



BHS PROVIDER UPDATES

2019-8

Pathways to Well-Being Monthly Update Bulletin: October 2019

Q & A from Providers:

- Question:** Do BHS Providers still need to assume the role of the PWB Care Coordinator now that the Fred Finch CFT Meeting Facilitation Program is coordinating and facilitating CFT meetings?

Answer: Yes, BHS Providers are expected to assume the role and responsibilities for all youth that are eligible for PWB Enhanced Services. Programs can assign the Care Coordination to the client's therapist or choose a different program staff. The role and responsibilities of Care Coordination for youth eligible for Enhanced Services include the following:

 - Ensuring the CFT Meeting Referral Form is completed in a timely manner in accordance with CFT Meeting mandated timelines, all members of the team are included and copy of form is maintained in hybrid chart
 - Assist in pre-planning for CFT Meetings including client and family preparation and choice of participants is considered; including the identification of informal supports
 - Tracking and adhering to mandated documentation timelines including ensuring completion of CFT Meeting Note, Eligibility for PWB and Enhanced Services Form and Progress Report to CWS Form
 - Ensuring collaboration between Child and Family Team members outside CFT Meetings
 - Discharge planning including warm hand off as needed
- Question:** If a client's CWS case closes while still open to a BHS Program, is the program still required to send the Progress Report to CWS Form to CWS?

Answer: No, if the CWS case is closed during the time the client remains open to a BHS program, the BHS program would not send the Progress Report to CWS Form to CWS. Conversely however, if the BHS Provider closes the assignment and the case will remain open to CWS, the BHS program will send to CWS, the Progress Report to CWS Form along with any updated Client Plan, CANS tool and the Discharge Summary.
- Question:** Are there any circumstances in which ICC SC 82 can be utilized as an unplanned service, prior to the code being added to the client plan?

Answer: Yes, programs do not need to add SC 82 to the client plan if the service is limited to a single event but if providing ICC on a more frequent basis, you must update your client plan to include this intervention.

Reminder:

It is important to check the client assignments tab in CCBH at intake and periodically to view whether there is any other BHS or FFS providers assigned to clients open to your program. If there is another provider assigned, it is important to reach out for collaboration, CFT participation and coordination of care.

October 7, 2019