

## Missouri Division of Behavioral Health

<b>Bulletin Number:</b> FY 15—Clinical - 032	<b>CLINICAL SERVICES BULLETIN</b>	<b>Effective Date:</b> February 1, 2015
<b>New</b>	<b>Subject: Billing and Documentation Instructions for Text and Email Communications within Specialized Psychiatric Programs for the Deaf and Hard of Hearing</b>	<b>Number of Pages:</b> 2

### 1. Programs Affected

- 1.1 The Community Services programs at Truman Behavioral Health and BJC Behavioral Health.

### 2. Purpose

- 2.1 The purpose is to pilot the use of text messages and email as billable forms of communication with deaf/hoh individuals who are being served in DMH-approved, specialized psychiatric programs. These communication methods are commonly used by, and deemed culturally appropriate for, deaf/hoh individuals.
- 2.2 Billable services delivered via text/email communication are limited to community support (H0036) and case management (T1016 HN and T1016 HO) and will be limited for use only with individuals who are identified as deaf/hoh in CIMOR. The referenced service codes are available on the Community Services service menu in CIMOR.
- 2.3 This document outlines billing and documentation requirements specific to the use of these service codes.

### 3. Billing Requirements

- 3.1 Service requirements and billing limitations for both community support and case management remain the same. The current service descriptions apply.
  - 3.1.1 The medical necessity of the intervention must be identified in the individual's assessment.
  - 3.1.2 The service needs and the associated interventions must be addressed on the individualized treatment plan.
  - 3.1.3 Restrictions that currently apply to telephonic communications also apply to text/email communications. *For example, texting a consumer to remind them of their upcoming appointment is not a billable service.*
- 3.2 Community support and case management are both 15 minute units of service; standard unit billing calculations still apply, whereas all minutes of a service must be added at the end of a billing day to calculate the number of units to be billed.

## 4. Documentation Requirements

- 4.1 Documentation requirements for both community support and case management remain the same [see 9 CSR 10-7.030 (11)].
  - 4.1.1 All services delivered via text/email must be medically necessary.
  - 4.1.2 Treatment plan goal(s)/objective(s) relevant to the services delivered must be included in the progress note.
  - 4.1.3 When documenting multiple contacts for the same individual throughout a single day, each contact must be documented according to certification standards. Multiple contacts can be recorded in the same service note, so long as service time for each contact is distinguishable. *For example, if a community support specialist had multiple texting contacts with a consumer throughout the day (8:14-8:20 am; 10:36-10:42 am; 4:45-4:50 pm), each conversation would be documented with the specific start and stop times and the specific intervention(s) provided must be identified.* Documentation may consist of multiple progress notes or within the same progress note.

## 5. Other Requirements

- 5.1 Agencies must have DBH-approved policies and procedures for the use of electronic communications that specifically address email and text messaging.
- 5.2 Consent from the individual receiving services must be obtained prior to engaging in electronic communication.
- 5.3 Texting and email communications do not replace face-to-face interventions with individuals served.
- 5.2 Security measures, such as encrypted email servers and password protected electronic devices, must be employed. HIPAA privacy laws concerning Protected Health Information (PHI) do apply to electronic communication. Services must be delivered in accordance with the following guidelines:
  - Encrypt, password protect, and auto-lock phones
  - Install a remote data wiping application to smartphones
  - Inform individuals of risks and benefits of electronic communication
  - Confirm clients' identity each time over text messaging
  - Limit PHI in all electronic communication
  - Document communication summary in case record
  - Delete messages from your phone
  - Encourage clients to delete messages

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