

COMPLIANCE BULLETIN

Fresno County Behavioral Health

Publication Date: 12/28/2023

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POLICY NOTICE

- ❖ Policy Being Summarized
Updated Documentation
Requirements for MH and
SUD Services
- ❖ CB-Updated Documentation
Requirements for MH & SUD
- ❖ Effective date:
January 1, 2024
- ❖ Policy created by:
Bulletins and News, CalAIM
Information, Compliance
Bulletins, Department Of
Behavioral Health

This Compliance Bulletin impacts the entire system of Behavioral Health.

The Department of Health Care Services (DHCS) released BHIN No: [23-068](#) to help streamline and standardize clinical documentation requirements for Specialty Mental Health (SMH) and Drug Medi-Cal Organized Delivery System (DMC-ODS) Services.

SMHS

- Providers are reminded and directed to complete assessments expeditiously, with consideration for the needs of the person served. A crisis assessment does not have to be a comprehensive assessment but may not be used as a basis for ongoing treatment.
- CANS summary - Every assessment completed for a person served under the age of 21 must include a new or updated CANS.
- All persons served receiving SMHS after July 1, 2022 must have a problem list. The problem list shall include current ICD clinical modification codes. Any service provided prior to July 1, 2022 does not require a problem list.
- Progress note timeliness: Providers shall complete progress notes within three (3) business days of providing a service, with the exception of notes for crisis services, which shall be completed within one (1) calendar day. The day of the service shall be considered day zero (0).
- Providers shall complete at minimum a daily progress note for services that are billed on a daily basis (i.e., bundled services), such as Crisis Residential Treatment, Adult Residential Treatment, DMC/DMC-ODS Residential Treatment, and day treatment services (including Therapeutic Foster Care, Day Treatment Intensive, and Day Rehabilitation).¹⁸ If a bundled service is delivered on the same day as a second service that is not included in the bundled rate, there must also be a progress note to support the second, unbundled service.

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- To support delivery of coordinated care, the provider shall be able to produce and communicate the content of the care plan to other providers, the member, and Medi-Cal behavioral health delivery systems, in accordance with applicable state and federal privacy laws.
- Recoupments shall be focused on identified overpayments and fraud, waste, and abuse.

DMC-ODS

- Refer to the attached PowerPoint that was presented at the Monthly SUD Provider Q&A held on November 29, 2023, and sent via email to providers on December 4, 2023.