



ARTIST CREDIT: CHRIS F., BLUE SKY WELLNESS CENTER

It's officially Fall, and as the seasons change, everything old is new again! Here is what's new this month at Managed Care.

NEW CMS 1500 (aka HCFA) Form Effective October 1

In September, we gave you *Tips for Smooth Billing*, providing you direction in how to fill out the Health Insurance Claim Form, aka the CMS 1500 or HCFA. Effective October 1, all claims also will need to be submitted via the new CMS 1500 form. Though the new CMS 1500 is slightly reformatted and has some wonderful new additions, such as the ability to list multiple diagnoses, the *Tips for Smooth Billing* still apply.

How will you know whether you are using the old or new form? Under the form heading **Health Insurance Claim Form** is printed "Approved by National Uniform Claim Committee (NUCC) 02/12" on the newest version of this billing document.

As always, if you have any questions or need assistance in completing the new CMS 1500, please call us at Managed Care (559-600-4645) and ask for an available Provider Relations Specialist.

Congratulations to Dwayne Howell, Our NEW PRS!

And speaking of Provider Relations Specialists, we are happy to announce that

our PRS team has just expanded to serve you better! In addition to our fabulous PRS team of Arlene Liles and Mark Golden, Dwayne 'Dee' Howell is moving up and is eager to provide you with excellent service. Though new to the PRS team, Dee is a familiar face to many providers as he has been a part of Managed Care for the past 4 years. Congratulations Dee.

NEW Brochures and Postings: Appeals, State Fair Hearings, and Fresno Provider Directory

Available now on our Managed Care Website are new revisions of the *Appeals* brochure in English, Spanish, Hmong, as well as large print versions of each, and a new 8 1/2 by 11 *State Fair Hearing* poster. All individual, group, and organizational providers that offer specialty mental health services to Medi-Cal beneficiaries through the Fresno County MHP are required to have these important resources displayed for clients, most often in your waiting area, but in any freely accessible location in your office or facility.

The newly revised *Appeals* brochure still contains the Appeals Form and an '800' number so that beneficiaries can contact the county Medi-Cal MHP if a request for Medi-Cal specialty mental health service is denied, delayed, reduced, suspended or terminated and the beneficiary is

MANAGED CARE



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unsatisfied. Expanded information on how to also request a State Fair Hearing with the California Department of Social Services has been added to the *Appeals* brochure as well as explained in full on the new *State Fair Hearing* poster.

For organizational providers, also new is the simple but equally important "Provider Directory Is Available Upon Request" posting. Our larger providers should have these 5 1/2 by 8 1/2 postings visible in their waiting areas as well as copies of the Fresno Provider Directory at the reception desk, as beneficiaries of the county Medi-Cal MHP should always be offered a choice of provider upon intake as well as in the course of treatment.

These items, as well as other Managed Care handbooks, brochures and forms can be found under "Brochures/Forms" link on our website.



DOCUMENTATION SPOTLIGHT

Plan Development Q & A

Throughout the month, we at Managed Care answer a variety of questions from our wonderful providers. In our *Documentation Spotlight* this month, here are some questions and answers surrounding Plan Development.

Q At intake we cannot bill plan development until the assessment is complete and the POC is signed. Nothing before the date on the signed POC can be billed to plan development. Is this correct?



A Yes, you are correct. Per Medi-Cal regulations, all planned MH services except assessment and crisis services must be included on an active Plan of Care. Since you started with “at intake,” I am assuming this is the initial assessment and initial POC. Since the POC must be completed at the time of assessment, the plan development service could be the same day as the assessment or following the assessment process. (POC’s need to be completed no later than 60 days following the assessment.)

The reasoning for plan development services only after an assessment is completed is simply that the treatment plan created during the plan development service needs to be based on the symptoms, presenting problems, and medical necessity as documented in the mental health assessment. The consumer and/or guardian’s signatures along with the clinician’s signature is evidence of the consumer’s degree of participation/agreement with proposed interventions. NOTE: The exception to the billing services without a signed POC from the consumer is when the consumer has refused or is unable to sign the POC, which required the clinician to document in a progress note the absence of the signature along with follow-up efforts later to obtain the signature.

