

PROVIDER ALERT

Alert#: **PA-2012-08**

Issued: **August 27, 2012**

To: **Congregate Care Providers**

Subject: **CT BHP Residential Care Team Transition Information**

Dear CT BHP Congregate Care Provider,

As of August 1, 2012, the roles and responsibilities of the CT BHP Residential Care Team (RCT) have changed. CT BHP RCT clinicians have transitioned away from managing individual caseloads and will be moving toward a more macro level involvement with facilities. Due to these changes, RCT clinicians will not be able to offer all of the services that they have previously provided. The Frequently Asked Questions are outlined below to help make this transition as easy as possible.

When will inpatient admissions need to be reported?

Inpatient admissions will need to be reported to the CT BHP within 1 business day of the member entering care.

How will inpatient precertification and One-to-One authorizations be requested?

Inpatient admissions and One-to-One authorization requests will continue to be initiated by calling the CT BHP at 1-877-552-8247 and following the phone prompts indicating that you are completing an inpatient precertification or a One-to-One authorization request. The Customer Service Representative will need to verify your facility name by your TIN or NPI number. Please be specific about the member information and the exact date of admission.

How will Monthly Treatment Planning Progress Reports (MTPPRs) be handled?

MTPPRs must be submitted by their due date or they will be considered late and an administrative denial will be issued. In situations where a staff member is on vacation or out sick, the supervisor or another authorized user can submit an MTPPR in their absence. This process is completed by beginning the MTPPR, documenting another user's ID in the authorized user box, and then saving it as a draft. The supervisor then has the ability to access, view, edit and submit those saved drafts. The authorized user box can be found on the first page of the MTPPR (Level of Care tab). Please do not forget to save the MTPPR to your computer and print them before submitting. You will also have to print out discharges prior to submission. If you were unable to print the MTPPR prior to submitting it, please contact DCF for a copy.

DCF will be utilizing the MTPPRs more frequently than before to monitor care. Please make sure that the start date of the MTPPR is always the indicated due date. All home passes should be documented clearly using the additional fields provided, which will allow you to indicate dates and times. The treatment and discharge plans need to be clearly documented with updates on progress completed monthly.

How will discharges be handled?

All discharges will need to be submitted online within 48 hours of the member leaving services. A future discharge date should never be entered online. A final MTPPR is only required if the discharge date is 14 days or more into the reporting period. If the discharge occurred within 13 days of the last MTPPR, you do not need to complete another MTPPR and can proceed directly to the discharge.

The discharge date needs to be entered as the actual date the member leaves services. Additionally, there needs to be a detailed aftercare plan documented in the discharge. It is important to include all information regarding appointment dates, times and contact information in the discharge.

How does this affect bed-tracking?

It will be very important to report discharges in a timely manner to ensure your bed tracking is current and accurate. You will be responsible for making sure your bed tracking is up to date, which includes entering any projected discharges within 30 days so that DCF can accurately match to available beds. When receiving a possible match, it is critical to submit a response within 72 hours to ensure a smooth matching process.

Who can Residential and Group Home Providers contact for specific member questions?

You can receive assistance with specific member cases by contacting your local Department of Children and Families Area Office. You may also request to speak with a representative on the residential care team who can assist you in making an intensive care management (ICM) referral by calling the CT BHP at 1-877-552-8247.

Thank you for your cooperation and patience during this transition process. If you have any questions, please feel free to contact the CT BHP at 1-877-552-8247.

Provider Relations Department
Connecticut Behavioral Health Partnership