**DIVISION OF HEALTH CARE FINANCING AND POLICY**

**CLINICAL POLICY TEAM, BEHAVIORAL HEALTH PROGRAM**

**BEHAVIORAL HEALTH TECHNICAL ASSISTANCE**

**MINUTES –**

**Wednesday, May11, 2016**

**10:00 - 11:00 a.m.**

**Facilitator: Kim Riggs, Behavioral Health Social Services Specialist II** Webinar Address: <http://nvmedicaid.adobeconnect.com/bhmeeting/>

Call in number: 1-888-363-4735 Access Code 1846315

1. **Purpose of BH Monthly Calls** 
   1. House Keeping – Providers were encouraged to mute calls by pressing “\*6”. Alexis explained that questions and comments can be submitted in advance to the DHCFP behavioral mailbox and gave the mail box address: [BehavioralHealth@dhcfp.nv.gov](mailto:BehavioralHealth@dhcfp.nv.gov). Questions and comments should be submitted by the last Wednesday of the previous month
   2. Introductions:

DHCFP: Hilary Jones

SUR: Kurt Karst

HPES: Ismael Lopez-Ferratt, Joann Katt,

**2.** **DHCFP – Policy Updates: Following updates below**

1. Kim went through the Policy Revision from the Rehabilitation Plan Work Shop which was held on May 9, 2016. This revision addressed the rehabilitation plan and updating the documentation required. [DHCFP Public Notices](http://dhcfp.nv.gov/Public/AdminSupport/PublicNotices/)
2. Kim encouraged providers to attend the upcoming public meeting addressing revision of qualifications for clinical supervision on Thursday, May 12, 2016 at 2:00 PM
3. Kim encouraged providers to attend the upcoming public meeting addressing Certified Community Behavioral Health Clinic (CCBHC) Tentatively scheduled for May 23, 2016 from 2-4 PM please check Public Notification for current information [CCBHC-Main](http://dpbh.nv.gov/Reg/CCBHC/CCBHC-Main/)
4. Kim and Hilary went through the updates to Behavioral Health Community Network (BHCN) Providers; requirement to submit a Quality Assurance (QA) Program [BHCN - HPE Billing Manual](https://www.medicaid.nv.gov/Downloads/provider/NV_Billing_General.pdf) and HPE Announcement 1134 [HPE Announcement 1134](https://www.medicaid.nv.gov/Downloads/provider/web_announcement_1134_20160502.pdf)

**3. DHCFP- Surveillance Utilization Review (SUR)**

1. Electronic Health Records/Electronic Signatures

The Medicaid Services Manual (MSM) Chapter 100, Section 102.2 G. states, in part: "Electronic health records must include a verifiable date of service time stamp, record who is making the entry and who actually saw the patient." DHCFP will interpret "verifiable" to mean that the original information cannot be altered. The record must have a date and time stamp to indicate when it was created. It must indicate who created the entry. The notes must indicate the individual provider who actually performed the service being billed. Any commercially-marketed Electronic Health Record system should meet these requirements *if each user has their own secure access.* A shared login is not acceptable. If notes were being entered in an application without such tracking (e.g. MS Word), it would be necessary to print the notes and manually sign and date them.

A provider asked the following question: "Can we just run down the list of a couple acceptable forms? Does signing with a finger count on tablets?  It’s an actual signature, but wouldn't have a time/date stamp necessarily. If the application on the tablet does not have a time and date stamp, this would not be sufficient for documenting case records in support of specific billings. It could be used for intake paperwork and recipient acknowledgements related to overall care.

1. Reporting Provider Fraud (expanded description)

On the DHCFP website, <www.dhcfp.nv.gov>, there is a link at the bottom of the page to "Report Medicaid Provider Fraud". You may fill out this form to report any provider for fraud, waste, abusive billing, or improper payments. If you have discovered an error in your own billing, you may self-report it here, and we will take into consideration your self-reporting. You may also report recipient fraud using this form. We prefer you to provide your contact information on any complaint, but you may submit the complaint anonymously. Please be sure to provide as much information as possible. Alternatively, you may also call and leave a message at (775) 687-8405.

**4. Hewlett Packard Enterprise Services (HPES) Update:** Ismael Lopez-Ferrattprovided information concerning the following:

1. Quick Reminder: Continuity of care: Utilization of FA-29 – Prior Authorization Data Correction Form: Addressing Technical Denials [HPE FA-29 Data Correction](https://www.medicaid.nv.gov/Downloads/provider/FA-29.pdf) If a provider is going out of business HPE needs to be notified, either by submitting an FA 29 or notifying the State, for continuity of care for the recipients.  We cannot have overlapping dates of service.
2. Joann Katt discussed submission of documentation to provider revalidation:

When using WAs 1073 and 450 as resources for providers to give to their QMHPs, QMHAs, and QBAs for them to individually be able to reach out to HPE for questions on revalidation and the process.

1. Kim in closing provided the information for providers to email questions, comments or topics that providers would like addressed any time prior to the webinar. Please email to [BehavioralHealth@dhcfp.nv.gov](mailto:BehavioralHealth@dhcfp.nv.gov). **The scheduled meetings are the second Wednesday of each month. Next month meeting will be June 8th, 2016** **10- 11 am**