

YOU Be the Auditor!

Clinical and Personnel File Examples



Marie & Mark Presentation Handouts

CBH Compliance Forum

November 8, 2018

CBH Compliance Department Audit Codes 3.1.2018

Includes* - Examples are not exhaustive

B	Billed to Incorrect Service Location OR Service Type Error (Differs from Upcoding) Description: The service type billed must match the type of service delivered (Differs from Upcoding in that there is no financial advantage to the billing) Billing must reflect the correct program, including PROMIS# and CBH Child #, and service location
C	Date Error Description: The date of service must be consistent between the documentation and billed claim
D	Discrepant Information Description: Information contained within a clinical record must be consistent. Documentation is considered discrepant when it contradicts information within the same note, other notes, or other charts, either at the same or another provider. Includes overlapping clock times, including electronic medical record (EMR) entry times
E	Services Provided by an Excluded Individual or Entity Description: Medicaid prohibits payments for services by entities or individuals who are barred from participating in federally funded healthcare programs (including Medicaid) as identified in the List of Excluded Individuals and Entities, System for Award Management, and State Medicaid lists
G	Group Size Not Noted or Exceeds Allowable Number of Participants Description: The number of participants in a group must be documented on the progress note and cannot exceed the allowable number
H	Upcoding Description: Services cannot be billed by using a CPT Code or Service Type for a more expensive service than was performed
IC	Insufficient: Clinical Description: All billed dates of service must have adequate documentation that reflects the treatment rendered. The content of the note must contain clinician interventions, client response, plan for future session(s), and support the duration of time billed
ID	Insufficient: Documentation Description: Documentation must contain required elements: Documentation is missing required elements: Lacks date of service; Lacks original, non-photocopied signature; Contains signatures that are photocopied or pre-printed; Documentation is not original (photocopy); Client not identified on each page; Illegible; Signatures, if not legible, should be accompanied by a printed name or name stamp; Note was not completed, signed, and/or entered into the clinical record within seven days or before the claim was submitted to CBH, whichever occurred first; Improper corrections; Client identifying information not clearly documented on all pages in the clinical record; Document lacks required signature(s); Documentation lacks required co-signature(s) for Interns; Lacks Encounter Form (for recipient verification of service) for required level of care
M	Missing Documentation Description: The clinical record must be complete and accurate. Treatment progress notes, signed and dated by the individual providing the service, shall be completed for each service provided
N	Non-Billable Activity Description: All billed services must be reimbursable by Medicaid

O	Clock Times Not Documented	
	Description:	For all levels of care with services measurable in units of time, documentation must include accurate start and end clock times including a.m./p.m. or military time designation
P	Service Exceeds Allowable Contacts per Time Period	
	Description:	Services cannot exceed allowable number of contacts
Q	Services provided by an unqualified individual	
	Description:	Staff will meet the minimum requirements of the position description guidelines established by Federal, Commonwealth, and CBH standards, as well as the provider's own job qualifications
R	Re-use of Content	
	Description:	Documentation must be original and accurately describe the individual's treatment experience for the billed service
	Includes: *	Content is taken from a textbook or website; first time a note is seen, will allow, all future notes re-using the content will be included in the variance For treatment plans, use T1xplan code instead
S	Services Not Rendered	
	Description:	Services must be provided in order to be billed
	Includes: *	Member deceased, documented as absent, no show, present but no services provided; Falsified documentation; forged encounter forms
T	Treatment Plan Concerns	
	Description:	Treatment plans must be developed, updated, and signed by all appropriate persons as required for each level of care. Refer to the Treatment Plan section of the CBH Compliance Manual for detailed information. Services provided shall be consistent with goals and interventions identified in the current treatment plan.
	Includes: *	Missing plan to cover date of service, provided service is not prescribed on the treatment plan as a modality, plan is not signed by required parties at all or in a timely manner, lack of or re-use of content in updated sections, repeated goals without any clinical explanation of their continuation
U	Unit Error	
	Description:	The units of service billed must equal the units of service documented in the clinical record.
	Includes: *	Providers who have units of service defined as time specific periods must provide the full time period in order to bill for a unit of service. Providers are not permitted to round the unit of service to the next higher unit when providing a partial unit of time. Providers are not permitted to combine partial time units to equal a full unit of service. Providers who have units of service defined as time specific periods must document in the patient's record, the clock time spent providing the service (i.e. 7:15am to 8:15am) (Applies to all levels of care except Intensive Case Management and Resource Coordination Programs, which can round up the first unit of service)
Y	Unbundling Codes	
	Description:	Billing One Encounter as Two Service Events/Types; The provider may not, either directly or indirectly, submit a duplicate claim for services or items for which the provider has already received or claimed reimbursement.

