

ILLINOIS  
MENTAL HEALTH COLLABORATIVE

---

FOR ACCESS AND CHOICE

# Technical Assistance for Clinical Documentation

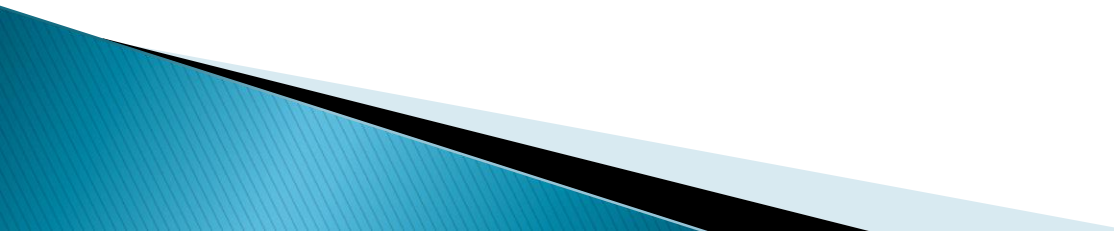
August 3, 2015



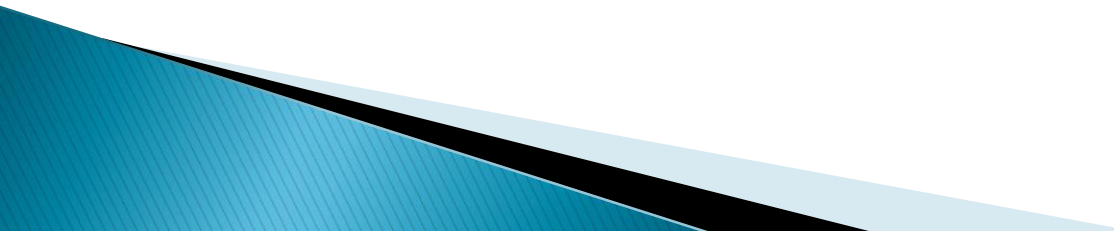
# Presenters

- Lee Ann Reinert, LCSW  
DHS/DMH Clinical Policy Specialist
  - Cathy Cumpston  
DHS/DMH Medicaid Officer
  - Tammy Mayer, LCPC  
Collaborative Regional Liaison Supervisor
  - Chris McConkey, LCPC  
Collaborative Director of Quality Management
- 

# Goals for Today

- Understand roles and responsibilities
  - Understand Rule 132 documentation requirements
  - Learn what resources are available to you for further questions and support
- 

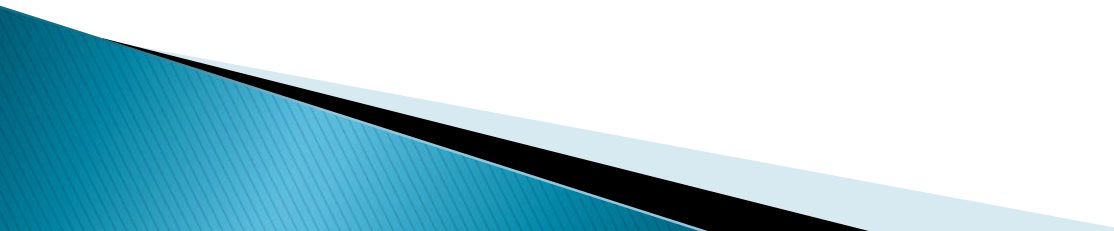
# The Role and Responsibility of DHS/DMH Specific to Provider Monitoring

- Ensure that community mental health services comply with federal and state statutes and regulations
  - Ensure that services meet standards of quality
  - Ensure prudent stewardship of taxpayer dollars
  - Establish all policies and procedures related to monitoring
- 

# The Role and Responsibility of the Collaborative Quality Management Department

- ▶ The Administrative Services Organization (ASO) for DHS/DMH
- ▶ This includes:
  - Completion of provider monitoring functions by clinically licensed staff
  - Communicating with providers, both pre- and post- monitoring visits
  - Providing training/technical assistance to providers per DMH instruction

