
Mental Health Adult Residential Standardized Rate Implementation

Updates & Question & Answer session

September 30, 2019



HEALTH SYSTEMS DIVISION
Adult Mental Health Services

What we will cover today

- Lessons from regional site visit 9/5/19 re Documentation
- References to Board of Nursing re Delegation
- Updates
- Questions and Response on webpage
- New questions via chat function

Regional technical assistance & site visits – Lessons to learn & share

- OHA initiating regional technical assistance visits
 - Washington County 9/5/19 - **LESSONS**
 - Central Oregon (Deschutes) – Tentative October 23
 - Eastern Oregon – TBD November (weather permitting)
 - Southern Oregon – TBD (weather permitting)
 - Willamette Valley TBD (a) south valley - Lane; (b) mid-valley – Marion-Polk; metro tri-county

OR Board of Nursing re RN Delegation

- <https://www.oregon.gov/OSBN/Pages/Delegation.aspx>
- Elements of Delegation
- Only RNs can delegate tasks of nursing care. Only the task is delegated; assessment and judgment cannot be delegated.
- Refer to **Board of Nursing** page for Assessment Components, Teaching Components, Written instructions, Documentation Components, Periodic inspection, supervision, re-evaluation

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OR Board of Nursing re RN Delegation - 2

- <https://www.oregon.gov/OSBN/Pages/Delegation.aspx>
- **Written instructions:**
- A specific, detailed outline of how the task of nursing is to be performed, step-by-step.
- Signs and symptoms to be observed
- Guidelines for what to do if negative signs and symptoms do occur.
- That the caregiver understands the risk involved in performing the task and knows the plan for dealing with the consequences.
- To whom the caregiver reports negative signs and symptoms or concerns

Updates

- OHA monitoring & facilitating LSI variances, capacity changes, claims issues
- Retainer payments & Non-Medicaid invoicing
- Direct email questions to ABH Residential Capacity Reporting
ABH.ResidentialCapacityReporting@dhsoha.state.or.us
 - Specify in Subject Title: Retainer; Capacity; Intensive Services; Question
- Developing data on tier distribution, LSI variance & inflation; capacity, retainer payment frequency
- Continuing monthly provider webinars - October 29, 2019 2:30-3:30
- COMING late October: Updates on IQA transition planning

INDIVIDUAL ASSESSMENTS (LSI)

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IQA & LSI hierarchy during July-December implementation & IQA transition

HCBS & 1915i requires independent assessment = IQA LSI & PCSP

- Prior to standardized rates IQA & CMHP/Provider LSIs generally within 3 points per third party analysis

During July-December implementation and IQA transition:

A. IQA LSI if available

B. County/CMHP LSI by QMHP if IQA LSI not available

C. If IQA & County/CMHP cannot do LSI timely, then County/CMHP can temporarily delegate to provider QMHP or equivalent, only with County review and sign-off of assessment

Update: Rate Review process & Lessons to date

- Additional discussions with individual providers about examples for the LSI Domains, examples of Domain 1 ADLs, Domain 2 IADLs, etc.
- OHA staff is annotating the LSI manual for adult and young adult examples to post to the Rate Standardization website <https://www.oregon.gov/oha/HSD/OHP/Pages/MH-Rates.aspx>
- Lesson from joint OHA-KEPRO-provider discussion: Domain 1 nurse delegation cannot be rated without documentation of the RN delegation.

Question & Response posted to webpage

- <https://www.oregon.gov/oha/HSD/OHP/Pages/MH-Rates.aspx>
- Documentation
- IQA
- Intensive Services
- LSI
- Non-Medicaid individuals (invoicing)
- Mental health rehabilitative services
- Retainer Payment

NEW QUESTIONS VIA WEBINAR CHAT

Adult Mental Health Residential Treatment rate standardization

RESOURCES

LSI – Domain 1 ADL Tasks

For each domain, please rate the type of support the member requires to perform or practice the skill.