Example Note #1

(Billed as one hour OP MH Family Therapy with Psychiatrist)

Outpatient Therapy Progress Note

Type of Service Provided:

Individual Therapy: _____ Family Therapy: X Group Therapy: _____

Date: 7/7/18

Time: Start: _____ am/pm End: _____ am/pm

Client Name: David Roberts

Session Information:

Data: William states that he is working the program and doing well. He states he went to a friend's over the weekend and is following all treatment recommendations.

Assessment: William's mood and affect are normal. He is dressed appropriately in his parka for the snowy weather. He continues to do well in the program.

Plan: William will return next week.

Counselor Signature: _____

Counselor: Bob Nicholson, BA

Example Note #3
(Billed as 12 Units IOP)



Drug and Alcohol Treatment Provider

1234 Main St. Sunshine Point, PA 54321
Phone: (555)855-1691 Fax: (555)955-1657

IOP Progress Notes

Service Date: 8/1/2018 **Start Time:** 9:00 a.m. **End Time:** 12:00noon

Service Type: Group Therapy

Clinician(s): Dwight Halpert, M.S.

Therapeutic Intervention:

Today's topic of discussion was the technique called "Opposite Action", in which a person experiencing strong negative feelings engages in the opposite behavior, or a behavior that challenges those feelings, in order to redirect attention. Participants were given examples and asked to discuss any times in their lives when they may have used opposite action.

After the introduction of Opposite Action, the participants engaged in an activity to practice the technique. The counselor had participants express anger, sadness, and anxiety and asked them to think of ways they could implement Opposite Action to combat their negative feelings. As the session ended, participants were encouraged to use their Opposite Action techniques between now and the next session. The counselor asked if there were any additional questions surrounding the technique and the participants stated there were no additional questions.

Group Response:

The group's participants seemed engaged during the Opposite Action activity, often raising their hand to participate. The group laughed at times but reflected on the fact that while the situations may be exaggerated, the action itself could be useful in the real world.

Individualized Response:

Larry was able to demonstrate Opposite Action during today's session. Larry was 3rd to volunteer to demonstrate Opposite Action. Larry's initial negative feeling was anger. Larry began by expressing to the group that driving in traffic makes him angry. He disclosed that he often curses at other drivers and calls them negative names. It was suggested to Larry by another participant that, instead of calling the other

Example Note #3
(Billed as 12 Units IOP)



Drug and Alcohol Treatment Provider

1234 Main St. Sunshine Point, PA 54321
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drivers negative names, he should try calling them funny names like "Bozo" and "Booger Head". This made Larry and the other participants laugh. Larry was able to demonstrate using Opposite Action by first being angry, then calling one of the pretend drivers "Bozo".

Plan for Next Session:

Counselor will review the use of Opposite Action and discuss any questions/comments/challenges the participants may have had with the use of Opposite Action in their daily lives. Next session will focus on the introduction of coping mechanisms using the 5 senses. The counselor will bring in a box full of items to help the participants make connections to the 5 senses and see how they can each be used to help cope with stressful situations.

Dwight Halpert, MS 8/1/18

Clinician Signature

Date

Dwight Halpert

Clinician Name

Example Note #4

Billed as 6 hours (24 units) NS-TSS for 2/13/17



EXAMPLE PROVIDER

SESSION PROGRESS NOTE

<u>Date:</u> 2/14/2017	<u>Client:</u> Janice Jones (#1234JJ)	<u>Clinician:</u> R.L. Velin, B.A.
<u>Start Time:</u> 2:00pm	<u>End Time:</u> 6:00pm	<u>Duration:</u> 4 hours

DATA

TSS and Janice went to the store today to get a new video game. After buying the game, TSS and Janice returned home to play the game. Janice did very well in the game and had a very high score. TSS only won one time.

After that, Janice and TSS walked to the corner store to get a soda. Janice did well and didn't run out into the street when cars were passing by. Then we went to the park and Janice was on the swings. She was scared to go too high so the TSS didn't push her too high and Janice was happy about that.

At the end of the session, Janice asked the TSS to help clean her room and work on her homework. TSS praised Janice for asking for help and assisted her in making her bed, folding her clothes, and doing her math homework.

ASSESSMENT

Janice did well today. We worked on her interventions and made progress towards her goals. She demonstrated skills and understanding.

PLAN

Janice will continue to work on her treatment plan goals. Janice will continue to make progress and show that she is learning how to do what she is supposed to do in the presence of the TSS.