# The Role and Responsibility of Providers Pertaining to Clinical Documentation

- Read, understand and comply with Rule 132
    - Become familiar with the monitoring tools
    - Ask questions as needed
  - Read notices and letters completely
  - Grant access and make requested records available
  - Void unsubstantiated claims in the required time frame
- 

# Determining Medical Necessity

An LPHA must document consideration of the following factors:

- The definition of medical necessity in Rule 132 (132.25)
  - Diagnosis (or at least 2 criteria if under 21)
  - Impairment of role functioning due to symptoms of mental illness
  - In need of at least one service to stabilize/restore/rehabilitate to maximum level of functioning
- The type, severity and chronicity of the person's symptoms
- The severity of impairment in the person's role functioning

# Determining Medical Necessity

- The risks that a person's symptoms or level of role functioning pose to the safety of the person or to others with whom the person interacts
- The expected short-term and long-term outcome of each service needed by the person
- Progress made in response to treatment, if the person is currently receiving treatment
- Criteria or guidance published by the public payer for the purposes of defining and evaluating the medical necessity of each service.

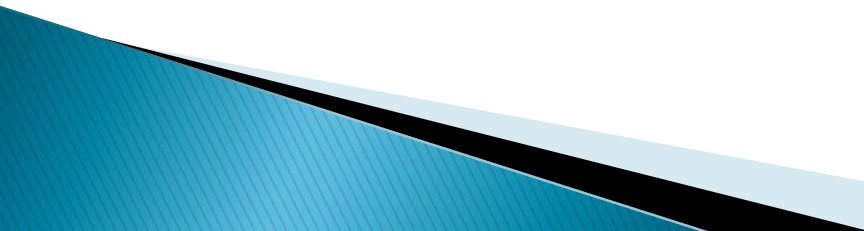
132.145 (b) (1-7)



# Documenting Medical Necessity

When an LPHA signs a mental health assessment and a treatment plan, the LPHA is affirming that s/he has considered these seven factors and believes that all treatment recommendations contained therein are medically necessary for the individual.

132.145 (b) (1-7)



# The Golden Thread



# Beginning the Golden Thread: Assessment

Mental health assessment (MHA) is a Rule 132 service that results in a Mental Health Assessment Report.

This is where the clinician documents the assessed needs of the individual and begins to make the case for medical necessity for specific Rule 132 services.

Complete details on all areas which must be considered are detailed at  
132.148 (a)

# The Golden Thread Continued: Identify Goals and Develop Plan

Rule 132 requires the active involvement of the individual served along with the clinician to determine the goals to be achieved and to develop the plan for treatment.

This is the clinician's opportunity to document the short and long term expectations of treatment, as well as the interventions that are medically necessary.

Full requirements for treatment plan development, review and modification are listed at 132.148 (c)



# Goals vs. Objectives



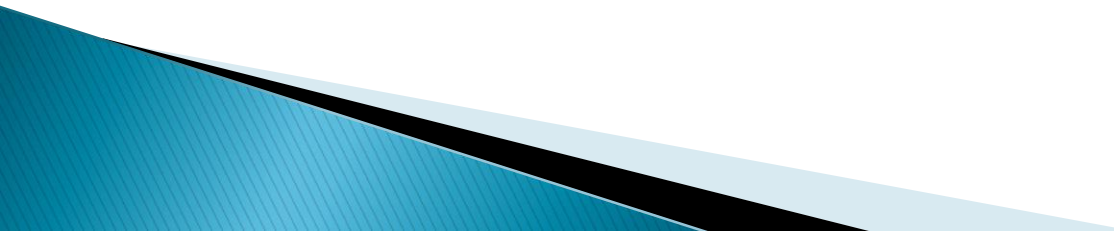
**Goal:** The individual's expected outcome from services.

**Objectives:** Steps identified through discussion between the individual and the clinician that will assist the individual in attaining the goal.

# Following the Golden Thread: Service Provision

In documenting services, the clinician must clearly link each service provided back to the interventions on the treatment plan, which are connected to the assessed needs.

