

Mental Health Notes

3/17/16

Attendees

- Central Office: Sue Wherry, Michelle Buskey, Seth Schreiber
- Region 1: Holly Morganstean, Mary Payton, ~~Holly Bonwell~~
- Region 2: Joyce Lyons, ~~Dea Hibdon~~,
- Region 3: Sherri Edwards, Trisha Hammond, ~~Heather Taylor~~
- Region 4: Jennifer Burlage, Kari Portales, Julie Matta, ~~Teresa Shackelford~~
- Region 5: Sally Bryan, Pam Shropshire, ~~Scott Rasmussen~~
- Region 6: Cindy Wilson, ~~Michele Osmond~~, ~~Paula Miller~~
- Region 7: Randy Rodriguez, Danielle Stohl
- Hub Admin: ~~Tracey Sessions~~, ~~Gina Westcott~~, ~~Todd Hurt~~

IJOS In WITS – Demonstrated the functionality of the IJOS interface by walking thru the quick start guide posted on the web site. The quick start guide is located at www.WITS.idaho.gov under WITS user guides. It was requested that participants on the call provide the information to CMH staff in the Region.

** Note: Upon receiving reports of regional staff not being to access this information, it has been determined this functionality is NOT working correctly in WITS. We will send an update when the issue is identified and has been 'fixed'.

WITS Updates – Enhancements in 18.3, 18.4 18.5 and 18.6 Releases were reviewed and demonstrated. The WITS production sites in Idaho were updated with the 18.5 release on Wednesday 3/16/16. Included in the release were 4 enhancements directly related to Mental Health.

- Client duplicate search Algorithm- expanded the search for a client already entered in WITS for the purpose of reducing duplications
- Allowing the creation of a Misc. note from the scheduler list
- Addition of the Health Information Management Module
- Removed the requirement for a diagnosis on all domains and the requirement entering of a GAF.

The next release 18.6 is scheduled to include the following 2 enhancements;

- The Client Eligibility information will now be included in the consented activity list as an option when consenting records to a different agency.
- The default date and time will be removed from the Non-Episode notes and the duration time will match with other duration field in WITS calculating Mins. instead of Hrs.

NPI #'s for ALL staff providing billable services. - The Revenue Unit has informed us that beginning 4/1/16 the Insurance companies will not accept billing without an NPI number for each provider. This means any staff that is providing billable services will need to apply for an NPI number. In the past the RWA's applied for the NPI numbers for the clinics however it is recommended that the individual's complete their own application so they have the password and information needed for updating their profiles in the future if needed. Many of the staff may already have an NPI number as they are required by most community providers with billable services. Each person only needs 1 NPI number which can be used at any site.

Thank-you to Sally in Region 5 for providing the following information for assisting staff with the application process:

Apparently filling the application isn't as straight forward as originally thought.

Click on this link <https://nppes.cms.hhs.gov/NPPES/Welcome.do>

Use the Blue background area to first create a login (go to the link above to see the page below). After you have created the login you will go back to this page and log in at which point you will fill out an application as an individual.

How to apply for an NPI

Individual Providers:

As an Individual Provider, you may only have a single NPI, which will be associated with your unique, individual information. Once you login to NPPES, you will be able to complete your NPI application.

1. **Create a Login** through the Identity & Access Management System (I&A).
2. Login to NPPES with your I&A Username and password.
3. Complete the NPI application. *Estimated time to complete the NPI application form is 20 minutes.*

Healthcare Provider Organizations:

Healthcare Organizations are currently required to have a separate Username and password for each NPI associated with the organization.

1. **Create an NPPES ONLY Username and password** for the NPI you are applying for.
2. Complete the NPI application. *Estimated time to complete the NPI application form is 20 minutes.*

DIFFERENT LOOK, SAME INFORMATION: If you have accessed NPPES before, your existing account information has not changed.

Manage or Apply for your personal NPI Record

An NPI assigned to you, an Individual who renders health care services.

User ID:

Password:

Login



Forgot User ID or Password?

New Individual Provider in need of an NPI or have never accessed NPPES to view/update your NPI record? [Create a Login.](#)

Manage your Individual Provider [Login Account Information.](#)

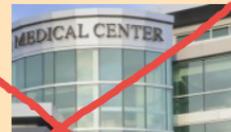
Manage or Apply for NPI Records for an Organization

NPI associated with your Healthcare Organization

User ID:

Password:

Login



Forgot Password?

[Create Login for NPPES Only and Apply for an NPI for a Healthcare Organization.](#)

ⓘ If you need to access PECOS or HITECH on behalf of your Healthcare Organization, you must **Create a Login** in the Identity & Access System (I&A).

The purpose of the NPI number:

The Administrative Simplification provisions of the *Health Insurance Portability and Accountability Act of 1996 (HIPAA)* mandated the adoption of standard unique identifiers for health care providers and health plans. The purpose of these provisions is to improve the efficiency and effectiveness of the electronic transmission of health information. The Centers for Medicare & Medicaid Services (CMS) has developed the **National Plan and Provider Enumeration System (NPPES)** to assign these unique identifiers.