Clinician Signature: R.L. Velin, B.A. Date: 2/14/17

Supervisor Signature: River Woodward, MA. Date: 2-15-17

APPLICANT 1

I'm seeking a position where I can use my skills as a therapist specializing in youth.

EXPERIENCE

8/2017 TO PRESENT

MENTAL HEALTH THERAPIST, MH PROVIDER AGENCY

Provide therapy to adults and adolescents.

Develop treatment plans.

6/2016 TO 8/2017

SUBSTANCE ABUSE COUNSELOR, D&A PROVIDER AGENCY

Provided therapy to adults and adolescents in recovery

8/2013 – 6/2016

TSS WORKER, BHRS PROVIDER AGENCY

Caseload of children and adolescents

Developed and implemented treatment plans.

9/2013 – 11/2014

MENTAL HEALTH WORKER, RESIDENTIAL TREATMENT FACILITY

Ran groups and did individual counseling with adolescents

Linked families to services

EDUCATION

MAY 2016

MASTERS IN HUMAN SERVICES, BIG UNIVERSITY

Major: Health Care Administration

GPA 3.8

MAY 2013

MASTERS IN EDUCATION, ONLINE UNIVERSITY

Major: Special Education

MAY 2013

BACHELORS IN EDUCATION, PRIVATE COLLEGE

Major: Education

Applicant 2

Objective

To work in a position as a Mental Health Professional where I can use my knowledge in working with children.

Licensed Pennsylvania Behavior Specialist Consultant

Experience

MH Provider Agency 1/2018 - 9/2018

Therapist: Provided therapy to adolescents.

BHRS Provider Agency 2/2015 - 1/2018

TSS Worker: Provided TSS services in home and school settings. Followed treatment plans developed by BSC and utilized applied behavioral analysis and behavioral modification techniques.

County Recreation Center 1/2010 - 2/2015

Coaching Director: Coached basketball, football and other sports with children and youth.

Education

Master of Science, Big University 6/2015

Major: Clinical Psychology

Bachelor of Arts, Big University 6/2012

Major: Recreational Therapy

Applicant 3

Objective

To secure a position where I can utilize my skills as a Behavior Specialist Consultant / Mobile Therapist

Education

MASTER OF SOCIAL WORK | 6/2016 | ONLINE UNIVERSITY

- Major: Clinical Track
- Magna Cum Laude
- National Honor Society

BACHELOR OF ARTS | 6/2002 | STATE UNIVERSITY

- Major: Psychology

Experience

THERAPIST | MH PROVIDER AGENCY | 6/2017 - 7/2018

- Provided therapy to children and adolescents.
- Created treatment plans

BEHAVIOR SPECIALIST CONSULTANT | BHRS PROVIDER AGENCY | 12/2016 - 4/2017

- Consulted with families and BHRS staff around interventions
- Met with teachers around behavior modification plans
- Provided behavior modification

ADDICTIONS COUNSELOR | D&A PROVIDER AGENCY | 1/2015 - 6/2016

- Provided individual and group therapy to individuals around addiction.
- Assisted in linking individuals with services and benefits.

THERAPEUTIC SUPPORT STAFF | BHRS PROVIDER AGENCY | 1/2013 - 8/2015

- Assisted in developing and implementing treatment plans around behavior modification
- Linked families to services

CASE MANAGER | CM PROVIDER AGENCY | 1/2010 - 1/2015

- Assisted families with obtaining services.
- Made referrals to county agencies.
- Accompanied families to appointments.

THERAPIST INTERN | MENTAL HEALTH PROVIDER AGENCY | 9/2014 - 5/2016

APPLICANT 4

I am seeking a position where I can use my skills as a counselor in a substance abuse recovery program.

EXPERIENCE

6/2016 TO PRESENT

MENTAL HEALTH WORKER, RESIDENTIAL TREATMENT FACILITY

Responsible for working with court adjudicated youth in recovery from addiction.
Ran groups for youth and families.

8/2014 – 6/2016

TSS WORKER, BHRS PROVIDER AGENCY

Provided services to children and adolescents (applied behavioral analysis and behavior modification)
Developed and implemented treatment plans.

9/2013 – 11/2015

MENTAL HEALTH WORKER, LONG TERM STRUCTURED RESIDENCE

Provided services to forensic population / individuals in recovery from addiction.
Linked individuals to services.