# Completing the Loop of the Golden Thread: ITP Reviews and MHA Updates

- Review accomplishments towards objectives
  - Discuss any changes in needs or status
  - Consider the implications for services
  - Modify the treatment plan accordingly
- 

# Sufficiently Making the Case for Medical Necessity – The ITP Review

- Thorough review of the ITP is required
- Consideration must be given to progress towards each goal
- Well written objectives
  - Measure progress
  - Assess the efficacy of current services
  - Identify necessary changes in interventions
- The “no change” red flag



# Applying These Principles

The following slides provide some case studies and accompanying clinical documentation of potential Rule 132 services to be provided to the individuals.

# Case Study: John Doe

- 22 year old Caucasian male
- High school graduate
- Speaks English
- Has access to public transportation
- Lives independently in community with his girlfriend
- Works part-time at the local grocery store
- Has never received mental health services
- Has minimal family support due to his angry outbursts in the past
- No identified medical problems
- No current medications
- No history of abuse

# Case Study of John Doe, continued

- ▶ He came on his own to the Community Mental Health Center because he was having issues at work and wanted help dealing with them.
- ▶ Was written up at work for continuing to argue with co-workers and upset customers with his angry communication styles.
- ▶ Is receptive to receiving services, states that “I want to get along better with my co-workers and keep my job”.
- ▶ During the Mental Health Assessment the following were noted:
  - Hypersensitivity
  - Poor family relationships, poor communication skills, limited problem solving skills
  - Diminished ability to think and concentrate
  - Insomnia – reports 4 times a week for the past 4 months
  - Denies suicide and homicide ideation
  - Denies substance use
- Diagnosed with Major Depressive Disorder with mixed features

# John's ITP, Date: 1/30/15

**Goal # 1 :** I want to get along better with my co-workers.

Objective	Service	Amount, Frequency, Duration	Responsible staff person	Expected Outcome Date
1. I will identify three things about my co-workers that irritate me.	Therapy/Counseling – Individual	1 x a week for 45 minutes for 6 months	Bob Smith, QMHP	6/30/15
2. I will learn three coping skills to help me deal with my anger and frustration.	Community Support Individual	2x a week for 1 hour for 6 months	Bob Smith, QMHP	6/30/15
	Community Support Group	1 x week for 1.5 hours for 6 months	Bob Smith, QMHP	6/30/15
3. I will learn one positive way of speaking to others when feeling frustrated and angry.	Community Support Individual	2x a week for 1 hour for 6 months	Bob Smith, QMHP	6/30/15
	Community Support Group	1 x week for 1.5 hours for 6 months	Bob Smith, QMHP	6/30/15

# John's ITP Review, Date: 6/30/15

**Goal # 1** : I want to get along better with my co-workers.

Objective	Services	Review
<p><b>1.</b> I will identify three things about my co-workers that irritate me.</p>	<p>Therapy/ Counseling – Individual</p>	<p>John has made minimal progress towards this objective. Through Therapy/Counseling Individual he was able to identify one out of three things that irritated him: asking questions about his personal life. This service will continue as John is beginning to trust the therapeutic process and rapport is building. This will allow him to continue to work towards completing this objective. As minimal progress has been made, Community Support Individual will be added to this objective so that John will have the opportunity and the safe setting to learn to identify triggers.</p>

Services for 6/30/15-12/30/15	Amount, Frequency, Duration	Responsible Person
Therapy/Counseling Individual	45 min, 1x a week for 6 months	Bob Smith, QMHP
Community Support – Individual <b>(NEW)</b>	1.5 hours, 1 x a week for 6 months	Bob Smith, QMHP

# John's ITP Review, Date: 6/30/15, continued

<b>Goal # 1</b> : I want to get along better with my co-workers.		
<b>Objective</b>	<b>Services</b>	<b>Review</b>
<b>2.</b> I will learn three coping skills to help me deal with my anger and frustration.	Community Support Individual  Community Support Group	John was able to learn and practice one coping skill during this review period: Count to ten before responding. John related that this significantly helped him. He stated it was difficult at the beginning to remember but that with continued practice it is easier. He and this writer believe that continuing with Community Support Individual will allow him the opportunity to learn and practice two additional coping skills. This is important as it will allow John to have more tools in his toolbox for managing frustration and anger. John had difficulty in Community Support Group as he experienced several triggers to his anger during group. This caused him to miss a lot of group or he would leave in the middle of group. John and this therapist agree that it needs to be removed from his treatment plan at this time as it is not an effective intervention.