Domain 1: ADL tasks		Assistance and training to perform skill	Support and training to practice skill	Prompts or supervision to practice skill	Practices skill independently (N/A)
1	Maintain personal hygiene	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
2	Self-manage medication	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
3	Use and maintain adaptive or medical devices including catheter (change, clean, empty)	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
4	Feed self	4 <input type="radio"/>	3 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
5	Ambulate and transfer	5 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
6	Use toilet and care for bowl and bladder	5 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
7	Delegated nursing tasks (see OAR 411-034-0010)	5 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
Subtotal					
Domain 1 Total					

LSI – Domain 2 IADL tasks

Domain 2: IADL tasks		Assistance and training to perform skill	Support and training to practice skill	Prompts or supervision to practice skill	Practices skill independently (N/A)
8	Manage finances and budget	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
9	Plan and prepare meals	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
10	Clean and maintain residence	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
11	Independently access transportation	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
12	Manage and attend medical or health appointments	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
13	Maintain compliance with court or legal requirements	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
14	Plan and participate in social, recreational or community activities	2 <input type="radio"/>	1 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
Subtotal					
Domain 2 Total					

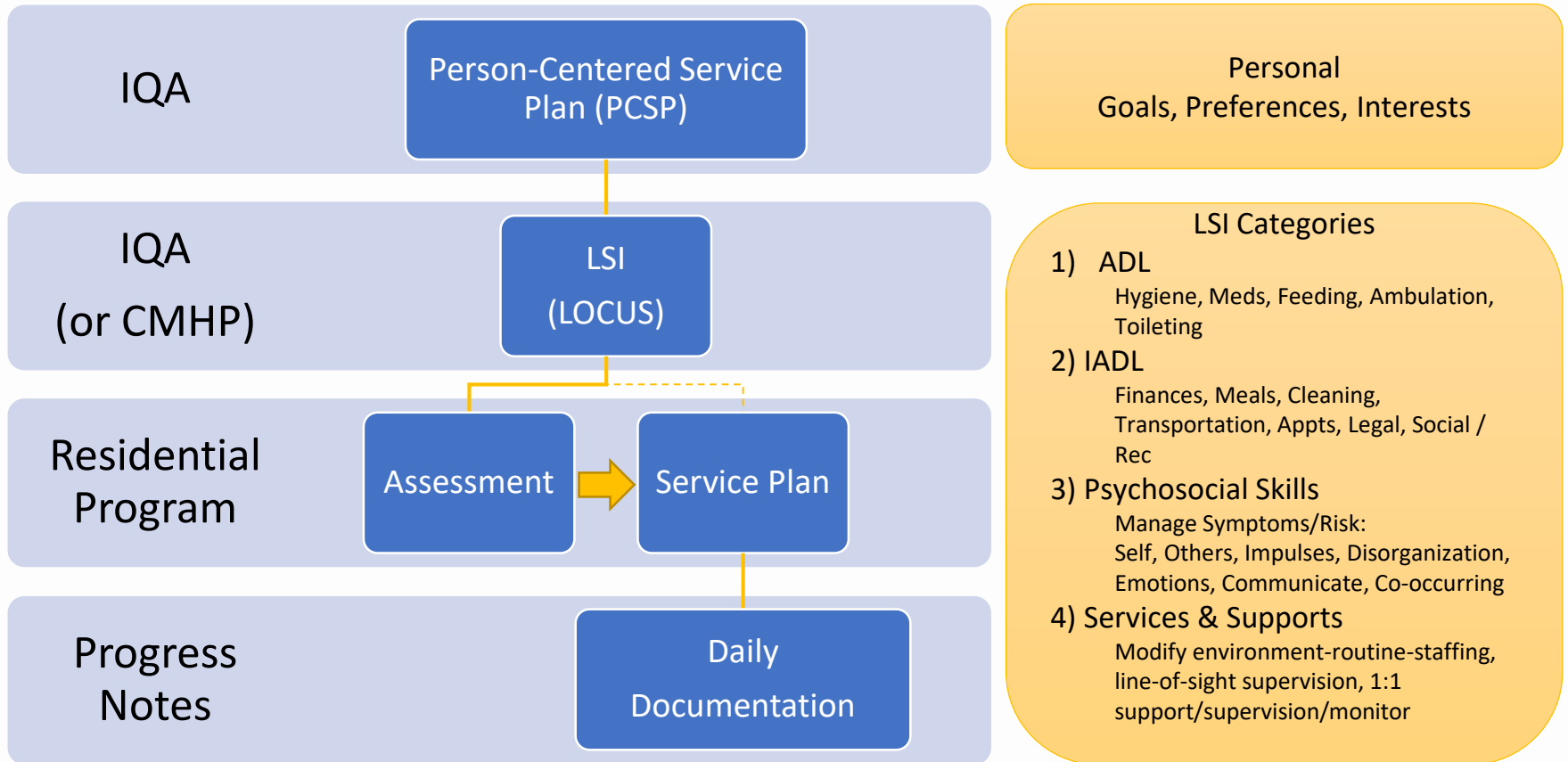
LSI: Domain 3 – Psychosocial skills

Domain 3: Psychosocial skills		Assistance and training to perform skill	Support and training to practice skill	Prompts or supervision to practice skill	Practices skill independently (N/A)
15	Manage symptoms that pose a physical risk to self	6 <input type="radio"/>	5 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>
16	Manage symptoms that pose a physical risk to others	6 <input type="radio"/>	5 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
17	Manage symptoms that reduce ability to control impulses	6 <input type="radio"/>	5 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
18	Manage symptoms of delusional or disorganized thinking	5 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
19	Manage symptoms of emotional excess	5 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
20	Communicate effectively with others	3 <input type="radio"/>	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
21	Manage comorbid or co-occurring condition	5 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
Subtotal					
Domain 3 Total					

LSI: Domain 4 - Person-centered services & supports

Domain 4: <i>Person-centered services and supports</i>		Number of hours required daily:			
		16-24	15-8	0-7	None
