May 2011

Compliance Q & A: Documentation Issues that frequently result in audit recoupment.

 Can clinical or office staff bill Medi-Cal for transportation of a client from one location to another for any reason?

Answer: NO, transportation of clients is **never** a service billable to Medi-Cal.

 Can a client be provided billable services such as Individual Therapy or Case Management during the initial 60-Day or 30-Day Assessment Period <u>without</u> completing a "Treatment Plan for Non-Assessment Services Provided During the Assessment Period" (AKA: Mini CSP) form?

<u>Answer</u>: NO, **all mental health services other than assessment** are considered "planned services" and therefore require the short-form client service plan (or "Mini CSP") to be completed by a provider in order to authorize any planned services deemed necessary prior to completion of the full 60-Day/30-Day Assessment and client service plan (CSP). Note: Psychological Testing is considered assessment, and does not require a Mini CSP to be in place in order to bill Medi-Cal for testing services.

• Is it really such a big deal if a provider mistakenly uses the wrong CPT code on the Encounter Document (ED) to indicate the amount of service minutes billed for the services rendered? For example, mistakenly using the 90808 CPT on the ED rather than 90804, when both are Individual Therapy codes?

<u>Answer</u>: YES, using the wrong CPT code results in inaccurate billing of client services and will result in either over-billing or under-billing to Medi-Cal. We lose in either scenario.

Is it OK if the DSM diagnoses on the Encounter Document (ED) and/or progress note does not exactly
match the diagnoses on the Master Treatment Plan (MTP)? Similarly, is it OK if the diagnoses on the ED
don't match the progress note exactly?

<u>Answer</u>: NO, the diagnoses on the ED and progress note must all match and be the most current up to date diagnoses listed on the client's MTP. All diagnoses should be listed on every ED, either in the "Treated Today" or "Other Diagnoses" columns – whichever is applicable. In addition, all diagnoses should be listed on every progress note as well.

 Can therapy or case management services be billed to Medi-Cal if they don't specifically address the mental health condition and the client service plan goals/milestones?

<u>Answer:</u> No, mental health services must always address the client's goals/milestones as set forth in their specific agreed-upon service plan in order for those services to be billed to Medi-Cal. Note: Services primarily focused on substance abuse treatment are **never** billable to Medi-Cal.