## Documentation Tip: Connecting Clients to Telehealth

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## Telephone vs. Telehealth



## Telephone vs. Telehealth

#### Telephone

- Two-way real-time audio communication
- Use location "Phone"

#### Telehealth

- Two-way real-time audio AND VISUAL communication
- Use location "Telehealth"

# Great! Can I Claim for Connecting Clients to Telehealth?



## Maybe!





## Is this a Medi-Cal billable service?

Questions to consider:

- Am I providing a specialty mental-health service?
- Am I providing a medically necessary specialty mental-health service?

 Am I providing a medically necessary specialty mental-health service that will help the client make progress on a documented client plan goal?

# Am I providing a specialty mental-health service?

#### Targeted Case Management

- Linking the client to resources necessary to achieve client plan goals
- Resources: psychiatry, video-conferencing software/sites, internet service providers, smart phones, etc.

#### Collateral

- Educating significant support people in the client's life about how best to support the client in achieving client plan goals
- Supports: Helping the client log into video conferences, helping the client maintain appointments, etc.

#### Rehab/IHBS

- Teaching or coaching the client on skills needed to achieve client plan goals
- Skills: How to use technology, how to keep appointments, how to manage frustration, etc.

# Am I providing a **medically necessary** specialty mental-health service?

#### Targeted Case Management

- Are the client's psychiatric symptoms preventing them from being able to access these resources necessary to achieve their client plan goals?
- Could they successfully accomplish this activity on their own?

#### Collateral

- Are the client's psychiatric symptoms creating barriers to educating their significant support people about how best to support them in achieving client plan goals?
- Could the client successfully accomplish this education/advocacy on their own?

#### Rehab/IHBS

- Are the client's psychiatric symptoms interfering with skillful use of telehealth needed to achieve client plan goals?
- Could they successfully accomplish this activity on their own?

# Am I providing a medically necessary specialty mental-health service that will help the client make progress on a documented client plan goal?

- Targeted Case Management
  - Does the client have an identified need (CANS/ANSA) to access these resources?
  - Does the client have a client-plan goal or intervention requiring access to these resources?

#### Collateral

- Does the client have an identified need (CANS/ANSA) to educate their significant support people about how best to support them in achieving client plan goals?
- Is this education in support of a goal on the client plan?

#### Rehab/IHBS

- Does the client have an identified need (CANS/ANSA) for the skill you want to teach?
- Does the client have a client-plan goal to learn or practice this skill, or is this pre-requisite for a skill that is on the client plan?

### Remember!

- Reassessments should be done when there is a significant change in the client's condition
- Global pandemics and shelter-in-place orders would likely qualify as a significant change in external circumstances for many clients
- Client Plan Addendums exist
- If it wasn't identified as a need on the last assessment or identified as a goal on the last plan, you can add it now if it's become a clinically significant issue

# Never Claimable as Specialty Mental Health Services:

- X Tech support, unless coaching toward a client plan goal (NPC, Rehab)
- X Scheduling appointments (NPC)
- X Waiting while a client fixes a technical problem (can document time in Cancellation or No-Show note, if applicable)