



**B. J. Walker, Commissioner**  
**Gwendolyn B. Skinner, Division Director**

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Georgia Department of Human Resources • Division of Mental Health, Developmental Disabilities and Addictive Diseases  
Two Peachtree Street, NW • Suite 22.224 • Atlanta, Georgia 30303-3171 • 404-657-7857

August 13, 2008

To: Chief Executive Officer  
Community Service Provider

From: John Quesenberry, Director  
Information Management Unit

Subject: Important Updates Concerning Supported Employment and Residential Services

The purpose of this memorandum is to correct and clarify information concerning Supported Employment and Residential Services and how they should be reported to APS's electronic reporting system. The information provided in Attachment 1 of this memorandum applies to all mental health and substance abuse providers, and it affects reporting of both MICPs and Encounters.

Please also see the attached memorandum of August 13<sup>th</sup> concerning the importance of reporting residential services correctly and, specifically, how this data will be used for important planning and rate-setting activities.

We request that you communicate the information in this letter and its attachment as soon as possible to the appropriate personnel in your organization, including specifically (a) clinical and utilization management staff, (b) information system managers, (c) any other staff responsible for MICP and Encounter data, (d) and, if applicable, your information system vendors.

Please direct questions concerning reporting to APS to [ga\\_helpdesk@apshealthcare.com](mailto:ga_helpdesk@apshealthcare.com). Should you have any other questions concerning this letter, please contact John Quesenberry at [jwquesenberry@dhr.state.ga.us](mailto:jwquesenberry@dhr.state.ga.us) or (404) 463-6867.

As always, we appreciate your cooperation in providing complete, accurate, and timely data concerning your consumers and services.

c: Regional Coordinators  
Regional Service Administrators  
Rick Valentine  
Wendy Tiegreen  
Chris Gault  
Michael Claeys, APS Healthcare, Inc.

**SUPPORTED EMPLOYMENT  
AND  
RESIDENTIAL SERVICES  
Updates and Corrections**

**SUPPORTED EMPLOYMENT**

A typographical error in the FY09 Provider Manual indicates that the procedure code for Supported Employment is H2023, but the correct procedure code for FY09 is H2024 as depicted in the “FY09 MHDDAD Service Group Details” document in Attachment 5 of our April 16<sup>th</sup> and May 27<sup>th</sup> memos. Effective 9/1/2008, all service encounters for Supported Employment must be submitted using procedure code H2024, and encounters with procedure code H2023 will be rejected.

**RESIDENTIAL SERVICES**

**Independent, Semi-Independent and Intensive Residential Services for Adults**

Effective 7/1/2008 the array of adult mental health / addictive disease residential services was changed so that adult Structured Residential was replaced by Independent Residential, Semi-Independent Residential, and Intensive Residential services.

<u>Service</u>	<u>Procedure Code</u>	<u>Comment</u>
Structured Residential	H0043	Discontinued for adults
Independent Residential Service	H0043R1 / H0043HFR1	New service for Adult MH / AD
Semi-Independent Residential Service	H0043R2 / H0043HFR2	New service for Adult MH / AD
Intensive Residential Service	H0043R3 / H0043HFR3	New service for Adult MH / AD

**MICP Updates**

The process of updating the residential codes on MICPs to add the new modifiers (R1, R2, R3, HFR1, HFR2, and HFR3) has been difficult for some providers, especially those who use the web to enter MICPs and have numerous consumers receiving these services. We offer the following instructions to assist providers in making the necessary updates, and we have provided a work-around for the requirement that a treatment plan be entered on all Update MICPs. The requirement for a treatment plan on all other Update MICPs is still in effect.

1. Use the Update MICP to add the appropriate residential code with modifier (H0043 plus R1, R2, R3, HFR1, HFR2, or HFR3).
2. Normally submission of an Update MICP requires submission of the full treatment plan, but, for *these cases only*, you will be allowed the option of not submitting the treatment plan. If you choose not to submit it, you must follow the instructions in item 3 below. Note that submission of the treatment plan is not prohibited, and providers who submit MICPs via batch and whose systems automatically populate these treatment plan fields certainly may continue to do so.

