

## **Magellan Compliance Notebook**

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) strives to be proactive and use education as a preventative tool to help ensure our members receive the highest quality of care through you, the provider. The Compliance Department at Magellan is committed to sending monthly e-mails to targeted providers regarding a Compliance-related subject.

This e-mail communication is specific to your HealthChoices (Pennsylvania Medicaid) Contract with Magellan.

This month we would like to share some important reminders with Peer Support Services (PSS) providers specific to OMHSAS and Magellan guidelines for billing and documentation based on recent audit findings. Additionally, please be advised that all Peer Support Services providers are now required to be independently licensed by OMHSAS.

## **Applicable Standards**

- MA Bulletin OMHSAS-16-12
- Provider Handbook for Peer Support Services
- MA Bulletin 99-97-06
- Peer Support Services FAQ Document
- Magellan Provider Handbook Supplement (Documentation Requirements are listed on page 54)
- ➤ PA Magellan Medicaid Addendum 5.1 Regulatory Compliance: Provider shall provide all Covered Services in accordance with the standards, rules and regulations promulgated under the HealthChoices Program. Magellan may audit Provider for compliance with such standards, rules and regulations.
- ▶ PA Magellan Medicaid Addendum 5.19 Compliance with Fraud, Waste and Abuse Policies: Provider agrees to comply with Magellan's Policies and Procedures related to Fraud, Waste and Abuse in order to comply with the Deficit Reduction Act of 2005, American Recovery and Reinvestment Act of 2009, applicable "whistleblower" protection laws, the Federal False Claims Act and State False Claims laws, which may include participation in trainings by Magellan. Provider agrees to comply with Magellan in any investigation of suspected fraud and abuse.

▶ PA Regulatory Amendment 6.1.1 Compliance with Applicable Law: Magellan and Provider shall comply with all applicable State and federal laws and regulations. Magellan and Provider specifically acknowledge that DOH has the authority to monitor and investigate quality of care issues, and to require corrective action or take other administrative action, as authorized by applicable Pennsylvania law and regulations.

## Q&A

- What are the Service Initiation Requirements for Peer Support Services?

  Adult Peer Support Services. To be eligible for adult peer support services, an individual shall meet the following:
  - (a) Be 18 years of age and older.
  - (b) Have the presence of or a history of a serious mental illness.
  - (c) Have a written recommendation for peer support services from a LPHA acting within the scope of professional practice.
  - (d) Chooses to receive peer support services.

Youth and Young Adult Peer Support Services. To be eligible for youth and young adult peer support services, an individual shall meet the following:

- (a) Be 14 years of age and older but under 27 years of age.
- (b) Have the presence of or a history of a **serious emotional disturbance or serious mental illness**.
- (c) Have a written recommendation for peer support services from a LPHA acting within the scope of professional practice.
- (d) Chooses to receive peer support services.

LPHA — Licensed Practitioner of the Healing Arts — A person licensed by the Commonwealth to practice the healing arts. The term is limited to a physician, physician's assistant, certified registered nurse practitioner and psychologist.

SMI—Serious Mental Illness—A condition experienced by persons 18 years of age and older who, at any time during the past year, had a diagnosable mental, behavioral, or emotional disorder that met the diagnostic criteria within the current DSM and that has resulted in functional impairment and which substantially interferes with or limits one or more major life activities. Adults who would have met functional impairment criteria during the referenced year without the benefit of treatment or other support services are considered to have serious mental illness. Substance use disorders and developmental disorders are not included.

SED—Serious Emotional Disturbance—A condition experienced by a person under 18 years of age who currently or at any time during the past year had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the current Diagnostic and Statistical Manual; and that resulted in functional impairment which substantially interferes with or limits the child's role or functioning in family, school, or community activities.

• In Peer Support, may providers round up if the last unit billed is the better part of the unit (i.e. at least 8 minutes of a 15-minute unit)?

No. Per MA Bulletin 99-97-06, the instructions in the provider handbooks require providers to bill for full units of service. The instructions do not allow for rounding, especially for services that are measured in incremental time-specific units. **The full 15-minutes of service must be provided in order to bill 1 unit of Peer Support Services** (the only exceptions to this rule are for Targeted/ Blended Case Management services; Crisis Intervention services; and Family-Based Mental Health services).

Are Encounter Forms required for Peer Support Services?

Yes. Back in 2014, as a result of Magellan's ongoing auditing practices and the continued expansion of fraud, waste and abuse oversight responsibilities, we identified the need for consistent and comprehensive requirements in the attainment of signature verification for service encounters (i.e. Encounter Forms).

Magellan requires providers of community-based services to obtain a signed Encounter verification form for each face-to-face contact that results in a claim being submitted to Magellan. Providers may determine how they comply with and monitor this requirement; however at a minimum, the following information must be recorded on the Encounter: date of service, start and end time of the session (the actual time in clock hours, not the duration; i.e. '2:00 PM-4:00 PM', not '2 hours'), the rendering provider's signature and the member or guardian's (if under 14) signature. The signed Encounter Forms should be part of the record at the time of a Magellan audit or review. If a provider is unable to obtain a signature on the Encounter Form (including refusal), it must be documented why and attempts should be made to obtain a signature the following session.

As a reminder, Encounter Forms offer an extra check and balance for an agency to ensure that services delivered in the community are done so as documented. As such, this mechanism for oversight and control is best enforced by obtaining pertinent information which can verify the provision of services. Medicaid providers across the country surrender millions of dollars annually due to staff persons falsifying claims and/or billing for services not rendered. Thus, securing and monitoring Encounter Forms should be viewed as a mutual aid for our battle against Fraud, Waste & Abuse.

Are Travel or Transportation reimbursable in Peer Support Services?

No, in the Pennsylvania HealthChoices program, transportation is not a billable service for PSS. The standards for Peer Support Services state "travel time, staff meetings, record-keeping activities, and other non-direct services are not compensable." Agency policies for PSS may or may not allow for transporting an individual admitted to the PSS program. The agency needs to provide training to the CPS staff on policies related to non-billable transportation. When agency policy permits a CPS to transport an individual, PSS should not be provided during the time of transport. Documentation (i.e. progress notes) <u>should clearly demonstrate</u> that time spent in travel and transportation is not being included in the billable time. There are some allowances for "Travel Training" which refers to a Certified Peer Specialist working with an individual who requires development in relation to learning a specific skill such as riding the bus. Travel transportation may be billable time – if, and only if the Treatment Plan/ Recovery Plan/ Individual Service Plan contains a goal related to the consumer needing to gain this skill, and that the progress notes show work related to this goal. The goal must be time-limited.

\*\*As a reminder, effective 7/1/18, OMHSAS is requiring that Peer Support Service providers become licensed as free standing. PSS providers who have a peer program that is tied to another base license are being required to obtain their own certificate of compliance (license). PSS providers are also required to obtain updated PROMISe enrollment upon completion of the licensing process.

At Magellan, we will continue to educate our providers with updated MA Bulletins, Regulations and other pertinent information in order to ensure Compliance. Although providers are ultimately responsible for knowing and complying with all applicable regulations, we proactively engage providers on an ongoing basis to make sure they are aware of compliance related requirements and expectations. Medicaid Program Integrity is truly a collaborative effort between our providers, county customers, Magellan, BPI and other oversight agencies. The monthly e-mail blast topics are generated from audit results and trends; however, are also sent in response to recent Magellan policy updates; newly released or relevant MA Bulletins and Policy Clarifications; or Regulation changes. The intention is to afford our providers with as many resources as possible to combat FWA and reduce overpayments.

Thank you for your ongoing hard work and dedication to our members!

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