

Quality Assurance Bulletin

Quality Assurance Division

County of Los Angeles – Department of Mental Health

Jonathan E. Sherin, M.D., Ph.D., Director

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CO-PRACTITIONER UPDATES FOR DIRECTLY OPERATED PROVIDERS

This Bulletin serves as an update for directly operated providers to QA Bulletin No. 18-01 which announced the State Department of Health Care Services (DHCS) requirement that a separate claim must be made for each practitioner, including co-practitioners, that includes the practitioner's own National Provider Identifier (NPI).

Since QA Bulletin No. 18-01 was issued, the QA Division has been working with DHCS as well as Los Angeles County Department of Mental Health (LACDMH) divisions/bureaus to determine how best to address the new requirement. Currently, the Integrated Behavioral Health Information System (IBHIS) is not able to generate separate claims for practitioners based on a single progress note. LACDMH is working with the vendor to attain this functionality. In the interim, to reduce disruption and preserve clinical record continuity and accurate reporting of services, LACDMH is making the following changes in IBHIS effective August 13, 2018. Please note that practitioners do not need to make any changes in how they document progress notes for services with a co-practitioner(s).

CHANGES IN IBHIS

- Scheduling Calendar: All fields related to co-practitioner will be removed from appointments because
 these fields are tied to claiming. A new "BLOCK Co-Practitioner" service code will be available for
 staff who want to reserve time on their calendar for appointments when they will function as a copractitioner.
- Progress Notes: The face-to-face, other time and total duration fields will be removed. Copractitioner name will remain. The co-practitioner name must be entered directly on the progress note because it will no longer populate from the scheduling calendar.
- Edit Service Information: The co-practitioner and duration fields will remain to allow modifications to previously submitted services; however, staff should not add a co-practitioner and duration using these fields for services on or after August 13, 2018.

REMINDERS/WHAT YOU NEED TO DO

- As always, providers should carefully consider whether the involvement of a co-practitioner in the service is clinically necessary.
- If it is determined that a co-practitioner is clinically needed for the service, then the progress note must clearly identify his/her specific intervention or contribution to the service.

If Directly-Operated providers have any questions regarding this Bulletin, please contact your Service Area QA Liaison. For Legal Entity providers, this Bulletin is for informational purposes only. No additional action need be taken.

c: Director's Management Team
Program Managers I, II, III
Department QA staff
QA Service Area Liaisons
Legal Entity Executive Management
Legal Entity QA Contacts

Judith Weigand, Compliance Program Office Zena Jacobi, Central Business Office Michael Tredinnick, Managed Care Giri Patterikalam, Revenue Systems Mirian Avalos, Chief Information Office Bureau