicable diagnoses be recorded during electronic transactions with
  the LME. A matching process is now taking place between the claim diagnosis and the target population. It
  does not matter that the provider is concentrating upon one disability area as a specialty. Knowledge of
  cross-disability is obtained during assessments and the person centered planning process, and also during
  interfaces between multiple providers rendering services to the same consumer. Please be sure to include
  all diagnoses on the authorization request as well as your claims for consumers who are dually
  diagnosed. Please see attached examples.
- ⇒ FY11 Operations Manual The Operations Manual for 2010-2011 is now posted on the AMH website at the following link:

  <a href="http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Library/home.htm">http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Library/home.htm</a>. This manual is a binding part of Agreements and Contracts between the Mecklenburg LME and providers of Medicaid and State Funded services. The intent of this manual is to provide the references and sources providers need to meet the requirements of Memorandums of Agreement and Contracts between Mecklenburg LME and provider agencies. Providers are strongly encouraged to share this resource with their staff to ensure that they are aware of the information that it contains.

#### PROVIDER COUNCIL REMINDERS AND UPDATES

- ⇒ **Provider Council Minutes** for the Executive Board, General Membership and Committees are published and available on-line at the following website:

  <a href="http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/MPCouncil.htm">http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/MPCouncil.htm</a>
- ⇒ **Provider Council Sub-Committees** Three standing subcommittees have been formed by the Provider Council. If you are interested or want more information, please contact the committee chairs. The three committees are:
  - Training and Development Committee
    - Trasha Black (Co-Chair), Genesis Project, <u>tblack@genesisproject1.org</u>, 704-596-0505
    - Angela R. Simmons (Co-Chair), The Right Choice MWM, 704-537-3650 x1105, angela@trcmwm.com.
      - > The next scheduled meeting is Wednesday, July 21, 2010 at 9:00 AM in the Carlton Watkins Center Multipurpose room.
  - Provider Relations Sub-Committee
    - Kira Wilson (Co-Chair), The Arc of NC, 704-568-0112, kwilson@arcnc.org
    - Tim R. Holland (Co-chair) Person Centered Partnerships, 704-319-7609, <u>Tim.Holland@pcpartnerships.org</u>
       The Provider Relations Committee will meet on Wednesday, July 21, 2010 at 12:00 PM to 1:30 PM in the Carlton Watkins Center Multipurpose room.
  - Provider Outreach Sub-Committee The Provider Outreach Committee is a new sub-committee, the general purpose of which is to establish mechanisms for the Provider Council to connect with new
    - providers, to provide them basic resource information and to introduce them to the Provider Council.
       Frankie Tack (Co-Chair), Anuvia Prevention and Recovery Center, Inc., 704-927-8789, frankie.tack@anuvia.org.
    - Miranda Little (Co-Chair), Family Preservation, Inc., 704-344-0491, Mlittle @fpscorp.com

>The next meeting will be on Wednesday, July 21, 2010 at 1:30 PM in the Carlton Watkins Center Multipurpose Room.

#### IMPORTANT REMINDERS AND RESOURCES

⇒ Please continue to check the Hot Sheet for the next scheduled date for Provider InfoShare.

#### **EDUCATION AND TRAINING OPPORTUNITIES**

- ⇒ Mecklenburg's PROMISE Recovery and Crisis Training Calendar. Please feel free to print and post at your locations or pass it on to anyone you feel would benefit from our trainings. To register, go to <a href="https://www.meckpromise.com">www.meckpromise.com</a>. If you have any questions or concerns, please feel free to contact us at (704) 525-4398, ext. 207. <a href="http://www.meckpromise.com/node/43">http://www.meckpromise.com/node/43</a>
- ⇒ The Mecklenburg County Provider Council has developed a comprehensive Training Calendar designed to serve as a one-stop location to view training events occurring in Mecklenburg County that are supported or sponsored by the provider community, the LME, AHEC or other entities. Following is a link to submit training events: <a href="http://www.meckpromise.com/node/75">http://www.meckpromise.com/node/75</a>. To view training events, click on the following link: <a href="http://www.meckpromise.com/mptc">http://www.meckpromise.com/mptc</a>
- ⇒ The LME Monthly AMH Training Calendar is posted on-line at the following link: http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Resources/training.htm
- ⇒ **TIP Training in Innovation and Practice** –The NC Council of Community Programs and the Administrative Services Organization, a group of providers, continue to offer training to help providers adapt to changing circumstances. For a list of currently scheduled training events and to register, go to www.nc-council.org.

