Agency Audit Planning Meeting:

BHS Compliance Overpayment Monitoring System

FY26-27

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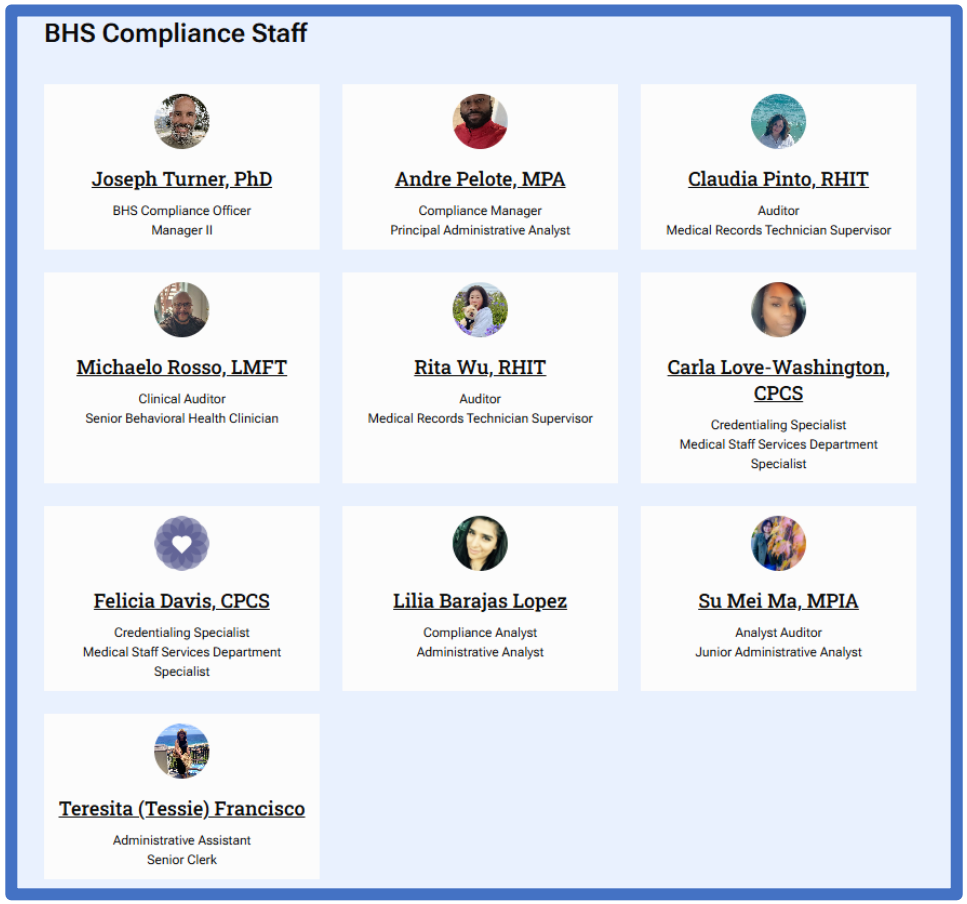
Agenda and Objectives

Item	Objective	Time
Introductions & Framing	• Tell us your name, your agency, your services. • We want to you to feel comfortable and to connect with others.	10mins
Audit Processes	• We work with you - to Plan, Screen Chart Documents, Audit and finalize Corrective Actions. • We want you to have a smooth audit process.	10mins
Chart Materials	• We show you how to assemble and securely submit the chart documents for the audit. • We work with you to ensure the correct documents are present.	10mins
Identify Primary Agency Contact	• One point person for confirming and submitting materials. • Any of your preferred agency staff can included for communication.	5mins
Questions & Comments	• We welcome your feedback, comments and questions.	20mins
Wrap-up	• This presentation is posted on our BHS Compliance Website.	5mins

INTRODUCTIONS AND FRAMING

Introductions

- **Staff from BHS Compliance**
  - *Visit our homepage on sf.gov page to learn more*



Introductions

- **Staff from Organizational Providers**
  - **If you feel comfortable, use the MS Teams Chat feature and tell group about…**
    - Your name, agency, your role…
    - The types of behavioral health services you provide…
    - Any questions or concerns to add to the agenda…

Introductions

- **Identify Agency Staff for Communication & Audit**
  - **<u>One staff member for confirming/submitting</u>**
    - Agency Name, Staff Name, Title, and email
  - **<u>Backup staff member (planned time off, holiday, etc.)</u>**
    - Staff Name, Title, and email
  - **<u>Any agency staff you want to be “carbon copied” on communications</u>**
    - Staff Name, Title, and email