Q When updating the POC, can we bill plan development if it occurs during a valid authorization period or can we only bill plan development as of the date on the newly signed (updated) POC date?

A Billing for plan development when

updating the POC depends on whether “plan development” is included on the current POC. Plan development should always be included under interventions on your POC’s, and you will find it listed on the *Fresno County Mental Health Plan of Care* on the same line as “Med Interview (MD)” and “Med Admin.” Do not be confused! The “Plan Development” listed on the *FCMHP Plan of Care* is an intervention that can be completed by the regular MH staff that does plan development.

If “plan development” is included on the current POC, you may bill for this service when updating the treatment plan.

Now, it appears by your questioning that your staff may be billing plan development services over the course of more than one session. If this is the case, it would be unusual, but not incorrect. If your staff bills for plan development over more than one session, there should also be progress notes documenting which portions of the Plan of Care were completed at each service, along with the barriers that precluded the completion of the POC on the first date of plan development; otherwise, multiple billings to create a single POC could be excessive. *This said*, in returning to the second question, **if your staff is updating a POC, but did not include plan development under interventions authorized on the original POC, you may still bill plan development on the date of the newly signed (updated) POC date.**



**FCMHP Provider Training
Webinar Throughout
October: Register Now!**

Please join us via Webinar for a free Provider Training this month! Topics to be covered: Client charge input—Service codes and modifiers for duplicate services on the same day; Katie A service codes and modifiers; and the new CSM 1500 form. Webinar will be offered on 10/2 (2:00-3:00PM), 10/3 (10:00-11:00AM), 10/10 (10:00-11:00AM) and 10/17 (2:00-3:00PM).

To register and receive your webinar login and dial in info, please email Shari Shintaku at sshintaku@co.fresno.ca.us.

Upcoming Community Events

We have several exciting community happenings to share with you, but they are coming up fast! Mark your calendars for the following dates:

Sept. 27 & 28 — Soberstock 8

This two-day free event will take place at the Manchester Mall beginning 5PM on Friday night, 9/27 and continuing Saturday at 9AM. Soberstock 8 will include live music, car show, children’s carnival, guest speakers as well as information about substance abuse treatment and prevention. For more information go to *Community Partners 4 Recovery* on Facebook or visit their website at www.cp4r.org.

Oct. 2 — Send Silence Packing

1,100 students die by suicide each year. At the Campus Mall of Fresno City College from 9AM to 4PM, come experience 1,100 backpacks and personal stories, and join Active Minds in starting a dialogue about suicide and encouraging people to reach out for help before it’s too late. This event is free and open to the public. For more information, contact FCC Psychological Services at 443-8687 or 442-8284.

Oct. 4 — “My Art Matters” The Art Hop at Blue Sky

In promoting wellness, recovery, resiliency, and hope, the County of Fresno’s Mental Health Services Act (MHSA) is proud to exhibit art work in the form of paintings, poetry, photography and other pieces of self-expression created by artists throughout the Valley. Come see the art and meet artists of Fresno County on Thursday, October 3 from 5-7PM. The Art Hop at Blue Sky will take place at the Blue Sky Wellness Center 1617 E. Saginaw Way, Fresno.

You may have noticed the beautiful samples of MHSA artwork that are featured each month at the top of our newsletter. Recruitment of artwork is happening NOW for this event and throughout the year! MHSA would like to see art pieces that reflect wellness, recovery, and journeys of hope in an effort to reduce stigma and discrimination, to educate and create awareness of mental health.

If you have artwork that you would like us to photograph, please call 600-6844 or email David Tijerina at dtijerina@co.fresno.ca.us. For more information you may also go to www.ca.fresno.ca.us/MyArtMatters. If you feel “My Art Matters,” please share it with us!