

The logo for Alliance Behavioral Healthcare features the word "Alliance" in a large, blue, serif font, with "BEHAVIORAL HEALTHCARE" in a smaller, green, sans-serif font below it. The background of the slide is a light gray with a fine dot grid pattern. In the top right corner, there is a curved graphic element consisting of three parallel bands in orange, green, and blue. The background image is a faded, grayscale photograph of several hands stacked on top of each other, symbolizing support and teamwork.

Alliance

BEHAVIORAL HEALTHCARE

Steps for a Successful Monitoring

Routine LIP Monitoring

- Provider monitoring process designed for:
 - Entry into provider network
 - Evaluation of service providers against quantitative and qualitative measures
- Monitors both Medicaid and State-funded behavioral health services
- Training covers routine LIP monitoring process
 - Not the same as an investigated or targeted review

Prior to Monitoring

- Implement Quality Management strategies now
 - Conduct regular record reviews
 - Agencies should consider conducting peer reviews within HIPAA guidelines
- Explore Alliance website
 - Look under the “For Providers” tab for provider monitoring
 - Website contains tools and other trainings

Prior to Monitoring

- Subscribe through Alliance website to receive email updates
- Review Communication Bulletins, Medicaid updates and information updates carefully
- Network with others
- Attend Alliance All-Provider meetings
- Check Alliance website for trainings pertinent to the solo/group LIP practice

Prior to Monitoring

- To ensure agencies have the same amount of time to prepare:
 - Alliance will contact the provider 21-28 days prior to the review
 - We will make all attempts to help you select the best possible day for your practice within the proposed week
 - Information about the monitoring provided in writing by email and/or registered mail depending on your practice's needs

Prior to Monitoring

- To ensure agencies have the same amount of time to prepare:
 - Review your contract
 - Confirm your contact information with Alliance
 - If it is inaccurate according to our records, you will be asked to complete a Notice of Change form and submit it to the Credentialing Department

Prior to Monitoring

- To ensure agencies have the same amount of time to prepare:
 - Review the monitoring tool and guidelines
 - Research citations
 - Ask questions!
 - Review Clinical Coverage policy 8C
 - Review APSM 45-2 (Records Management and Documentation Manual for MH/SA/IDD services in NC)
 - If you have staff, make sure they are trained and informed as well

Claims Sample

- 7 calendar days prior to the monitoring:
 - You will receive a list of consumer names
 - Alliance will not provide specific dates but will inform you of the time period included in the review
 - Sample is random and from a period 6 months prior to review date through the following 90 days
 - Sample for solo practices includes 10 claims and for group practices includes 30 claims

Claims Sample

- 7 calendar days prior to the monitoring:
 - If your practice does not have enough claims in the period we are looking at, Alliance can go up to one year to get the appropriate number

Preparing for the Review

- Alliance will send a list of consumer names and the timeframe in which we are looking approximately 7 calendar days prior to review
 - Organize the medical records so that information is easily accessible
 - Some choose to flag items in the file to make the review flow smoothly

Preparing for the Review

- If your practice uses electronic records:
 - Consult with the Provider Network Evaluator to come up with a plan for the review of records
 - For example, printing out information, logging staff in as an auditor, having staff available to walk monitor through the record (for agencies)
 - If you use an electronic medical records system, we will email the practice the specific dates of service the morning of the monitoring

During the Initial Monitoring

- The morning of the monitoring, please have prepared:
 - All medical files from the list of consumers that was sent to you
 - Blank copies of rights notification, consents, releases of information, client handbooks, etc.
 - A copy of your policies and procedures

During the Initial Monitoring

- At least two Alliance staff will be at your facility during the review so ensure adequate space and privacy
 - If you cannot provide this, the review can occur at an Alliance site
- Entrance interview will be conducted before the review starts
 - Good time to familiarize Alliance staff with how your files are organized and to ask any questions

During the Initial Monitoring

- Have staff available to help navigate records/documentation if needed
 - They do not necessarily need to stay in the same room

During the Initial Monitoring

- Have staff available to help navigate records/documentation if needed
 - They do not necessarily need to stay in the same room
- If the monitor cannot locate an item in the file, we will ask you for it

During the Initial Monitoring

- If documentation for a specific item not immediately available, it will be accepted any time during the on-site review and until 5:15pm the next day
 - For Friday reviews the deadline will be 5:15pm that Saturday to allow each provider has the same amount of time for submission
- While we appreciate the hospitality, we are not allowed to accept any food or drink

Exit Interview

- Occurs following the on-site review to provide you with some immediate feedback
 - Review of any missing items
 - You will be given a list of missing items for reference
 - General information on any major findings, trends, etc.
 - Expectations, if any, for technical assistance needed, plan of correction and follow-up
 - Verify contact(s) for receipt of report

Results Report and POCs

- Comprehensive findings will be sent to you within 15 calendar days
 - You will receive an action letter outlining results of the monitoring
 - Read this letter carefully for next steps
- Possible outcomes:
 - Completed successful monitoring
 - Plan of Correction
 - Recoupment
 - Plan of Correction and recoupment

Results Report and POCs

- Comprehensive findings will be sent to you within 15 calendar days
 - You will receive a completed monitoring tool with comments
 - If recoupment required you will receive an improper payment chart detailing which claims are a payback and why
 - You will receive a payment form that will need to be submitting to the Alliance Finance Department

Results Report and POCs

- Comprehensive findings will be sent to you within 15 calendar days
 - If a POC is required you will receive a statement of deficiencies detailing which items are out of compliance. In addition, we will send you a POC self check list to help with the development of the plan

Results Report and POCs

- Ensure POC is specific and detailed, and addresses all systemic areas noted in findings
- Fully implement the POC
 - Seek technical assistance as warranted
- Letter sent to you will detail steps to be completed to request a reconsideration
 - Includes completing request and submitting supporting documentation
 - Time sensitive as detailed in the action letter

In Summary

- Being prepared ensures a smooth monitoring process
- Ask lots of questions
 - Alliance Evaluators here to provide ongoing technical assistance throughout the process
- Educate yourself on state/federal regulations, HIPAA requirements, clinical coverage policies, and documentation requirements

References

- APISM 45-2 Records Management and Documentation Manual
- DMA CCP 8C