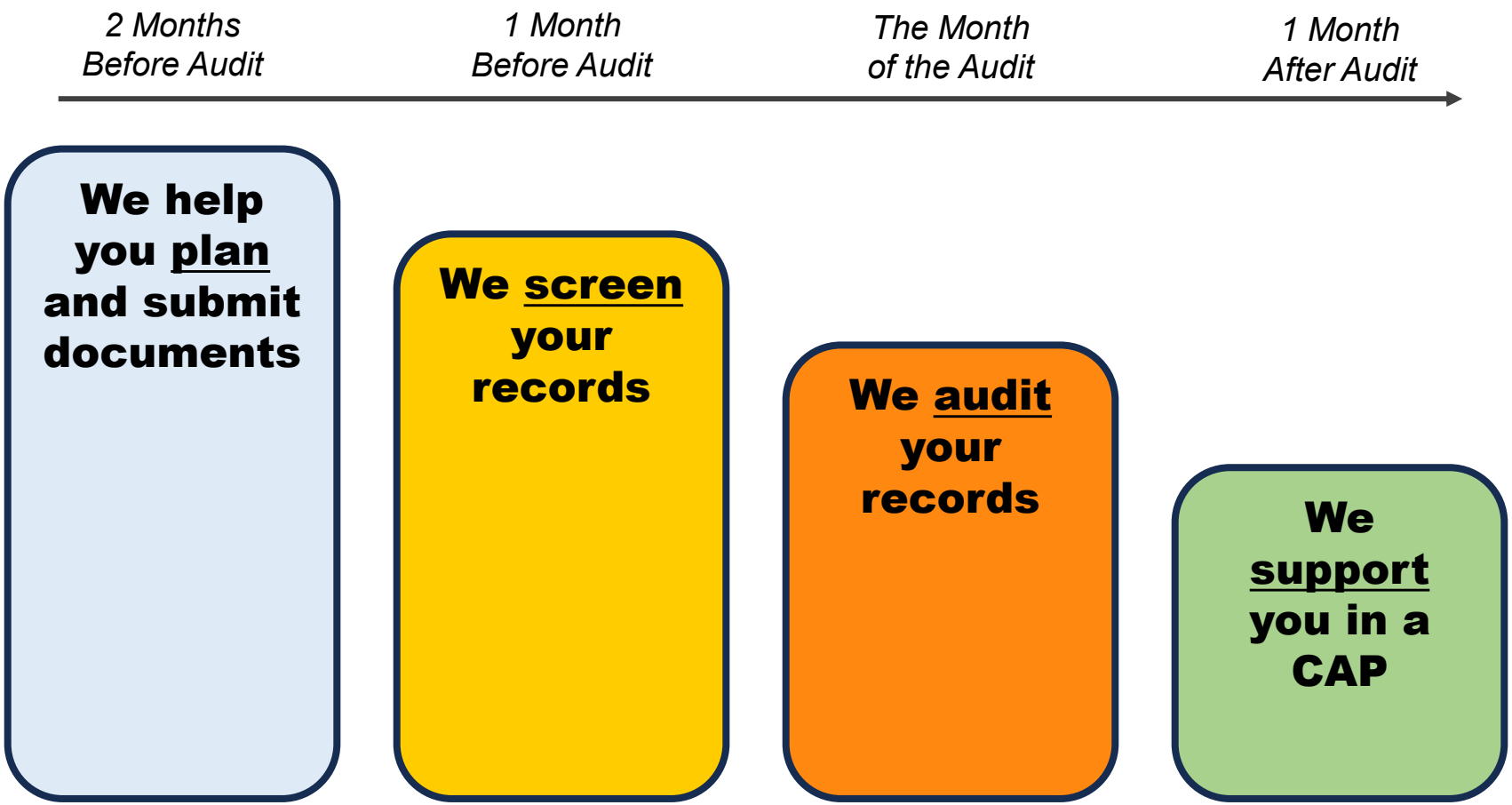
Introductions

- **Today's Philosophy and Approach**
  - **Being "audited" could feel confusing and concerning** – we want to assure that:
    - This a routine process that we conduct with every agency annually.
    - Many of our audits show a 0% error for the agencies.
    - We only look at the core elements required for payment.
    - If a claim is disallowed for payment in an audit – we all assume the provider/agency was acting in good faith to address a real problem for the client.
    - Our processes and products are designed to be transparent – we welcome the feedback, input and wisdom that Providers can offer.

