

Questions and Answers 2/13 KHS Webinar

Will this presentation be sent to the area mental health centers or will we be able to access it online?

The presentation is available online at www.kansashealthsolutions.org. Click on "Provider" and look under New / Updated Downloads.

Clarify as to whether two attendant care staff could bill a client at the same time.

In some cases, it may be medically necessary for two attendant care staff to provide services at the same time. Documentation should clearly reflect medical necessity.

If a client has a mental health diagnosis and is on the MR/DD waiver, who is responsible for delivering services such as AC? Both providers may provide services. Attendant Care provided by a mental health practitioner should clearly relate to the mental health needs of the child. It is expected that coordination of care would be clearly documented between the two systems, as well. A child can only be on one Waiver at a time.

We have a question about the summary of services.

The information provided in the "Summary of Service" section is an example. The information included in the slides has been taken from the manual and you may review it in more detail. The description of your service or intervention needs to fit into one of those categories.

Can peer support assist someone in doctor appointments?

No, this is not reimbursable.

We have goals in which case management staff also assist people in doctor appointments to lessen anxiety and so forth. Does this mean that they have to have attendant care to do this? The level of service provided should be reflected in the service code billed. Supports and assistance during a doctor's appointment would be considered attendant care.

Can a client be in a level 1 or 2 placement or YRC with a medical card and receive community based services? Yes. However, Short Term Respite Care is considered content of service.

Can a client with a GAF score above 56 who has Medicaid receive TCM? Nothing is based solely on the GAF. GAF is just a small piece of the overall clinical picture. Please review the definitions and eligibility requirements for Rehabilitation Services for more information.

According to the KHS manual all group leaders must be listed on a group note. Is every staff in the one to four ratio of a large group considered a "group leader"?

The webinar documentation guidelines are the most current available. Please refer to those guidelines.

Can a client receive TCM and IPRS/AC or Group?

TCM is an indirect service and may be provided while another provider is delivering direct care.

We need further clarification regarding how or if a cpst worker can bill during collateral contacts when the child is not present?

CPST is a face-to-face intervention so the client must be present.

Our electronic record does not have location of the service in the progress note, it is tracked in the billing associated with that service, is that sufficient.

Location of service must appear on the note. It could be entered into a summary section.

What do you see as the specific difference between attendant care & PRI? Both are goal directed. The last slide identifies the key differences. AC is more supervision and supporting of activities of daily living. PRI would reinforce skills that have already been learned and to compensate for deficits.

Can CPST be used when attending a conference/meeting with a client to collaborate with another agency such as DCCCA? CPST is a face-to-face intervention with the consumer present; however, family or other collaterals may also be involved. Documentation would need to demonstrate what face-to-face interventions occurred between the client and provider in the context of that meeting.

Are statements in the person's own words related to their vision of what they need for recovery acceptable to Medicaid and KHS? You will need to have a "clinical" goal and then include the consumer's statement in quotes. This is a good way to evidence consumer participation in the treatment plan.

If you are not using group curriculum, is it important that you discuss skills addressed?

Yes.

Does Psychosocial Rehabilitation-Individual require a reference to a specific curriculum as well?

No.

Can a CPST (worker?) bill both CPST and att care on the same person?

CPST and AC services can be provided by one worker to the same client, provided they are qualified and trained to do so. Both services cannot be billed simultaneously by the same person.

*** Providers: Questions regarding Parent Support, Peer Support, and Evidence-Based CPST will be addressed in future webinars. If there is a need for an immediate response, please feel free to contact Carol Neeley or Anne Werring at KHS, (785) 575-9393 or (866) 547-0222.**