



MOTS Messenger, a Newsletter for those using the Measures & Outcomes Tracking System

August 21, 2015

## **OHA is Re-Organizing!**

As you may have heard, the Oregon Health Authority is re-organizing in order to better integrate healthcare for Oregonians. Addictions & Mental Health and the Medical Assistance Programs (MAP) are merging, and will be collectively known as the Health Systems Division.

What does this mean to you as a behavioral health provider? At least initially there will not be much change for you outside of our e-mail signature blocks. Essentially the agency is aligning more closely with the coordinated care model. Over time the information providers enter into MOTS will be used more frequently to answer resource and capacity questions about demand for behavioral health services.

## **Client Entry Webinar**

Please sign up for our next Client Entry Webinar on Wednesday, September 2<sup>nd</sup> at 9 a.m. You will learn more about the upcoming October 1<sup>st</sup> changes in MOTS! To register, go to <https://attendee.gotowebinar.com/register/868041706504833537>

## **Sending Secure Email**

When sending an email to MOTS Support containing Protected Health Information, please be sure you send it via a secure email. If your agency does not have access to a

secure email system, you may go to <https://secureemail.dhsoha.state.or.us/encrypt> and type [mots.support@state.or.us](mailto:mots.support@state.or.us) in the “To” field. This will send the message to us securely.

## **Keep Your Contact Information Current**

*Are you a System Administrator with MOTS? – You have a very important role in your agency!*

System Administrators (SA) are the go between for the agency and us at MOTS Support. If your agency uses Client Entry to submit information to MOTS, the SA is the one that requests that users be given access to the MOTS system. They make sure that a user’s access to MOTS is revoked when a user leaves an agency.

Recently, MOTS Support was made aware that 2 agencies’ MOTS System Administrators were no longer with the agencies. In fact, they had left several months ago, and no one had been updating information in the MOTS database. One agency was unaware of MOTS or that they were required to do reporting.

Do the people in your agency know about MOTS? Make sure that your staff knows about MOTS and what to do if something unexpected happened to their Agency System Administrator. If you are leaving your agency as the System Administrator, please be sure to assign a new SA and let us know of the change. Also be sure that the agency/facility profile pages are updated in MOTS.

Our Website has a Checklist for System Admins in the resources section –you can use this to help pick your next SA.

<http://www.oregon.gov/oha/amh/mots/Pages/resource.aspx>;

Questions? Contact us at [MOTS.Support@state.or.us](mailto:MOTS.Support@state.or.us)

## **Using Incarcerated Status**

Does your facility provide services for clients in a Correctional Institution? If so, please use **Active** Status in the client Treatment Status Field when entering client data in MOTS. Do not use the status of **Incarcerated**. Or if it is for an Assessment –then use the **Assessment Only** Status.

We like to know who is actively receiving treatment for your program. If a client’s treatment status shows incarcerated, it means he/she has stopped receiving services

because he/she went to prison/jail. So keep the client in Active Treatment Status for as long as he/she is in your program. When a client leaves the program, please use the appropriate Status of either **Treatment Completed; Left Against Professional Advice; Service Discontinued by Facility; Incarcerated** or **Transferred to another Program or Facility**. These treatment statuses show that the client is inactive in your program.

If the client returns to your program, then start a new treatment episode.

In summary, when entering clients into MOTS for any type of facility, be sure to use **Active** Treatment Status. **Incarcerated** Status should only be used when a client *leaves your facility* for treatment because they went to a prison/jail. It should not be used if the client is receiving treatment in a prison/jail. Feel free to adjust their Living Arrangement and/or legal status to show they are incarcerated.

### **MOTS is Ready for ICD-10; Are You?**

This month, in the background, the ICD-10 codes and all the functions that will allow the switch over from ICD-9 to ICD-10 will be loaded into MOTS. The MOTS team is excited to work ahead of the deadline and look forward to a smooth transition from one code set to another.

One thing to keep in mind, particularly for Client Entry users, is to make status updates to clients before the October 1, 2015 deadline. Before that date you can only use ICD-9 diagnosis codes. After that date, you will be forced to use ICD-10 codes even if the status change happened before the October 1 deadline.

ICD-10 is one of the main topics of our September 2<sup>nd</sup> Webinar where various scenarios will be reviewed, so please sign up by using the registration link in the article on page 1.

Thank you for reading this newsletter. If you have ideas or questions you want addressed in future newsletters, please let me know.

– Marc Janssen, Health Systems Business Analyst, 503-945-6185, [marc.r.janssen@state.or.us](mailto:marc.r.janssen@state.or.us)