AUDIT WORKFLOW, TIMELINES, AND PROCESSES

Overview of Audit Process

- **Workflow & Timeline**



Details of Audit Process

2 months before

- **BHS Compliance sends email** invitation to Planning Meeting
- **BHS Compliance facilitates Planning Meeting** online

Details of Audit Process

1 month before

- **First business day of the month:** BHS Compliance emails agency to notify about the audit.
- **Second business day:** Agency email BHS Compliance with "Confirmation of Receipt."
- **Third business day:** Agency submits electronic records to BHS Compliance (via secure email or MS Onedrive).
- **Fourth business day:** BHS Compliance screens records.
- **Fifth business day:** if needed, Agency submits additional documents.

"Tight Turnaround Timeline"

Details of Audit Process

The audit month

- **First week of the month:** BHS Compliance conducts the actual audit.
- **Second week of the month:** BHS emails Preliminary Findings to Agency.
- **Within 2 business days:** Agency submits response to Preliminary Findings BHS Compliance.
- **By end of month:** BHS Compliance sends final report to Agency and BHS Systems.

"Tight Turnaround Timeline"

Details of Audit Process

1 month after

- **Within 30 calendar days of the audit report**: If applicable, agency backout of deficient services & submit CAP to compliance with 30 calendar days of receipt of audit report.
- **Within 2 business days**: BHS Compliance communicates the approval or denial of the CAP materials.

"Tight Turnaround Timeline"

ASSEMBLING & SUBMITTING MEDICAL RECORDS

How to Assemble Medical Records

- **What Materials to Submit?**
  - Submit the progress note and the documents that substantiate the procedure code (service activity) claimed.

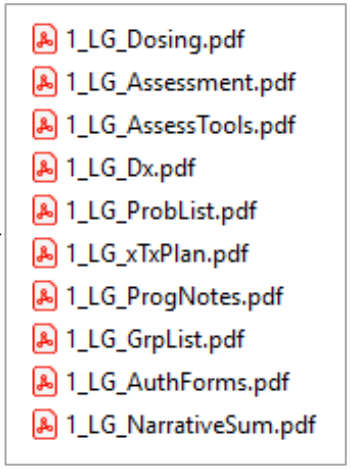
Type of Document	Examples of Chart Documents
Pre-Admission Materials	For example, the NTP/OTP initial medical exam
Authorizations	Prior Authorization forms for services requiring central authorization (e.g., Residential, TBS)
Certifications	For SMHS Acute Psychiatric Inpatient Hospital Services, the physician certification statement
Determinations	SMHS/DMC-ODS Comprehensive Assessments and Crisis Assessments, DMC-ODS Level of Care Determination Form, other Assessment/Determination forms specific to centrally authorized services (e.g., TBS Assessment)
Directions	Client plans (e.g., TCM, ICC, DMC-ODS), Medication Orders (e.g., NTP-OTP), Physician's Orders (e.g., Acute Inpatient)
Identifications	EPSDT screening document that was completed to identify early intervention needs

How to Assemble Medical Records

- **PDF File Format**
  - Each individual document should be .pdf formatted file

- **PDF File Labelling – Example Client "LG"**
  - Each file is labelled using the standard of: *Service Line#_Client Initials_Document*

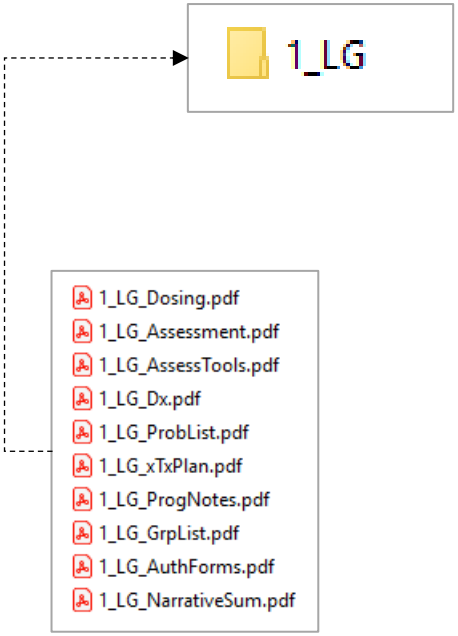
1_LG_Intake Assessment
1_LG_Updated Assessment
1_LG_Needs Assessment
1_ LG_Dx
1_LG_Physical Exam
1_LG_TxPlan
1_LG_ProgNotes + Epic Billing Info
1_LG_ASAM
1_LG_Dosing Order
1_LG_Dosing Log
Etc.



