REASONS FOR RECOUPMENT

EPSDT AUDIT IN FY 05-06

MEDICAL NECESSITY:

1. Documentation in the chart does not establish that the beneficiary has a diagnosis contained in Section 1830.205(b)(1)(A-R).

<u>CCR</u>, Title 9, Chapter 11, Section 1830.205(b)(1)(A-R)

- 2. Documentation in the chart does not establish that, as a result of a mental disorder listed in Section 1830.205(b)(1)(A-R), the beneficiary has, at least, one of the following impairments:
 - A significant impairment in an important area of life functioning
 - A probability of significant deterioration in an important area of life functioning
 - A probability the child will not progress developmentally as individually appropriate
 - For full-scope Medi-Cal (MC) beneficiaries under the age of 21 years, a condition as a result of the mental disorder that specialty mental health services can correct or ameliorate

<u>CCR</u> Title 9, Chapter 11, Sections 1830.205(b)(2)(A),(B),(C) and 1830.210(a)(3)

- Documentation in the chart does not establish that the focus of the proposed intervention is to address the condition identified in <u>CCR</u>, Title 9, Chapter 11, Sections 1830.205(b)(2)(A),(B),(C)—(see below):
 - A significant impairment in an important area of life functioning
 - A probability of significant deterioration in an important area of life functioning
 - A probability the child will not progress developmentally as individually appropriate
 - For full-scope MC beneficiaries under the age of 21 years, a condition, as a result of the mental disorder, that specialty mental health services can correct or ameliorate

<u>NOTE</u>: EPSDT services may be directed toward the substance abuse disorders of EPSDTeligible children who meet the criteria for specialty mental health services under this agreement, if such treatment is consistent with the goals of the mental health treatment and services are not otherwise available.

<u>CCR</u>, Title 9, Chapter 11, Sections 1830.205(b)(3)(A)

- 4. Documentation in the chart does not establish the expectation that the proposed intervention will do, at least, one of the following:
 - Significantly diminish the impairment
 - Prevent significant deterioration in an important area of life functioning
 - Allow the child to progress developmentally as individually appropriate
 - For full-scope M/C beneficiaries under the age of 21 years, correct or ameliorate the condition

<u>CCR</u>, Title 9, Chapter 11, Sections 1830.205(b)(3)(B)(1),(2), and (3)

REASONS FOR RECOUPMENT

EPSDT AUDIT IN FY 05-06

CLIENT PLAN:

5. Initial client plan was not completed within time period specified in MHP's documentation guidelines, or, lacking MHP guidelines, within 60 days of intake unless there is documentation supporting the need for more time.

MHP Contract, Exhibit A, Attachment 1, Appendix C

6. Client plan was not completed, at least, on an annual basis as specified in MHP's documentation guidelines.

MHP Contract, Exhibit A, Attachment 1, Appendix C

7. No documentation of client or legal guardian participation in the plan or written explanation of the client's refusal or unavailability to sign as required in the MHP Contract with the DMH.

MHP Contract, Exhibit A, Attachment 1, Appendix C

8. For beneficiaries receiving TBS, no documentation of a plan for TBS.

DMH Letter No. 99-03, pages 6-7

PROGRESS NOTES:

9. No progress note was found for service claimed.

CCR, Title 9, Chapter 11, Section 1810.440(c); MHP Contract, Exhibit A, Attachment 1, Appendix C

10. The time claimed was greater than the time documented.

CCR, Title 9, Chapter 11, Section 1810.440(c); MHP Contract, Exhibit A, Attachment 1, Appendix C

11. The progress note indicates that the service was provided while the beneficiary resided in a setting where the beneficiary was ineligible for FFP, e.g., Institute for Mental Disease, jail, and other similar settings, or in a setting subject to lockouts per Title 9, Chapter 11.

<u>CCR</u>, Title 9, Chapter 11, Sections 1840.312(g)&(h) and 1840.360-374; <u>CFR</u>, Title 42, Sections 435.1008 and 435.1009; and <u>CCR</u>, Title 22, Section 50273(1-9)

12. The progress note clearly indicates that the service was provided to a beneficiary in juvenile hall and when ineligible for MC. (Dependent minor is MC eligible. Delinquent minor is only MC eligible after adjudication for release into community.)

<u>CFR</u>, Title 42, Sections 435.1008 and 435.1009; and <u>CCR</u>, Title 22, Section 50273(1-9)

REASONS FOR RECOUPMENT

EPSDT AUDIT IN FY 05-06

PROGRESS NOTES:

- 13. The progress note indicates that the service provided was solely for one of the following:
 - a) Academic educational service
 - b) Vocational service that has work or work training as its actual purpose
 - c) Recreation
 - d) Socialization that consists of generalized group activities that do not provide systematic individualized feedback to the specific targeted behaviors

<u>CCR</u>, Title 9, Chapter 11, Section 1840.312(a),(b),(c), and (d)

14. The claim for a group activity was not properly apportioned to all clients present.

<u>CCR</u>, Title 9, Chapter 11, Section 1840.316)b)(2)

15. The progress note does not contain the signature (or electronic equivalent) of the person providing the service.

MHP Contract, Exhibit A, Attachment 1, Appendix C

16. The progress note indicates the service provided was solely transportation.

<u>CCR</u>, Title 9, Chapter 11, Sections 1810.355(a)(1)(B), 1840.312(f), and 1810.247, and 1840.110(a)

17. The progress note indicates the service provided was solely clerical.

<u>CCR</u>, Title 9, Chapter 11, Sections 1840.312(f), and 1810.247, 1840.110(a), and 1830.205(b)(3)

18. The progress note indicates the service provided was solely payee related.

CCR, Title 9, Chapter 11, Sections 1840.312(f), and 1810.247, 1840.110(a), and 1830.205(b)(3)

19. No service provided: Missed appointment per DMH Letter No. 02-07.

DMH Letter No. 02-07

- 20. For beneficiaries receiving TBS, the TBS progress notes overall clearly indicate that TBS was provided solely for one of the following reasons:
 - a) For the convenience of the family, caregivers, physician, or teacher
 - b) To provide supervision or to ensure compliance with terms and conditions of probation
 - c) To ensure the child's/youth's physical safety or the safety of others, e.g., suicide watch
 - d) To address conditions that are not a part of the child's/youth's mental health condition

DMH Letter No. 99-03, page 4

21. For beneficiaries receiving TBS, the progress note clearly indicates that TBS was provided to a beneficiary in a hospital mental health unit, psychiatric health facility, nursing facility, or crisis residential facility.

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