



The Georgia Collaborative ASO

Documentation 101: Compliance with Service Guidelines/Progress Notes

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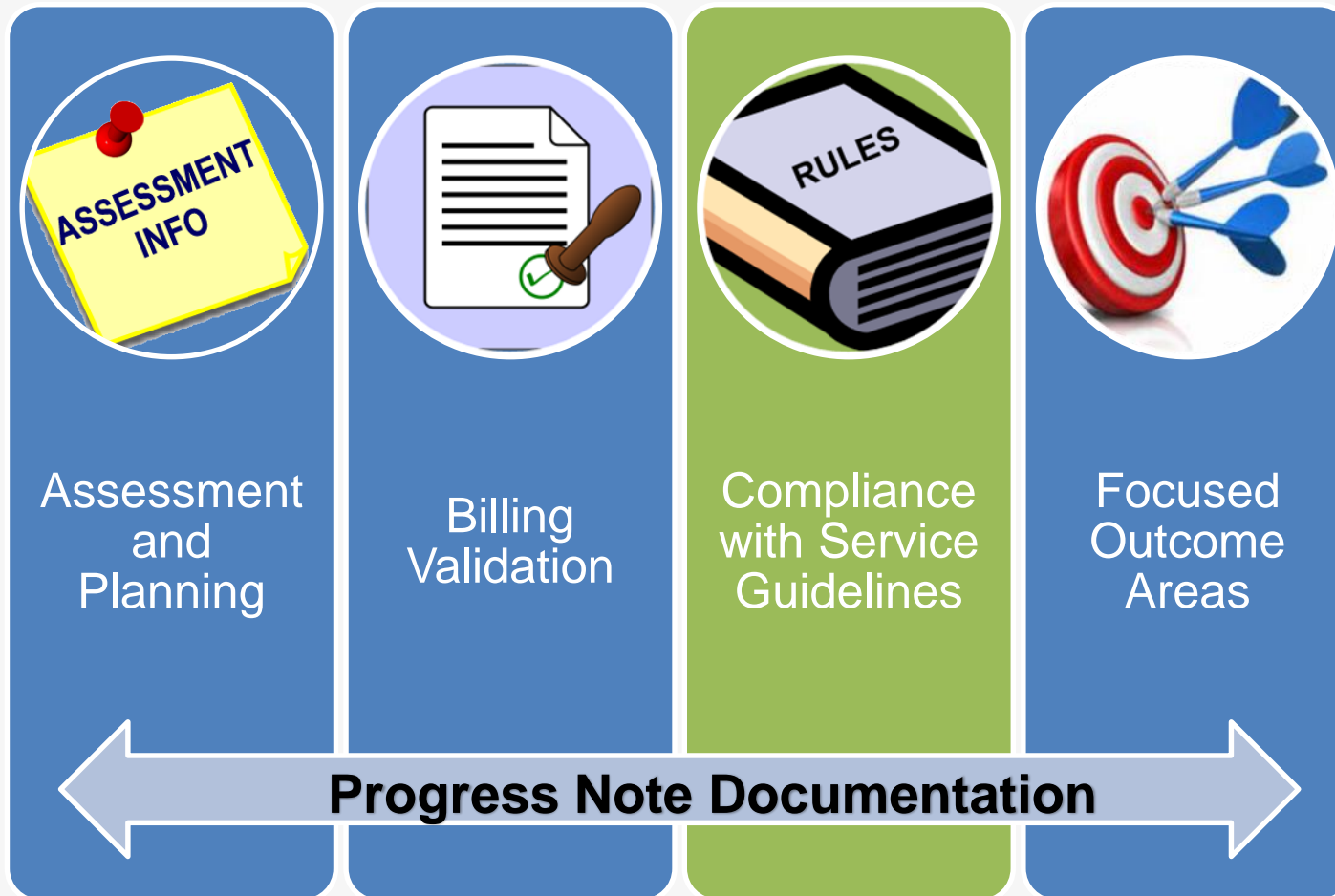
Overview



- 1. Progress Notes: Impact on Behavioral Health Quality Review (BHQR) Scores**
- 2. Purpose and Importance of Progress Notes**
- 3. Required Components of Progress Note Documentation**
- 4. Examples of FY17 BHQR Documentation Issues**
- 5. Putting Knowledge Into Practice - Training Tips**