How to Assemble Medical Records

- **Folder Labelling & Formatting**
  - The .pdf documents for each service line must be placed into an electronic folder and named using the standard of *Service Line#_Client Initials*

  - Example for client “LG”



How to Securely Submit Files

- **<u>Option 1</u>: Send Secure Emails and Attachments**
  - Privacy and security is important here!
  - To be able to attach a folder to an email – you first must "compress" the folder – and then attach it.
  - Your email system will limit the number of attachments you can add – you will need to send multiple emails.
  - You must send each email as Encrypted/Secure.
  - You must use a subject line that conforms to the standard of: *SECURE Chart Documents (Agency Name-FY23-24)-Email X of Y.*

How to Securely Submit Files

- **<u>Option 2</u>: MS Office One Drive Link**
  - Privacy and security is important here!
  - You must create an MS Office One Drive folder within your agency's system and place the file folders (compression is not required for this).
  - Send a secure email to BHS Compliance with a link to the One Drive Folder.
  - Obtain email/phone confirmation from BHS Compliance that the materials have been downloaded to our office.
  - Remove/delete the MS Office One Drive folder.

NTP Providers Only: Revised Title 9 Regs.

NTPs shall comply with the following revised regulations effective October 1, 2025.

§ 10270 - Criteria for Patient Admission

- PEs must now be completed within 14 calendar days of admit
  - New PE requirements:

    1) A review of the patient's psychiatric hx

    2) Counseling on preventing exposure to, and the transmission of, tuberculosis, HIV, viral hepatitis, and sexually transmitted infections, including syphilis

    3) Optional screening for infectious diseases, including tuberculosis, HIV, viral hepatitis, and sexually transmitted infections.

NTP Providers Only: Revised Title 9 Regs.

§ 10270 - Criteria for Patient Admission

- New behavioral health assessments must be completed with 14 calendar days of admit
  - BH Assessment includes:

    1) Screening for imminent risk of harm to self or others;

    2) Assessment of the need for and/or response to treatment, including adjusting medication for opioid use disorder and other treatment interventions as appropriate; and

    3) Preparation of an individualized care plan, as required by Section 10305, that is developed by engaging in shared decision-making with the patient.

NTP Providers Only: Revised Title 9 Regs.

§ 10306 Annual Physical Examination

- MD shall perform an in-person physical examination of a patient **at least annually from the date of the patient's initial or last physical examination**
  - Must include:
  - Required items from initial PE, Section 10270(f)(1)
  - Review and evaluate of patient's last PE, care plan, dosing and response to treatment, and other SUD/physical/psychiatric needs and goals

§ 10305 Patient Care Plans

- Initial Tx Plan due with 14 calendar days from admit
- New due date for updated Tx Plans: At least once every three months from the **effective date of the initial care plan**; instead of admit date.
- **Send initial care plan for all charts being audited**

Lessons Learned

- **Which Records to Submit? Less is More!**
  - We only need documents that are directly related to the claims being audited.

- **Assessments/Plans for the Date of Service**
  - We only need the assessments/tools and client plans that are directly related to the claims being audited.

- **Progress Notes from Epic – Print Note, Billing Information, & SmartForm**
  - Print text of the progress note, billing information (procedure code/units), SmartForm (direct service time). To print the billing information, **click on the "Billing Info" hyperlink** at the bottom of the screen. To print the SmartForm, **click "BHS Direct Service Time" hyperlink** at the bottom of the screen.

Lessons Learned

- **Group Services – Include Participant List**
  - If the claim is for a group service – you should provide us with the Participant List.

- **DMC-ODS Nuances**
  - Assessment materials include the SUD Level of Care Form
  - For NTP services – include materials like:
    - NTP Initial Assessment,
    - Needs Assessment,
    - Physical Examination Form
    - Physician Statements (evidence of physical dependence and final determination of physical dependence.

