

DHS/DMH Post-Payment Review Tool

FY12 Changes

There were several changes made to the FY12 Post Payment Review tool. Some items were deleted, one was added, and some items were combined. The remaining items were re-ordered to reflect the order they are used by reviewers. The table below reflects the changes made to the tool.

FY11 Item number(s)	Change that occurred/ FY11 Description of Item	FY12 Item Number	FY12 Description of Item
15 and 19	Two items were combined into one item: <i>#15: Note not signed by staff providing service, including signature and credentials.</i> <i>#19: No note to match date of service on billing submitted.</i>	1	No valid note documenting the service could be located.
13	No change: <i>Note describes a service intervention or activity that is not billable.</i>	2	Note describes a service intervention or activity that is not billable.
14	No change: <i>Service provided by unqualified staff.</i>	3	Service provided by unqualified staff.
6	No change: <i>No amount of time documented.</i>	4	No amount of time documented
1 and 21	Two items were combined into one item: <i>#1: The Mental Health Assessment report that relates to the claim is not signed and dated by the LPHA.</i> <i>#21: The Mental Health Assessment in effect at the time of the claim could not be located in the clinical record.</i>	5	No valid Mental Health Assessment could be located.
3 and 20	Two items were combined into one item: <i>#3: The Individual Treatment Plan (ITP) is not timely/not in effect at the time of service.</i> <i>#20: The Individual Treatment Plan in effect at the time of the claim could not be located in the clinical record.</i>	6	No valid Individual Treatment Plan could be located.
16	Rewording only: <i>Specific service not authorized by ITP.</i>	7	Specific service does not appear on ITP.
N/A	NEW FOR FY12	8	ITP review does not demonstrate a review of progress towards goals or an evaluation of needed services.
4	No change: <i>Time billed is greater than time documented.</i>	9	Time billed is greater than time documented.
9	No change: <i>Location of service not correctly noted on-site vs. off-site.</i>	10	Location of service not correctly noted on-site vs. off-site.
12	No change: <i>Note describes a different service than billing submitted.</i>	11	Note describes a different service than billing submitted.

FY11 Items Deleted From the FY12 Post-Payment Review Tool:

2	The Mental Health Assessment does not contain all elements as required by Rule 132, 2008 version.
5	The volume of service activity documented in the note does not support the amount of time billed.
10	Documentation must include a <u>description of the interaction</u> that occurred during service delivery, including the <u>consumer's response</u> to clinical intervention and <u>progress toward attainment of the goals</u> in the ITP.
7	Documentation does not identify allowed mode of delivery (group, individual or family modality).
8	Documentation does not include the setting where services were rendered.
11	Service provided to an ineligible person—service not available for persons in consumer's age category.
17	The specific service is authorized by the ITP but is not based on clinical need as identified in the MHA or any additional evaluations.
18	Service provided to ineligible person—diagnosis in the clinical record is not a covered diagnosis.