

# Monterey County Behavioral Health Quality Improvement

RE:	"New Client" additional data collection
POLICY REFERENCE	MCBH Policy 129
FORM REFERENCE	"New Client" (Avatar)
EFFECTIVE	6/23/2019 UPDATED: 10/17/19 to reflect new compliance logic

In order to comply with Medicaid Managed Care Final Rule, the Department of Health Care Services (DHCS) is requiring collection of additional information related to timeliness to care for individuals who request mental health services. **This requirement impact County run and Contracted Provider Programs.** The additional data elements aim to assess timeliness standards for non-urgent services. DHCS refers to these additional items as "New Client." This data will examine the timeliness and trajectory of a new client entering services and start of treatment following the assessment. The additional data elements will be submitted to DHCS along with the submission of other CSI data on a monthly basis.

The "New Client" data elements are completed for *new clients*. A new client is defined as an individual who has never received care in our systems or if received care in the past, all outpatient episodes are closed for longer than 365 days. In brief, the data elements are:

- initial request for services;
- initial offered and accepted appointment for assessment;
- offered and accepted appointment for treatment following assessment;
- reason client Closure of "New Client"
  - The reason for closure for this purpose is to documents at what point the client has completed the series of events for admission and treatment (scenarios are provided below)
    - 01 = accepts offered assessment date but does not attend initial assessment appointment;
    - 02 = attends initial assessment appointment but does not complete assessment process;
    - 03 = completes assessment process but declines offered treatment dates;
    - 04 = accepts offered treatment date but does not attend initial treatment appointment;
    - 05 = Beneficiary does not meet medical necessity criteria.

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## PROCEDURES

- The New Client “Assessment” record must be completed for new clients before an assessment note (331) can be entered. If the New Client form is not completed, the assessment note will be converted into a 330 non- billable note. Urgent services are unaffected.
- The New Client “Treatment” record must be completed for new clients before a treatment code can be entered, or it will be converted to a 330 non billable note. The treatment record cannot be entered without an “assessment” record.
- “New Client” form may require multiple entries from multiple programs in order to capture all the New Client Timeliness data elements. For example, an entry for program A to capture assessment timeliness and another for program B to capture treatment timeliness.
- Completed for “new clients”
- Completed in Avatar
- Completed by all access points providing mental health services (i.e. regional Access clinics, school-based, forensic, ED Crisis Team, Mental Health Unit, etc.)
- This form is used to document initial request, date offered and accepted assessment, date offered and accepted treatment, and reason for closure of this series of events
- The reason for closure **does not always result in discharging the episode** in Avatar
  - Here are some scenarios:
    - Client accepted appointment for assessment, but did not show for the appointment
      - Documents reason for closure (reason 01) using the “New Client” form, but continue to outreach, per established standards
    - Client accepted appointment for assessment, was seen to initiate the assessment, but may have been asked (of the client requested) to return at a later time to complete the assessment, however, the client did not show for the appointment
      - Documents reason for closure (reason 02) using the “New Client” form, but continue to outreach, per established standards
    - Client refused appointment for treatment and reports no interest in follow up care
      - Documents reason for closure (reason 03) using the “New Client” form, but continue to outreach, per established standards
    - Client accepted appointment for treatment, but did not show for appointment

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- Documents reason for closure (reason 04) using the “New Client” form, but continue to outreach, per established standards

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## For Outpatient Services

- Initial request for services by client or legal representative
  - Telephone
  - Walk-in
  - Referrals
    - Date of requests is defined by contact with client, where client indicates interest in receiving services
- Date of offered and accepted appointments for an **assessment**
  - Enter the date a New Client was offered
    - If client refuses first offer, enter date of second appointment date offered
    - If client refuses second offer, enter the date of the third appointment date offered
  - If client accepts the first offered appointment, the second and third appointment offered do not need to be completed
  - Enter the date the client accepts to be seen for an assessment
- Date of offered and accepted appointment for **treatment**
  - Enter the date a New Client was offered
    - If client refuses first offer, enter date of second appointment date offered
    - If client refuses second offer, enter the date of the third appointment date offered
  - If client accepts the first offered appointment, the second and third appointment offered do not need to be completed
  - Enter the date the client accepts to be seen for treatment

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## For ED Crisis Team

- Initial request for services by client or legal representative
  - In-Person visit at Natividad Medical Center
- Date of offered and accepted appointments for an **assessment**
  - Date of offered appointment is the date of the in-person evaluation
  - Date of accepted appointment is the date of in-person evaluation
- Date of offered and accepted appointment for **treatment**
  - Enter the first date offered for an outpatient follow-up appointment
    - If client refuses first offer, enter date of second appointment date offered
    - If client refuses second offer, enter the date of the third appointment date offered
  - If client accepts the first offered appointment, the second and third appointment offered do not need to be completed
  - Enter the date the client accepts to be seen for outpatient follow-up appointment
- \* For assessments evaluations resulting in an inpatient care, “New Client” form is not initiated
  - Procedures for inpatient hospital discharges shall be followed (see below).

## For Inpatient Hospital Discharges

- Initial request for services by client or legal representative
  - Date of scheduled appointment for outpatient follow-up care
- Completion of “New Client” form shall be completed by program where client will be receiving follow-up appointment
  - Follow procedures for outpatient services

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## Sample Scenarios

- Request for services is made
  - Program A selects conducts “Triage” on New Client form and refers the client to Program B for assessment
  - Program B completes assessment, treatment, closure data
    - Program B will complete “New Client” form in its entirety
- Request for service is made
  - Program A conducts assessment
  - Program A provides treatment
    - Program A completes “New Client” form in its entirety
- Request for service is made
  - Program A conducts assessment
    - Program A completes request and assessment data on form
  - Program A refers to Program B (county program or contracted provider)
    - Program B completes treatment and closure data on form
    - \*\* If contract provider does not document in Avatar, then Program A shall complete data elements
- Request for service is made
  - Program A refers to Program B for assessment
    - Program A completes request for service data
    - Program B completes assessment, treatment, closure data
    - \*\* If Program B does not document in Avatar, then Program A shall complete required data elements
- Request for service is made
  - Crisis conducts evaluation
    - Crisis Team completes request and assessment data
  - Client is referred to Program B for follow-up care in outpatient setting
    - Program B completes treatment data
      - Program B completes assessment, treatment, closure data
      - \*\* If Program B does not document in Avatar, then Program A shall complete required data elements
- Request for service is made
  - Crisis conducts evaluation
    - Evaluation results in admission to inpatient care
    - No “New Client” form shall be completed
  - Client is discharging from inpatient care
    - Receiving program shall complete data elements as indicated in above scenarios
      - Date of request = appointment date for follow-up care