Lessons Learned

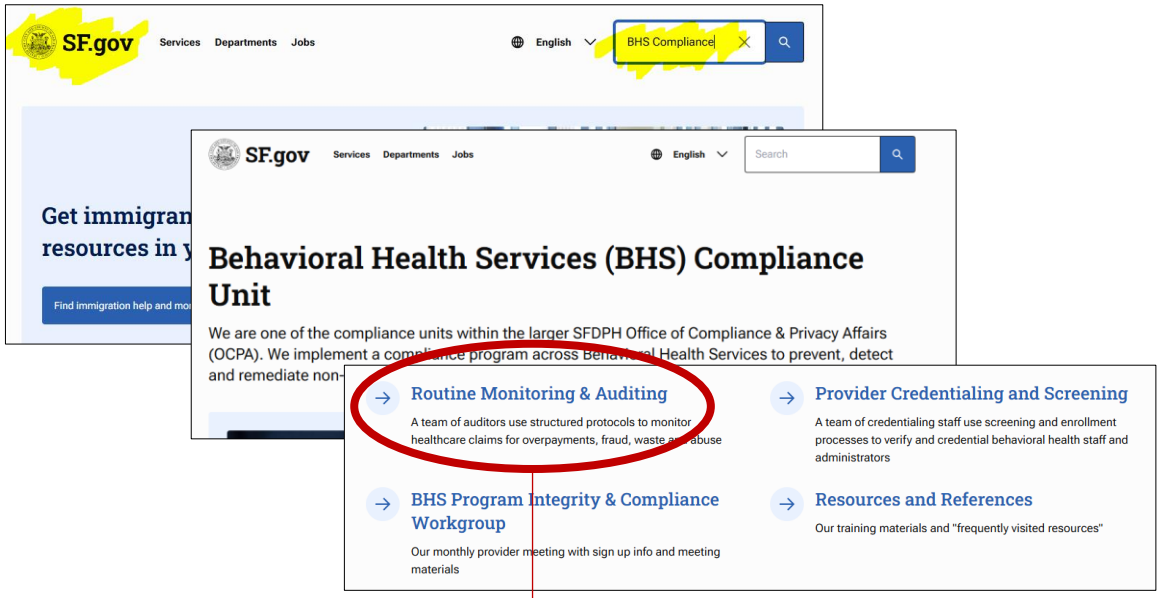
- **All Staff Must be Credentialed**
  - For example, in a residential setting, all staff who provide treatment/care must be credentialed with BHS
  - For example, the nurse or pharmacist who dispenses NTP meds must be credentialed with BHS.

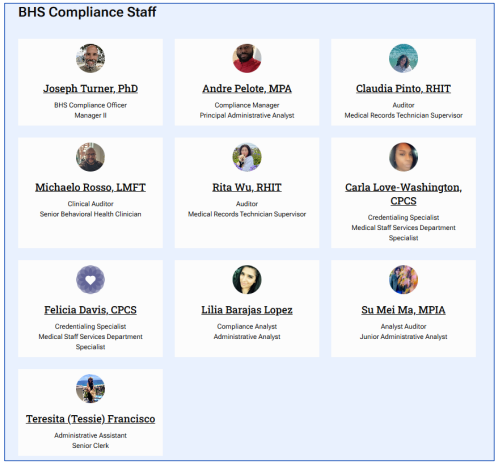
- **Do Not Edit Medical Records You Submitted**
  - In an attempt to be proactive, agencies will sometimes make edits to medical records before the audit is complete
  - You should not edit medical records until you receive your final audit report.

QUESTIONS, COMMENTS, HEADACHES, OR HEARTBURN?

WRAP UP & RESOURCES

- BHS Compliance Homepage on SF.GOV





- Our CalAIM Overpayment Monitoring Training and Protocol
- Our Calendar of Annual Agency Audits
- Our Tools to Support Agencies (including this presentation)

WRAP UP & RESOURCES

- **Information on DPH OCPA**
  - Office of Compliance & Privacy Affairs
    - https://www.sf.gov/departments/dph-office-compliance-and-privacy-affairs

- **The SFDPH Anonymous & Confidential Hotline**
  - 1-855-729-6040
  - compliance.privacy@sfdph.org

- **Always remember that SFDPH has a Non-Retaliation policy**
  - Employee Non-Retaliation Policy (Revised 5/24/23)
    - https://media.api.sf.gov/documents/DPH_Employee_Non-Retaliation_Policy_COM__Revised_5_28_2025.pdf
    - City/County Controller's Office Whistleblower Website
    - https://www.sf.gov/whistleblower-program

THANK YOU TO AGENCIES & STAFF!