### **WEB RESOURCES**

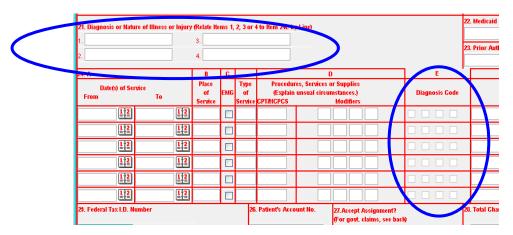
- NC DIVISION OF MH/DD/SAS: <a href="http://www.ncdhhs.gov/mhddsas/">http://www.ncdhhs.gov/mhddsas/</a>
- Mecklenburg AMH: <a href="http://mecklink.charmeck.org">http://mecklink.charmeck.org</a>
- AMH BEST PRACTICES COMMITTEES AND SCHEDULE:
   http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/BestPractice.htm
- Hot Sheet Archive: http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Resources/Provider+Hot +Sheets.htm

### **Examples For IPRS Dually Diagnosed Consumers Enter All Diagnoses in Auth Requests and Claims**

**Authorization Plan Requests**: This form in eCura/Provider Connect gives the user three fields to use when recording Axis I diagnoses, and also provides two fields for recording Axis II diagnoses.

Admission Diagnosis	
DSM Type	ICD-9 🕶
I.	318.0 🔽 313.81 🗆 🗆
$\Pi$ .	
Ш.	
IV.	
V.	
Discharge Reason:	<u> </u>
Discharge Diagnosis	
DSM Type	ICD-9 V
DSM Type I.	ICD-9
• •	ICD-9 V
I.	
I. П.	
I. II. III.	

**HCFA/CMS 1500 Claim Forms:** This form in eCura/Provider Connect allows the user to record up to four diagnoses (box 21) and for each claim line select any of them or all as applicable to the service. It is very important to complete both steps – enter all diagnoses in box 21, and then check all of them in box 24E.



**837 Files**: Roughly 50% of the Mecklenburg LME network providers use this HIPAA transaction set, accounting for roughly 80% of all claims submitted. The 837 file provides multiple placeholders for diagnoses and in cases of cross-disability, all should be used.



### Motivational Interviewing Training: Therapeutic Techniques for Enhancing Compliance Facilitator: Brett Engle, PhD, LCSW

DATES:

SESSION I: July 19-20 (9 am-4 pm) 13 hours Cost:\$57.00. Registration begins at 8:30 am -- LOCATION: Mélange Health Solutions, LLC, 107 Scaleybark Road, Charlotte, NC 28209 - (704)567-8690

SESSION II: July 21-22 13 hours Cost: \$57.00. Registration begins at 7:30 am

(July 21: 8 am-5pm - July 22: 8 am-1pm)

--LOCATION: Holiday Inn University, 8520 University Executive Park Dr., Charlotte, NC 28262, (704) 547-0999

SESSION III: July 26-27 (9 am-4pm) 13 hours Cost: \$57.00. Registration begins at 8:30 am --LOCATION: Mélange Health Solutions, LLC, 107 Scaleybark Road, Charlotte, NC 28209 - (704)567-8690

SESSION IV: July 28-29 Cost: \$57.00. Registration begins at 7:30 am 13 hours

(July 28: 8 am-5pm - July 29: 8 am-1pm)

--LOCATION: Holiday Inn University, 8520 University Executive Park Dr., Charlotte, NC 28262, (704) 547-0999

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal)

Training is limited to 75 persons per session.



Assistant Professor Barry University

Brett Engle joined the Barry faculty in the fall of 2007. He received his PhD in social welfare from Florida International University, where he conducted a National Institute of Health sponsored study on adolescent substance abuse group treatment. This study examined relationships among group leader empathy, group member commitment language, peer responses to commitment language and substance use outcomes. Dr. Engle's research interests include adolescent health risk behaviors, the group modality, process research utilizing discourse analysis, and the motivational interviewing and social learning theory based constructs of commitment language and other change talk Brett Engle, PhD, LCSW and deviancy training. He is a member of the Motivational Interviewing Network of Trainers and is actively involved with the Association for the Advancement of Social Work with Groups.

Dr. Engle takes an inquiry and Socratic approach to teaching in the classroom. He teaches practice courses and emphasizes the integration of research and practice and evidence-based practice.

Dr. Engle is originally from Oregon. He received his BS in Psychology and MSW from Boise State University. He has field experience providing housing, substance abuse, mental health, and home health care services for a range of client populations. He is also a Licensed Clinical Social Worker in the state of Florida.