EDUCATION

MAY 2013

BACHELORS IN EDUCATION, ONLINE UNIVERSITY

Major: Psychology

Personnel Requirements

Behavioral Specialist Consultant, Non-ASD Specific (BSC) *Behavioral Health Rehabilitative Services (BHRS)*

A Behavioral Specialist Consultant, Non-ASD Specific, must meet the following minimum qualifications and have the following documentation within their personnel file:

- Behavioral Specialist Consultant, PA Licensed (BSL)

OR

- Any of the following licensed professionals: Psychologists, Social Workers, Clinical Social Workers, Marriage and Family Therapists, and Professional Counselors

OR

- Masters degree from an accredited university in a clinical mental health discipline.
- PLUS** at least two (2) years verified post-master's experience providing behavioral health treatment to children (at least one of which is experience using behavior analysis/modification techniques).

Mobile Therapist (MT)

Behavioral Health Rehabilitative Services (BHRS)

A Mobile Therapist and Lead Clinician must meet the following minimum qualifications and have the following documentation within their personnel file:

- Any of the following licensed professionals: Psychologists, Social Workers, Clinical Social Workers, Marriage and Family Therapists, and Professional Counselors

OR

- Masters degree from an accredited university in a clinical mental health discipline.
- PLUS** at least one (1) year verified paid post-masters experience providing psychotherapy / counseling to children.

Personnel Requirements

Therapeutic Support Staff (TSS) *Behavioral Health Rehabilitative Services (BHRS)*

Therapeutic Support Staff must meet the Department of Public Welfare minimum requirements and have the following documentation within their personnel file:

- Bachelor's degree in one of the following disciplines: counseling, psychology, social work, sociology, education, criminal justice, or other human service field.
- No work experience is required.

OR

- Licensed Registered Nurse
- PLUS** one (1) year verified full-time paid experience working in direct care with children/adolescents.

OR

- "Other" bachelor's degree
- PLUS** one (1) year verified full-time paid experience working in direct care with children/adolescents.

OR

- Associate's degree or sixty (60) credits toward a bachelor's degree,
- PLUS** three (3) years verified full-time paid work experience working in direct care with children/adolescents.

Mental Health Professional

- Is licensed in a generally recognized clinical discipline which includes mental health clinical experience. The following licenses are recognized: Licensed Psychologist, Licensed Professional Counselor (LPC), Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT). The Licensed Behavior Specialist is *not* recognized.

OR

- Has a graduate (master's or doctoral) degree from a college or university accredited by an agency recognized by the United States Department of Education or the Council for Higher Education Accreditation (CHEA) in a generally recognized clinical discipline which includes mental health clinical experience.

OR

Has an equivalent degree from a foreign college or university that has been evaluated by the Association of International Credential Evaluators, Inc. (AICE) or the National Association of Credential Evaluation Services (NACES). This must be in the form of an equivalency report from the evaluator agency.

Personnel Requirements

Substance Abuse Counselor

- Is a Licensed Physician.

OR

- Master's degree or above from an accredited college with a major in medicine, chemical dependency, psychology, social work, counseling, nursing (with a clinical specialty in administration or the human services), addictions counseling, addiction studies, art therapy, behavioral health/human services, child development/ child development and family studies, family relations, clinical pastoral counseling, community counseling, human communication studies, community psychology, rehabilitative counseling, counselor education, counseling and guidance, counseling psychology, child & family studies, dance therapy, family mediation and counseling, human behavior, music therapy, human development and family studies, individual and family studies, pastoral studies, marriage and family therapy, sociology, pastoral ministries, special education, rehabilitative services, criminal justice, secondary education, or elementary education.

OR

- Bachelor's degree from an accredited university/college which meets the requirements of the above specialty areas
PLUS 1 year of paid clinical experience (a minimum of 1,820 documented hours) in a health or human service agency, preferably in a drug and alcohol setting. If a person's experience did not take place in a drug and alcohol setting, the individual's written training plan shall specifically address a plan to achieve counseling competency in chemical dependency issues.

OR

- Associate's degree from an accredited university/college which meets the requirements of the above specialty areas
PLUS 2 years of paid clinical experience (a minimum of 3,640 documented hours) in a health or human service agency, preferably in a drug and alcohol setting. If a person's experience did not take place in a drug and alcohol setting, the individual's written training plan shall specifically address a plan to achieve counseling competency in chemical dependency issues.

OR

- A Registered Nurse (RN) and a degree from an accredited school of nursing
PLUS 1 year of paid counseling experience (a minimum of 1,820 documented hours) in a health or human service agency, preferably in a drug and alcohol setting. If a person's experience did not take place in a drug and alcohol setting, the individual's written training plan shall specifically address a plan to achieve counseling competency in chemical dependency issues.

OR

- Full certification as an addictions counselor by a statewide certification body which is a member of a national certification body, or certification by another state government's substance abuse counseling certification board
PLUS 1 year of paid counseling experience in a health or human service agency, preferably in a drug and alcohol setting.