Progress Notes: Impact on BHQR Scores

Progress Notes impact all scored areas of the BHQR



Purpose of Progress Notes

DBHDD Provider Manual (7/2017, p. 290)

- Progress note documentation includes the actual implementation and outcome(s) of the designated services in an individual's Individual Resiliency/Recovery Plan (IRP)
- Progress note content must provide all the necessary supporting evidence to justify the need for the services based on medical necessity criteria and support all requirements for billing and adjudication of the service claims



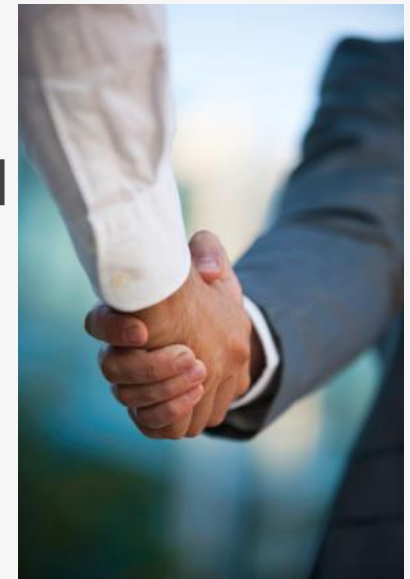
Importance of Progress Notes

DBHDD Provider Manual (7/2017)

- Progress notes are one of three fundamental components of individual-related documentation, along with assessment/reassessment and treatment/supports planning (*p. 283*)
- Review of sequential progress notes should provide a snapshot of the individual over a specified time frame (*p. 290*)

Additionally:

- Provides the primary method of communication and coordination of quality care



Required Components of Progress Notes

Linkage

- Connects the assessment, IRP, and progress note intervention

Individual Profile

- Description of individual's current status

Justification

- Support for need of service

Specific Service Provided

- Detail of all provided activities or modalities

Service Purpose

- Reason individual is participating in services

DBHDD Provider Manual (7/2017, p. 290)

