

Discharge Paperwork: What's Reimbursable?

All-Staff Meeting
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Specialty MH Services Must Help the Client

Questions to ask yourself to determine if you're providing medically necessary Specialty Mental Health Services when completing discharge summaries:

- Am I doing clinical work to directly help the client?
- Am I doing clerical work?
- Am I doing work that helps SCBH but not the client?

Are you doing work to directly help the client?

- Is this discharge summary needed by the client's new providers to maintain continuity of care or to justify the client's need for services?
- Are you taking action based on this paperwork?
 - Sharing the closing paperwork with an existing provider
 - Including the paperwork in a referral to a new provider
- Does completing it require clinical knowledge & training?
 - CANS/ANSA
 - Diagnostic information

If **YES**: You are linking to or coordinating with providers in a clinical way, so you are doing **Targeted Case Management**.

You **MUST** document what actions you are taking or will take with the summary (e.g., completing referral packet to Beacon).

Are you doing clerical work?

Examples:

- Faxing
- Printing previously completed assessments
- Emailing encrypted packets

If yes, then it's not a reimbursable Specialty Mental Health Service. You can document this work (if needed) as **NPC**.

You can also document that you did this work in your 301 TCM note, but:

- Don't include any clerical time in your total time.
- Be clear in the note that it's not included in the total time.
- E.g.: "I – (Intervention): Completed closing CANS summary for client. Photocopied full discharge packet and faxed to Beacon [not included in billable time]."

Are you doing work that helps the County but not the client?

Examples:

- Discharge summary on a client who is missing.
- Discharge summary on a client who is refusing all services.
- Discharge summary on a client who no longer needs any mental-health services from any providers.

If yes, completing the discharge paperwork – even if it requires clinical knowledge & training – is not serving the client and we cannot ask for reimbursement. Document your time with an **NPC** note.

If it was TCM, what should the note say?

Example:

- **P - (Purpose):** To link Ariana with Beacon to assure continuity of care for Major Depressive Disorder, which has been impairing her school and family functioning.
- **I - (Intervention):** Reviewed Ariana's records. Based on chart review and clinical knowledge of client, completed ANSA discharge summary to include in Beacon referral for Ariana's step-down to community services. Filled out Beacon clinical referral form. [Not included in documented time: Assembled full Beacon referral packet and faxed it.]
- **R - (Response):** Ariana has a diagnosis of Major Depressive Disorder, with mild impairments in school and family functioning. She will be referred through Beacon for outpatient therapy and medication management.
- **PL - (Plan):** PSC will follow up with Beacon.

How did we decide to do this?

- Received questions from the staff.
- Checked current State regulations & guidance from DHCS.
- Researched what other County Mental Health programs do.
- Asked DHS Compliance Unit for input & approval.