<b>Services for 6/30/15-12/30/15</b>	<b>Amount, Frequency, Duration</b>	<b>Responsible Person</b>
Community Support Individual	1 hour, 2x a week for 6 months	Bob Smith, QMHP
Community Support Group	Discontinued from ITP	N/A

# John's ITP Review, Date: 6/30/15, continued

Goal # 1 : I want to get along better with my co-workers.		
Objective	Services	Review
<b>3.</b> I will learn 1 positive way of speaking to others when feeling frustrated and angry.	Community Support Individual  Community Support Group	John made some progress with this objective. He was able to learn 2 positive ways of speaking to others when feeling frustrated and angry, and he reported that he was able to put what he learned into practice in the work setting. This objective has been achieved.

- ▶ The following slide shows the addition of a new objective.
  - It is being added based on the original findings of intake and the mental health assessment.
  - The objective is acceptable because it addresses the need for improved sleep patterns in an effort to reduce episodes of angry or aggressive behavior related to the mental illness diagnosis.



# New Objective/Services Added to ITP, June 30, 2015

Goal #2: "I want to sleep better".				
Objective	Services	Amount, Frequency Duration	Responsible Staff Person	Expected Outcome Date
<b>1.</b> I will learn three ways to be able to sleep 8 hours per night.	Psychiatric Evaluation	2 hours, 1 time	Bob Smith, QMHP	7/30/15
	Community Support - Individual	1 hour, 1 x week for 6 months	Bob Smith, QMHP	12/30/15
<b>2.</b> I will reduce my angry feelings that keep me up at night.	Therapy/Counseling – Individual	45 min., 1 x week for 6 months	Bob Smith, QMHP	12/30/15

Signature of Person Receiving Services: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of QMHP: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of LPHA: \_\_\_\_\_ Date: \_\_\_\_\_

# ACCEPTABLE VS. UNACCEPTABLE DOCUMENTATION

- ▶ Please note that the following slides contain example notes of both acceptable and unacceptable progress notes. It will be indicated on the first slide of each example note in **red** font whether the example is acceptable or unacceptable.
- ▶ Acceptable documentation:
  - Describes the specific intervention provided by the staff with more than just the name of the service provided;
  - Includes the response of the individual to the intervention; and
  - Includes a description in non-judgmental and measurable language of progress made toward the achievement of goal/objective in the ITP.

# Sample Progress Note – John Doe, Therapy/Counseling – Individual

**THIS NOTE IS ACCEPTABLE**

**Client Name:** John Doe

**RIN:** 000-000-000

**Start Time:** 10:00 AM

**Service:** Therapy/Counseling -Individual

**Date:** June 25, 2015

**Location:** On-site

**Duration:** 1 hour

John attended therapy/counseling today to work on treatment plan goal 1, objective 1.

**Description of intervention:** John and this therapist processed a recent conflict with a co-worker that resulted in John getting reprimanded by his supervisor. He had arrived late to work and was questioned by another co-worker about his tardiness. John stated he became very irritated and spoke harshly to the co-worker. John related he feels bad that he acts this way at times. John and this therapist processed the feelings he was experiencing at the time of this conflict, his current emotions about it and possible underlying reasons for John becoming angry.

# John Doe T/C –I note, continued

John's **response to the intervention:** John was actively involved in today's session and appeared open in relating the incident. He became frustrated at his inability to identify why this was a trigger, but his frustration did not escalate to an inappropriate angry point.