Required Components of Progress Notes

Individual Response to Interventions

- How the individual was affected by the intervention

Monitoring

- Evidence that interventions are occurring and monitored for outcomes

Individual Progress

- Identifying progress toward specific goals/objectives

Next Steps

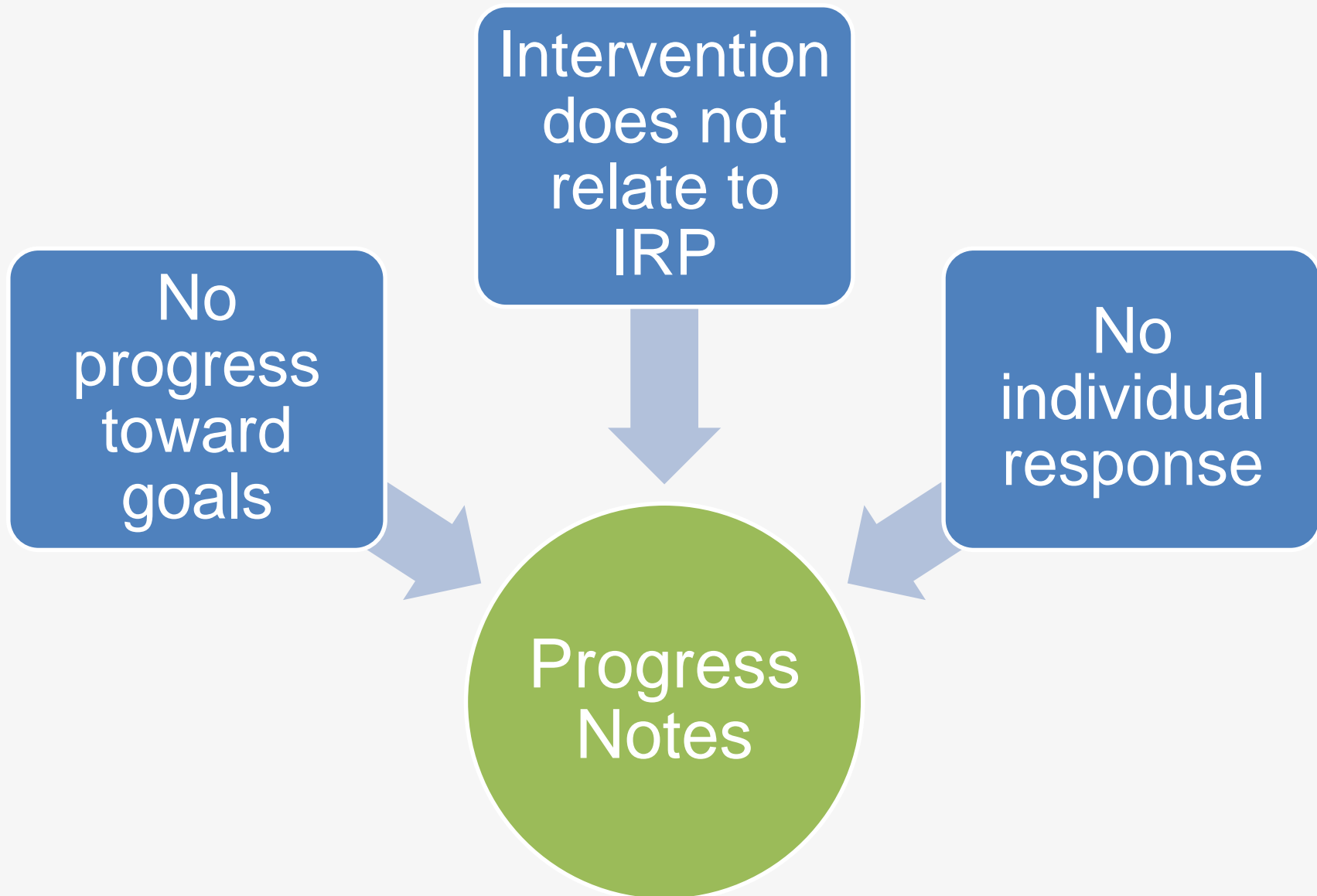
- Plan to support stability

Reassessment/Adjustment to Plan

- Acknowledging need to modify the IRP

DBHDD Provider Manual (7/2017, p. 291)

Compliance with Service Guidelines



Compliance with Service Guidelines

Does Not Contain Progress Toward Goals

- IRP was expired/service not on IRP
- Overall progress towards goals on the IRP was not included

Reminder > Progress toward specific goals/objectives is required of progress note documentation
(*DBHDD Provider Manual, 7/2017, p. 291*)

Compliance with Service Guidelines

Interventions Do Not Relate to IRP

- IRP was expired/service not on IRP
- IRP was not updated to reflect recent change/expressed need

Reminder > Service provision should be provided as outlined within the IRP and updates should be made when needs change
(*DBHDD Provider Manual, 7/2017, p. 289*)

Compliance with Service Guidelines

No Individual Response

- Provider documented overall group participation/engagement rather than the individual's unique response to the intervention

Reminder > Requirements of progress note documentation include: how and in what manner the service, activity, and modality have impacted the individual; what was the effect; and how was this evidenced (*DBHDD Provider Manual, 7/2017, p. 291*)

Compliance with Service Guidelines

Additional issues include:

Not Meeting Minimum Contacts

- Provider did not document when a session was missed, cancelled, rescheduled, or refused

Reminder > Requirements are service-specific per DBHDD Provider Manual

No Skills, Coordination, and/or Training

- Provider billed Community Support and documented skill building without evidence of service and resource coordination
- Provider billed Psychosocial Rehabilitation-Individual and documented service and resource coordination without evidence of skill building

Reminder > Requirements are service-specific per DBHDD Provider Manual

Putting Knowledge Into Practice – Training Tips

- Five Ws and H
- KISS
- Brush Off Your Shoulders!
- Group Notes & The Usual Suspects
- Collateral Contacts with UK Modifier
- Non-billable Notes

