

Rehabilitative Behavioral Health Services Administrative Standards – Client Information and Authorization

Division of Behavioral Health
Quality Assurance Team
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Disclaimer

- Materials presented today are not comprehensive. This training does not take the place of reading the provider policy and procedure manual. Prior to treatment, all beneficiaries must meet criteria for medical necessity for that service. All information in this presentation pertains to South Carolina Department of Health and Human Services (SCDHHS) Healthy Connections Medicaid beneficiaries.

Purpose of the Orientation

- To act as a guide for Rehabilitative Behavioral Health Services (RBHS) providers who are learning about SC Medicaid policy and procedures prior to rendering RBHS.

While this presentation is designed to enhance understanding of the Medicaid standards regarding the RBHS Policy Manual, all aspects and policy are not covered in this presentation. Please review the RBHS Manual and the Administrative and Billing Manual.

- To help providers avoid potential Medicaid recoupment.

Consent for Treatment

- The Consent for Treatment form must be dated and signed by the beneficiary, parent, legal guardian, primary caregiver (in cases of a minor) or legal representative and must be obtained at the onset of treatment from all beneficiaries and placed in the beneficiary's file from each treatment provider.
- If the beneficiary, parent, legal guardian or legal representative cannot sign the consent form due to a crisis and is accompanied by a next of kin or responsible party, that individual may sign the consent form.
- If the beneficiary is alone and unable to sign, a statement such as "beneficiary unable to sign and requires emergency treatment" must be noted on the consent form and must be signed by the Licensed Practitioner of the Healing Arts (LPHA) and one other staff member.
- The beneficiary, parent, legal guardian, or legal representative should sign the consent form as soon as circumstances permit.
- A new consent form should be signed and dated each time a beneficiary is readmitted to the system after discharge.

Notice of Privacy Practice/Authorization to Release Information

- As of April 14, 2003, for most covered entities, healthcare providers are required to comply with privacy standards of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, as amended, which includes providing all patients and/or clients with a Notice of Privacy Practices.
- The notice should include sufficient information to disclose to each Medicaid beneficiary the provider's intent to release any medical information necessary for processing claims, including Medicaid claims.
- Providers who have not issued their patients/clients a Notice of Privacy Practices should obtain authorization to release such information to SCDHHS.
- The authorization must be signed and dated by the beneficiary and must be maintained in the patient's/client's record.

Parent/Caregiver/Guardian Agreement

- For beneficiaries zero through 15 years of age, the Parent/Caregiver/Guardian (PCG) Agreement to Participate in Community Support Service (CSS) Form must be completed and maintained in the beneficiary's record.
- In the unlikely event that the beneficiary's family or caregiver is unable or unwilling to be an active beneficiary, this must be clearly documented in the clinical record.
- The PCG Agreement Form must be updated every 90 calendar days and present in the record.

Accreditation

- All private RBHS providers must be accredited by one of the following accreditation organizations:
 - Commission on Accreditation of Rehabilitation Facilities (CARF)
 - Council on Accreditation (COA)
 - The Joint Commission (TJC)
- Private RBHS providers must also meet the following requirements to be considered fully accredited:
 - Each discrete service rendered by private RBHS providers must be accredited.
 - All locations owned and/or operated by private RBHS providers in South Carolina and/or the South Carolina Medicaid Service Area (SCMSA) must be accredited.
 - Accreditation for each service is a prerequisite for billing of that service. Any claims submitted for services that are not accredited are not reimbursable and may result in termination.

Accreditation (Cont.)

- Providers must maintain and be able to provide, upon request, evidence of the accreditation certificate, the accreditation letter identifying the specific services that have been accredited, and the most recent accreditation survey report.
- Providers must submit evidence of meeting service accreditation requirements to the Division of Behavioral Health on the Accreditation for RBHS Form, located in the RBHS webpage at www.scdhhs.gov.
- All enrolled private RBHS providers shall maintain accreditation status during the entire period of enrollment with SCDHHS.
- Failure to maintain accreditation shall result in termination of enrollment.

Quality Improvement Organization (QIO) Authorization

- CSS' rendered by private RBHS providers to child and adolescent beneficiaries must be prior authorized by the quality improvement organization (QIO), except for beneficiaries in foster care. Services for these beneficiaries must be prior authorized by the South Carolina Department of Social Services (SC DSS).
- When CSS' are added to a current approved course of treatment, each discrete service must be prior authorized by the QIO.
- All RBHS providers shall ensure:
 - That only the authorized units of services are provided and submitted to SCDHHS for reimbursement; and,
 - That all services are provided in accordance with all South Carolina Medicaid Program policy requirements.