John continues to make slow **progress** towards this objective. Today he was able to identify that his behavior was inappropriate and had consequences but he struggled to identify why this event was a trigger for him. John stated "I think I am making some progress but wish it was happening quicker".

Signature/Credentials: Cindy White, MHP Date: 6/25/15

# Sample Progress Note – John Doe, Community Support – Group

**THIS NOTE IS ACCEPTABLE**

**Client Name:** John Doe

**RIN:** 000-000-000

**Start Time:** 9:00 AM

**Service:** Community Support - Group

**Date:** June 27, 2015

**Location:** On-site

**Duration:** 15 min.

John attended community support group today to work on treatment plan goal 1, objective 2. **Description of intervention:** Today's group focused on development of coping skills for anger management.

# John Doe C/S – G note, continued

He responded to this intervention by: John initially was appropriately involved in the group, but quickly got angry when another group member, who is hearing impaired, asked John to repeat his comment. John responded by shouting his answer angrily at the person, getting up and storming out of group. He did not return to the group today.

John did not make progress today towards this objective as he stormed out of group in anger.

Signature/Credentials: Bob Smith, QMHP

Date: 6/25/15

# Sample Progress Note – John Doe, Therapy/Counseling- Individual

**THIS NOTE IS ACCEPTABLE**

**Client Name:** John Doe

**RIN:** 000-000-000

**Start Time:** 9:30-10:00 AM

**Service:** Therapy/Counseling -Individual

**Date:** June 27, 2015

**Location:** On-site

**Duration:** 30 min.

This writer provided John with Therapy/Counseling-Individual today to work on treatment goal #1, objective #1: “I will identify three things about my co-workers that irritate me.” **Description of Intervention:** John had been attending a group on coping skills today when he got angry at another group member and stormed out of the group. I met with John to discuss the situation; identify what might have impacted his angry feelings, other ways he might have responded to the situation and how his anger is interfering with his achievement of goals.

# John Doe T/C – I note, continued

John **responded to this intervention** by initially being angry and blaming of others, but he quickly was able to calm himself down and worked with this MHP on these elements of treatment. John was able to voice that he was embarrassed about his behavior and did not want to return to group.

John made limited **progress** today towards this objective. He was able to calm himself down and was able to discuss the situation. However, he did not return to group and did not identify what might have impacted his angry feelings, other ways he might have responded to the situation or how his anger is interfering with his achievement of goals. John related that “I am glad I was able to calm down. I don’t like to feel that way. It embarrasses me that I act that way. People won’t like me when I do that. I want to keep working on this”.

Signature/Credentials: Bob Smith, QMHP

Date: 6/25/15



# Sample Progress Note –Community Support Residential – Individual – PETE

**THIS NOTE IS NOT ACCEPTABLE**

**Client Name:** Pete Wilson

**Date:** May 13, 2015

**RIN:** 000-000-000

**Location:** On-site

**Start Time:** 8:00-9:00 AM

**Duration:** 1 hour

**Service:** Community Support Residential - Individual

This writer made sure Pete got up this morning. Pete yelled at me when I came into his room this morning to wake him up. Once he was awake, I handed Pete a towel and washcloth, soap, shampoo, his toothbrush and toothpaste and told Pete to get ready.

This writer observed that Pete took a shower, brushed his hair and teeth.

**Signature/Credentials:** Debra Thomas, MHP

**Date:** 5/13/15

# Unacceptable documentation

- ▶ This note does not describe a billable service. Providing prompts for and observing completion of activities does not meet the Rule 132 definition for Community Support, nor for any other Rule 132 service.

# Sample Progress Note –Community Support Residential – Individual, **PETE**

**THIS NOTE IS ACCEPTABLE**

**Client Name:** Pete Wilson

**Date:** May 13, 2015

**RIN:** 000-000-000

**Location:** On-site

**Start Time:** 8:00-8:30 AM

**Duration:** 30 min.

**Service:** Community Support Residential - Individual

**Description of the intervention:** This writer provided Pete with Community Support Residential – Individual to work on treatment goal #1, objective #2: “I will learn three skills needed to complete morning clean up on my own.” This writer instructed Pete on oral hygiene today. Together we walked through each step of brushing his teeth. Pete was then given the opportunity to practice this task. This writer then provided further assistance as he had difficulty.