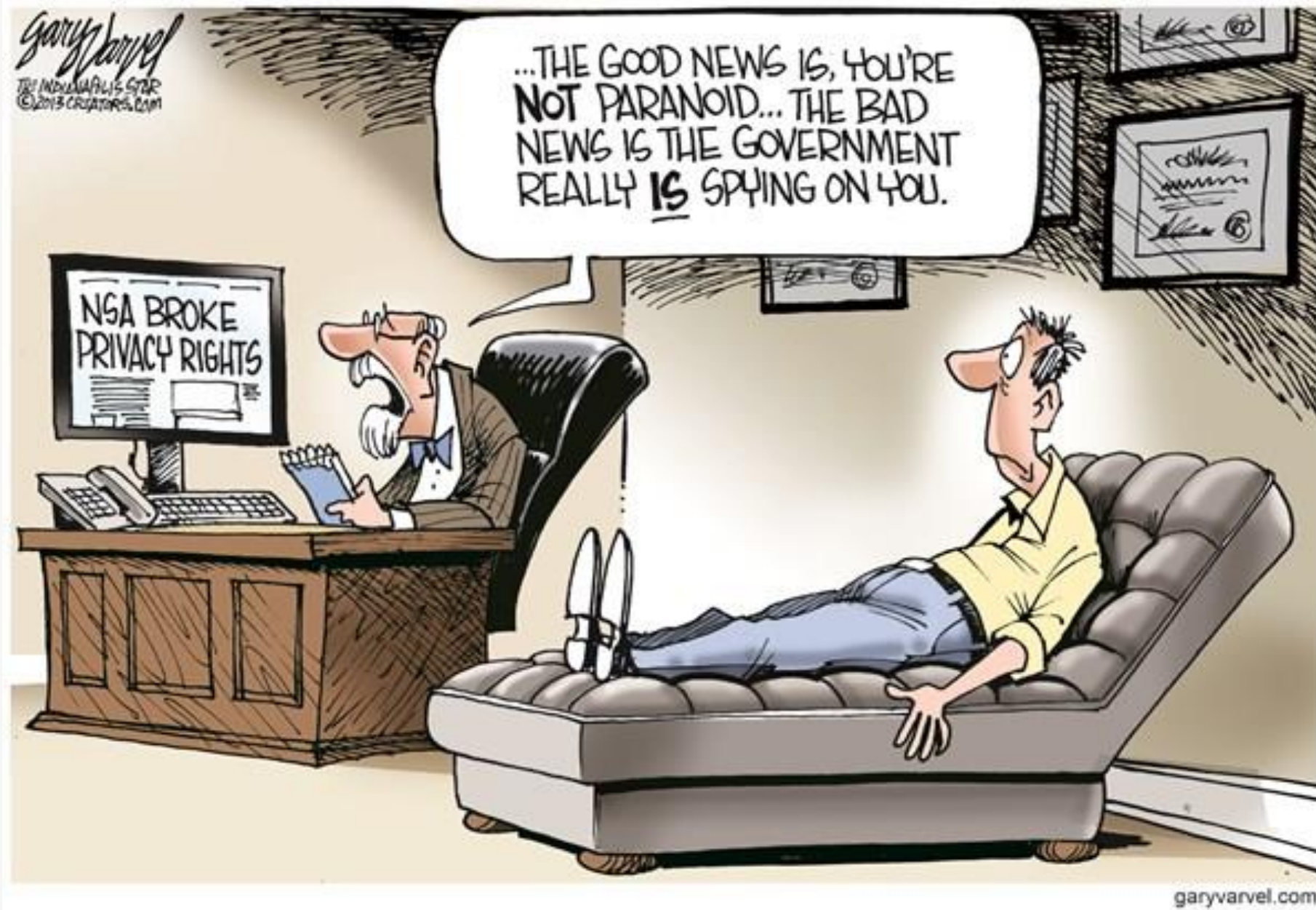
Disclaimer > These are suggested training tips

Training Tips – Five Ws and H

- Who was there?
- What service/intervention was provided?
- When was the service provided?
- Where was the service provided?
- Why was the service provided?
- How was the service provided and received?



Training Tips – KISS



Training Tips – KISS

KISS – Keep It Short and Sweet

- Progress notes are legal documents
- Stick to the fundamentals:
 - a) 5 Ws + H
 - b) Justify units billed
- Avoid writing a transcript of what was said – Do include clinically meaningful quotes
- Time-efficient note writing = better work/life balance = healthy/happy staff = better supported individuals/families 😊



Training Tips – Brush Off Your Shoulders!

- Documents evidenced-based treatment
- Takes the guess work out of writing interventions
- Helps to justify/support:
 - a) Time/units billed
 - b) Service definition
 - c) Fidelity of chosen treatment model
- Bragging rights for the time, money, and effort invested into training and/or certification

Note > If you are not fully certified in a certifiable treatment modality, you **MUST** state you are using “techniques” (e.g., play therapy techniques)

Training Tips – Example

Five Ws & H

Supported
Fidelity of
Treatment Model

Justified Units
Billed

Linkage

Specific Service
Provided

Service Purpose

Intervention: Therapist met with Samantha at her home to facilitate Dialectical Behavioral Therapy (DBT) techniques. Therapist facilitated a guided walking Mindfulness practice. Therapist processed recent exchanges between Samantha and her boyfriend, identifying opportunities for use of DEAR MAN (Interpersonal Effectiveness). Therapist validated Samantha's emotions and explored the use of Self Soothe With Five Senses (Distress Tolerance).