22	Modify physical environment, program routine or staffing pattern	6 <input type="radio"/>	4 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
23	Provide line of sight supervision in milieu or community	4 <input type="radio"/>	3 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
24	Provide 1:1 support, supervision and monitoring	6 <input type="radio"/>	5 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>
Subtotal					

The Golden Thread



Residential Plan of Care

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home **search**

POC Search ? ^

From Date To Date

Client ID

Service Code:
Procedure code T1020

Dollars: Individual's per diem rate

Search Results

Client Name	Service	Mod 1	Mod 2	Mod 3	Mod 4	Effective Date	End Date	Balance Units	Balance Dollars	Status
	Personal care ser per diem	HK				01/01/2019	12/31/2019	365	\$230.00	Active

Detail ? ^

Service Auth Number	Service Code Type SPC	Units 1
Referring Provider ID	Service Code T1020	Unit Qualifier SERVICE
Referring Provider Name	Service Description Personal care ser per di	Frequency DAILY
Rendering Provider ID	Modifier 1 HK	Dollars \$230.00
Rendering Provider Name	Modifier 2	Payment Method Pay Unit Fee Price
Client ID	Modifier 3	Status ACTIVE
Client Name	Modifier 4	Notice Date
Benefit Plan State Medicaid Mental Health Services	Effective Date 01/01/2019	Appeal Indicator N
	End Date 12/31/2019	Used Units 0
	Close Reason	Used Dollars \$0.00
		Balance Units 365
		Balance Dollars \$230.00

Client Liability

*** No rows found ***

Dates approved for this Plan of Care. Only bill for dates of service on or between the **Effective date** and **End date**.

How to bill at the individual's per diem rate:

- OHA will update POCs with the appropriate rate for the resident's acuity tier (based on the resident's LSI score).
 - Tier 2: LSI 40 or below
 - Tier 3: LSI 41-60
 - Tier 4: LSI 61 and above
- The table below shows how to bill for Tier 3 and Tier 2 individuals for July 2019 at the per diem rate (refer to the POC for the rate).

Roster	LSI	Tier	Per diem rate	From Date of Service	Thru Date of Service	Units	Total Billed
Individual 1	43	3	\$246.80	7/1/2019	7/31/2019	31	\$7,650.80
Individual 2	38	2	\$160.07	7/1/2019	7/31/2019	31	\$4,962.17

Modifiers

- Please use the appropriate procedure code modifiers when requesting services and submitting claims.
 - **HK:** For all services provided in OHA-licensed residential treatment programs use as modifier 1 on the claim.
 - **HE:** For services provided in non-secure settings licensed for 6-16 individuals use as modifier 2 on the claim.
 - **TG:** For services provided in any setting licensed as secure, use as modifier 2 on the claim.
 - **HW:** For services provided to 1915(i) HCBS individuals use as modifier 3 (when reported with HE) or modifier 2 (when reported with HK only).

Provider Web Portal View

InterChange Government Health Portfolio **MMIS PROVIDER PORTAL** Session valid through: Tue Aug 27 2019 8:54:28 AM Tuesday, August 27, 2019

Home Contact Us Directory Search Clients Account Claims Eligibility Trade Files **Prior Authorization** Providers POC Help

home search **new**

Base Information

Provider XXXXXXXX MCD

Base Information ?