Some common taxonomies for our agency are:

Taxonomy name	Taxonomy #	definition
Counselor - Mental Health	101YM0800X	Counselor A provider who is trained and educated in the performance of behavior health services through interpersonal communications and analysis. Training and education at the specialty level usually requires a master's degree and clinical experience and supervision for licensure or certification.
Social Worker - Clinical	1041C0700X	Clinical A social worker who holds a master's or doctoral degree in social work from an accredited school of social work in addition to at least two years of post-master's supervised experience in a clinical setting. The social worker must be licensed, certified, or registered at the clinical level in the jurisdiction of practice. A clinical social worker provides direct services, including interventions focused on interpersonal interactions, intrapsychic dynamics, and life management issues. Clinical social work services are based on bio-psychosocial perspectives. Services consist of assessment, diagnosis, treatment (including psychotherapy and counseling), client-centered advocacy, consultation, evaluation, and prevention of mental illness, emotional, or behavioral disturbances.

Case Manager/Care Coordinator	171M00000X	<p>Case Manager/Care Coordinator</p> <p>A person who provides case management services and assists an individual in gaining access to needed medical, social, educational, and/or other services. The person has the ability to provide an assessment and review of completed plan of care on a periodic basis. This person is also able to take collaborative action to coordinate the services with other providers and monitor the enrollee's progress toward the cost-effective achievement of objectives specified in the plan of care. Credentials may vary from an experience in the fields of psychology, social work, rehabilitation, nursing or a closely related human service field, to a related Assoc of Arts Degree or to nursing credentials. Some states may require certification in case management.</p>
Social Worker	104100000X	<p>Social Worker</p> <p>A social worker is a person who is qualified by a Social Work degree, and licensed, certified or registered by the state as a social worker to practice within the scope of that license. A social worker provides assistance and counseling to clients and their families who are dealing with social, emotional and environmental problems. Social work services may be rendered to individuals, families, groups, and the public.</p>
RN - Psychiatric/Mental Health	163WP0808X	No Definition
RN - Psychiatric/Mental Health, Adult	163WP0809X	No Definition
Registered Nurse	163W00000X	
		Registered Nurse

		(1) A registered nurse is a person qualified by graduation from an accredited nursing school (depending upon schooling, a registered nurse may receive either a diploma from a hospital program, an associate degree in nursing (A.D.N.) or a Bachelor of Science degree in nursing (B.S.N.), who is licensed or certified by the state, and is practicing within the scope of that license or certification. R.N.'s assist patient in recovering and maintaining their physical or mental health. They assist physicians during treatments and examinations and administer medications. (2) A provider who is trained and educated in a formal nursing education program at an accredited school of nursing, passes a national certification examination, and is licensed by the state to practice nursing. The individual provides nursing services to patients or clients in areas such as health promotion, disease prevention, acute and chronic care and restoration and maintenance of health across the life span.
Case Manager/Care Coordinator	171M00000X	Case Manager/Care Coordinator
Peer Specialist	175T00000X	Peer Specialist Individuals certified to perform peer support services through a training process defined by a government agency, such as the Department of Veterans Affairs or a state mental health department/certification/licensing authority.

MH Billing- Client Group Enrollments.-

As we continue to work thru the process of automating the billing from WITS, there are areas of concern that need to be updated. The Client Group Enrollments is an area we need to focus on to insure the data is entered correctly for billing purposes. When entering a Client group Enrollment (CGE) Please designate if the client has Medicaid, Medicare, Group Insurance or Self-Pay by selecting the

appropriate Payor-Type allowing us to filter for the billing report.

And Complete the Billing Information. If the Client is a Minor, Please enter the Parent's Address in the Subscriber/Responsible Party area unless otherwise designated on the Insurance card:

- If the Client has Medicaid, Do NOT enter a Self-Pay Plan as we cannot bill for their services.
- Most clients who have Medicare coverage do not have a Fee percentage in their record and therefore they would NOT have a Self-Pay plan entered as we cannot bill for their services.
- IF a client has Medicare and a qualifying income **AND** a Fee % in WITS they would then need to have a Self-Pay plan entered.
- Do NOT enter a Self-Pay plan for Client's who have a Group Insurance Plan. Their Fee % in their record will determine their responsibility.
- The Self-Pay plan is for those clients who have no other form of Benefit's and their Fee % in their record will determine their responsibility.
- Each client should have only 1 active Self-Pay plan.
- If/When a client's plan changes make sure to enter an End Date in the previous plan.

FEE Determination.-

Please review the Policy for Fee Determinations regarding Eligible Income. It has been identified that ineligible income has been used when completing the forms.

Calculating Monthly Income

1. Income received from the following sources is used in calculating monthly income:
 - a. Earnings/wages
 - b. Unemployment compensation
 - c. Workers' compensation
 - d. Social Security
 - e. Public assistance (not SSI/SSDI)
 - f. Veterans payments
 - g. Survivor benefits
 - h. Pension or retirement income
 - i. Interest, dividends, rents and royalties
 - j. Income from estates, trusts, alimony, child support, and other miscellaneous sources.
2. The following income is not considered in calculating monthly household income:
 - a. Income of non-relatives, children, adult siblings, and minor siblings
 - b. Supplemental Security Income (SSI)
 - c. Adoption Subsidy
 - d. Social Security Disability Income (SSDI).

Other:

There were several suggestions for improving the scheduler functionality including:

1. Adding the Program Enrollment type to the appointment so the provider will know if they need to enter a misc. note or an encounter.
2. Moving the Scheduler access to the top ribbon of the WITS screen making it more accessible.