### **Independent, Semi-Independent and Intensive Residential Services for Adults (cont'd)**

3. If you choose not to submit the full treatment plan, you must use the following instructions for the work-around which must be used ***for these updates only***. If any of the treatment plan fields listed below are left blank, the MICP will error out. The instruction for each field is shown in italics.
  - a. **Explanation of Exceptions:** *Paste the following sentence: "Update only to add appropriate modifier to residential service code."*
  - b. **Transition/Discharge Plan:**
    - i. Projected Date of Transition/Discharge: *Enter any date after the Start Date*
    - ii. Anticipated Step Down Service: *Enter: n*
  - c. **Life Hope / Service Expectations:**
    - i. Which treatment/recovery area is consumer comments addressing: *Select any value*
    - ii. What hopes did consumer express...: *Enter: n*
    - iii. Progress toward discharge/transition plan...: *Enter: n*
  - d. **Additional Service Details:**
    - i. Has an advanced directive...: *Select any value*
    - ii. Has a release of information...: *Select any value*
  - e. **Achievable Therapeutic Goals:**
    - i. *Enter an "n" for the first Goal, Objective and Intervention fields.*
    - ii. *Enter any date after the Start Date for the first Goal and Objective fields.*
    - iii. Service Codes: *Select the appropriate residential code with the correct modifier for that consumer.*
    - iv. Frequency: *Enter any number.*
    - v. Frequency Interval: *Select any value.*

#### **Encounter Data Submission**

All encounters for FY09 dates of service (7/1/2008 forward) should be reported using procedure code H0043 with the appropriate modifier (R1, R2, R3, HFR1, HFR2, HFR3). If you have already entered FY09 encounters using procedure code H0043 without the new modifiers, you will need to void those encounters and resubmit them with the appropriate modifier. You should continue to submit encounters for FY08 dates of service (6/30/2008 and earlier) using procedure code H0043 without the modifiers.

#### **C&A Structured Residential**

A typographical error in the FY09 Provider Manual indicates that the procedure code for C&A Structured Residential services is H0043, but the correct procedure code is H0043HA as depicted in Attachment 1 of our May 27<sup>th</sup> memo. All service encounters for FY09 dates of service (7/1/2008 forward) must be reported using the correct code, H0043HA. Any encounters already submitted for FY09 dates of service using the H0043 code without the HA modifier need to be voided and resubmitted using the H0043HA code. While C&A service encounters for FY08 dates of service will be accepted with the H0043 procedure code, please submit them with the H0043HA code instead since the HA modifier indicates a C&A service.

#### **Ready for Work – Residential**

The FY09 Provider Manual correctly identifies the procedure code for Ready for Work - Residential as H0043 with no additional modifiers. Ready for Work is the *only* service for which you should submit FY09 service encounters using the H0043 procedure code with no modifiers.



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## Memorandum

**Date:** 8/13/08  
**To:** All Adult Mental Health and Substance Abuse Residential Services Providers  
**From:** Audrey Sumner, Director, Office of Mental Health  
Daniel Trussell, Director, Adult Mental Health  
Onaje Salim, Director, Addictive Diseases  
**Re:** Submission of Data for Residential Services

We have received some questions regarding submission of data for Residential Services. It is very important that you understand how to submit encounters for the levels of residential services that you are providing because we will be establishing rates based partially on this information next year. Initially, we intended for APS to include Residential Services in their audits this year in order to get some on the ground information about the types of services being provided and to determine what issues may arise when scored audits are introduced; however, we learned that due to some technical issues, we could not include Residential Services in the audit without scoring it. Because we see this as a developmental year, we chose not to introduce auditing this year.

We have convened a Residential Services workgroup that will include Division staff, Residential Services Providers, and APS trainer/auditors and/or care managers to discuss the services definitions and make any needed modifications. The first meeting will be on August 14 following the APS Clinical Director's meeting in Forsyth. We know that some of you have brought up concerns about use of the LOCUS. These are the types of issues that we will discuss in the Residential Services workgroup.

cc: John Quesenberry  
Wendy Tiegreen  
Chris Gault