Client ID*	<input type="text"/> [Search]	PA Assignment*	<input type="text"/> ▼
Last Name		Special Considerations*	No ▼
First Name, MI		Referring Provider ID	<input type="text"/> [Search]
Date of Birth		Attachments*	No ▼
Vendor Patient Account Number	<input type="text"/>	Clerk	

-Diagnosis Code- Select row below to update -or- type data below to add.

*** No rows found ***

Diagnosis Number	<input type="text"/>	Diagnosis Code	<input type="text"/> [Search]
Diagnosis Name			

delete add

next

(Enter) DEPARTMENT (ALL CAPS)
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Retainer Payment - Reminders

- Check PA status in MMIS a day or two after you submit.
- If PA status is still “Evaluation” open the PA and read External Text section. You may see “Retainer Payment (RP) form not attached” which should prompt you to attach the RP form.
- If the RP form is incomplete, then the status will be changed to “Information Received” and you must review the External Text.
- If PA is complete and we are waiting for the client to return, then the status will be changed to “Ready for Review”
- If PA is a duplicate the status will be changed to “Withdrawn” and you will have to go back in to the original PA and update the original PA

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Retainer Payments - REMINDERS

- In the Base Information section for the Division field select “HSD-MH Retainer Payment” from the drop-down selections.
- Do not add any Diagnosis Codes in the Base Information section, otherwise the PA cannot be approved.
- In the Line Item section enter all modifiers that apply to the home/facility.
- Once the PA is Approved then you can submit a claim for payment

Tier 5 Intensive Services Requests

- LSI 80+
- Complex Needs Not Captured by LSI
 - High Risk Individuals
 - Assaultive History
 - Fall Risk
 - Impulsivity
 - Intensive Medical treatments/Therapies
 - Cognitive Issues

Criteria

- Intensive Services Based on Medical Needs
 - At least 1:1 full assistance to:
 - Use and maintain adaptive or medical devices
 - Assistance with catheter/ostomy care
 - Delegated nursing tasks
 - Feeding
 - Mobility, transfers, or repositioning
 - Toileting, bowel or bladder care

Criteria-Cont.

- Intensive services based on behavioral/psychiatric/cognitive needs
 - 1:1 supervision in excess of 7 hours/day
 - More than 1:1 supervision to maintain community safety
 - Communication deficits requiring substantial intervention
 - Documented pattern of decompensation without proposed intensive supports

Required Documentation

- Most recent LSI and LOCUS
- Current Treatment Plan
- Current Person Centered Service Plan
- Current Mental Health Assessment
- Current History and Physical (for rate requests based on medical needs)
- Current Risk Assessment (if applicable)
- Relevant Incident Reports

Required Documentation – cont'd

- Last 60 days' Worth of Progress Notes
- One Page Explanation of How the Proposed Services Meet Needs in PSCP
- One Page Synopsis from CMHP/Choice Contractor Affirming the Need for the Proposed Services
- Completed Intensive Services Rate Determination Request Form

Submit to MentalHealth.ResidentialTransition@dhsosha.state.or.us.

Daily documentation of engagement

- Note activities related to individual's PCSP and treatment plan
- Direct care “active engagement”: the explicit direct care staff work in **Active Engagement Hours** provided by direct care staff work to support personal care and habilitation including ADLs and IADLs.
 - (i) Active engagement may include individual or small group staff providing habilitation services.
 - (ii) Staff engagement may occur before, during or after an individual's ADL and IADL activities, and may include engagement about offsite activities.
- **Supervision Hours** includes the shared hours overseeing patients' general activities throughout the day.
 - Supervision Hours are shared and relatively passive compared to engagement.

Billing resources

- **For detailed instructions on how to complete a web portal claim**, view the [Professional Billing Instructions](#) posted at:
 - The OHP Billing Tips page at www.oregon.gov/OHA/HSD/OHP/Pages/Billing.aspx or
 - The Behavioral Health provider guidelines page at www.oregon.gov/OHA/HSD/OHP/Pages/Policy-BHS.aspx.
- **If you need help with billing or resolving claims**, contact Provider Services:
 - Phone: 800-336-6016
 - Email: DMAP.ProviderServices@dhsoha.state.or.us

For more information

Questions?

All recent OHP rulemaking notices are posted at
www.oregon.gov/OHA/HSD/OHP/Pages/Rule-Notices.aspx

Email:

- ABH Residential Capacity Reporting
ABH.ResidentialCapacityReporting@dhsoha.state.or.us
- Specify in Subject Title: Retainer; Capacity; Intensive Services; Question

Website:

- <https://www.oregon.gov/oha/HSD/OHP/Pages/MH-Rates.aspx>