# Sample Progress Note –Community Support Residential – Individual, **PETE**, continued

**Pete's response to the intervention:** Pete actively listened to the directions. He did not ask any questions or make any comments. Pete had difficulty with getting and keeping his toothpaste on his toothbrush which led to frustration. Pete was able to complete this task, with assistance from this writer.

**Progress toward goals/objectives in the ITP:** Pete was able to voice the directions after learning, but had some difficulty putting what he learned into practice. Pete stated “I am glad I am learning to brush my teeth because then maybe I can find a girlfriend. It is just so frustrating sometimes”.

**Signature/Credentials:** Debra Thomas, MHP      **Date:** 5/13/15

# Sample Progress Note –Community Support Residential – Individual – **PETE**

**THIS NOTE IS NOT ACCEPTABLE**

**Client Name:** Pete Wilson

**Date:** April 28, 2015

**RIN:** 000-000-000

**Location:** On-site

**Start Time:** 11:00 AM

**Duration:** 15 minutes

**Service:** Community Support Residential - Individual

This writer performed a room check on Pete's room. He had not made his bed or thrown away the garbage from last night's dinner. This writer explained to Pete that if he did not start performing these tasks as required he would be kicked out. Pete had a bad attitude. This writer will perform another room check tomorrow to see if he continues to be out of compliance.

**Signature/Credentials:** Debra Thomas, MHP **Date:** 4/28/15

# Unacceptable Documentation

- ▶ This is another example of a note which does not describe a billable service.
- ▶ In addition, the language of the note reflects a lack of understanding of person centered, recovery oriented services.

# Sample Progress Note –Community Support Residential – Individual **PETE**

**THIS NOTE IS ACCEPTABLE**

**Client Name:** Pete Wilson

**Date:** April 6, 2015

**RIN:** 000-000-000

**Location:** On-site

**Start Time:** 2:00 PM

**Duration:** 1 hour

**Service:** Community Support Residential - Individual

**Description of the intervention:** This writer provided Pete with Community Support Residential – Individual in order to work on treatment plan goal #1, objective #3: “I will develop three housekeeping skills in the next six months”. This writer instructed Pete on how to complete each step of doing his laundry and explained the importance of clean clothes in relation to personal hygiene.

# Sample Progress Note –Community Support Residential – Individual, **PETE**, continued

**Pete’s response to the intervention:** Pete listened, followed instruction and asked questions for clarification. He initially had difficulty with sorting laundry by color and fabric type but cheerfully accepted feedback and direction. Pete stated “I am really glad to learn about this because I want to live on my own and have a girlfriend”.

**Progress toward goals/objectives in the ITP:** Pete made good progress with putting into practice what he learned. He was able to sort his clothes, wash and dry two loads of laundry, and fold and put away with assistance and direction from this writer. Pete related that “I am making good progress with learning how to do my laundry”.

**Signature/Credentials:** Debra Thomas, MHP

**Date:** 4/6/15



# Tips from Reviewers

- ▶ Consistent organization of records
- ▶ Staff know and understand Rule 132 required documentation requirements and the recordkeeping system of the provider
- ▶ Handwritten records are legible
- ▶ Conduct regular internal reviews
- ▶ Canned documentation does not occur
- ▶ Avoid excessive use of jargon

# Resources

- Your DHS/DMH Contract Manager
- Websites
  - IL Mental Health Collaborative  
[www.illinoismentalhealthcollaborative.com](http://www.illinoismentalhealthcollaborative.com)
  - DHS/DMH  
<http://www.dhs.state.il.us/page.aspx?item=29751>
  - Rule 132 Q & A's  
<http://www.dhs.state.il.us/page.aspx?item=32635>
- DHS/DMH mailbox: [dhs.mh@Illinois.gov](mailto:dhs.mh@Illinois.gov)