Training Tips – Example

Supported Fidelity of Treatment Model

Justified Units Billed

Linkage

Service Purpose

Individual Response

Monitoring

Response: Samantha was initially resistant, but eventually engaged in Mindfulness practice. With assistance, she regulated her breathing and reported feeling a more regulated heartbeat. Samantha identified her role in the argument, adding that she could see the benefit of DEAR MAN. She also identified the benefit of Self Soothe With Five Senses as a healthy alternative, but admitted screaming and slamming doors “just feels really good.”

Training Tips – Group Notes & The Usual Suspects

JUST OUTSIDE THE BOX



Take your mind back to the evening of the 24 th December.
Which person did you see breaking and entering your house?

Copyright www.justoutsidetheboxcartoon.com

Training Tips - Group Notes & The Usual Suspects

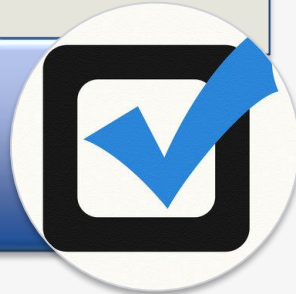
- Did not back out time for breaks, lunch, etc.
- Time overlapped with other services
- Content reflected counseling when billing training (and vice versa)
- Content did not relate to a treatment goal from the IRP
- Did not document individual response and treatment goal progress

Training Tips – Collateral Contacts

When a billable collateral contact is provided, the UK reporting modifier shall be utilized. A collateral contact is classified as any contact that is not face-to-face with the individual
(*DBHDD Provider Manual, 7/2017, p. 85*)

- Sessions with only guardian, paraprofessional (PP), and teacher present
- Telephone contact with the individual
- As a modifier for Case Management, Intensive Case Management, and Community Support Services

When to Use “UK”
Modifier



- Services that are face-to-face with the individual
- As a modifier for Psychosocial Rehabilitation-Individual (PSR-I)

When NOT to Use
“UK” Modifier



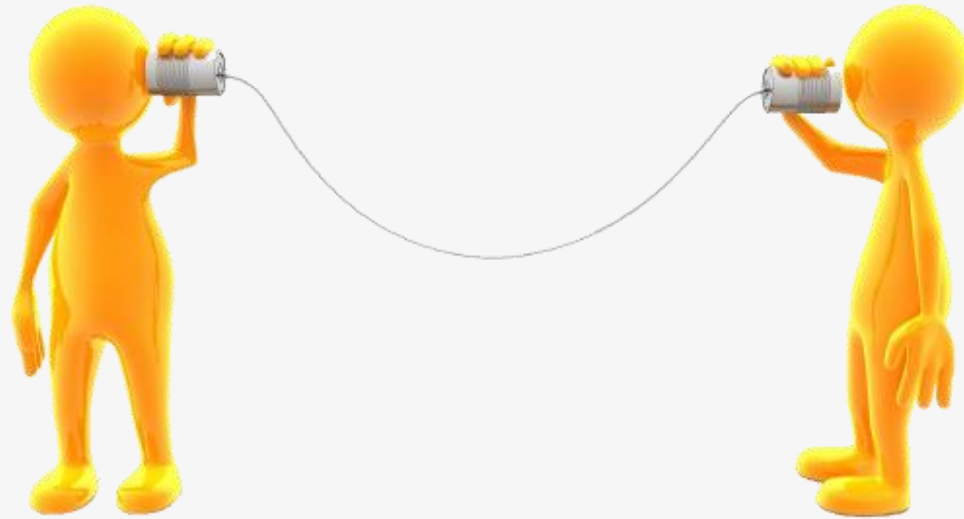
Training Tips – Non-billable Notes

- Document confirmed/cancelled/rescheduled appointments
- Explain gaps in service
- Document attempts to make contact
- Document phone calls less than 8 minutes



***Remember* > Not Documented = Didn't Happen!**

Questions?



Thank you

For Georgia Collaborative ASO general inquiry or questions please email:

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The Georgia
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