EHR Supports for Meeting Clinical Documentation Requirements in Alcohol/Drug and Mental Health Programs

Presented at the Sixteenth Annual Behavioral Health Information Management Conference by Tom Trabin, Ph.D., M.S.M., Conference Chair and Alameda County Alcohol and Drug Program Administrator Garden Grove, CA April 28, 2016
Addressing Common Challenges of Treatment Plan Documentation

- Many treatment providers newly certified for Drug Medi-Cal face unfamiliar documentation requirements.
- Documentation training for clinicians is inefficient without examples and ongoing practice supervision.
- Staff lack understanding how to meet Medicaid documentation requirements in a consumer-friendly, strength-based and recovery-oriented way.
- Multiple providers lack standard forms and nomenclature to support continuous client records within and across counties.
- State auditors may interpret MediCaid/Medi-Cal documentation requirements inconsistently.
Gaps in Treatment Plan Modules for EHRs Supporting Public Sector Treatment Organizations

- Most EHR software systems for publicly-funded mental health and substance use treatment organizations don’t provide built-in content for the treatment plan module.

- Without standard treatment plan content as data points, the potential of the EHR can’t be harnessed for outcomes management and clinical decision support.
Team Work
First Steps to Realizing EHR Benefits for Treatment Planning

- Establish a set of common treatment plan categories that fit for the organization’s documentation requirements
- Supply a comprehensive set of pick lists/libraries of sample content for each category from which clinicians and their clients can select
  - Wording must match the organization’s documentation requirements
- Offer clinicians and clients flexibility to modify or replace wording when appropriate
From Ideas to a Plan:
The County Treatment Plan Coalition

- January 2009: 33 counties met in January 2009 to share common dilemmas with treatment plan documentation and consider forming a coalition
- Spring 2009: A task force developed a project plan and budget
- Fall 2009: 26 counties joined and paid member dues to fund the plan, consultants were hired to assist with project management and content review, and state officials agreed to advise the project on content
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Project Goals

• Improve the quality and consistency of treatment plan documentation throughout the California public substance use and mental health care system
  • Build core content for substance use and mental health treatment that reflects:
    • Mental Health Specialty Medi-Cal and Drug Medi-Cal requirements
    • wellness and recovery language
    • cultural competence considerations
    • attention to differences in age group needs
  • Build content that can be embedded in any of the emerging EHRs
First Official Meeting

- December, 2009 – Sacramento two-day kick-off
  - 24 of the 27 member counties participated in the meeting
  - DMH and DADP support
  - Decision to search for, select and customize existing treatment plan library product
  - Established overarching values for treatment plan content
  - Elected Steering Committee, appointed content advisory group, set in-county multi-stakeholder workgroups
Primary MH and SUD Stakeholders Included in the Content Formulation

- County and contracted treatment providers (clinicians, clinical supervisors and other direct service staff)
- Clients/consumers
- Family members
- County administrators
- State administrators of Medi-Cal and Drug Medi-Cal documentation requirements
Core Treatment Plan Categories Formulated by Member Counties

- Personal life and treatment goals
- Personal strengths and resources related to each goal
- Barriers and problems related to each goal
- Objectives involved in achieving each goal
- Interventions
  - What the provider will do to help
  - What the consumer will do
  - What family members, close friends, and/or significant others will do
“It is important to learn from your mistakes, Bob...but let’s try not to learn quite so much.”
Selecting a Treatment Plan Documentation Guide to Customize

- April – August, 2010: Conducted nationwide RFP search process
  - Drafted RFP
  - Broadcast emailed, web posted, and advertised in national publications
  - Reviewed responses and interviewed finalists
- August – September 2010: Selected Treatment Plan Library and negotiated contract terms with Stan Taubman, Ph.D. from Berkeley Training Associates
- November, 2010: Signed contract with Dr. Taubman and CiMH on behalf of coalition members with plan for:
  - Copyrighted material to be reviewed by Coalition and consultants
  - Dr. Taubman to incorporate changes as requested by Coalition
  - Final product to be licensed at steep discount to Coalition members
First Steps in Customizing the Treatment Plan Library

- Winter 2011 – Spring 2011:
  - In-county multi-stakeholder groups and consultants provided feedback leading to some initial modifications and sending of a second draft
  - Each county’s multi-stakeholder workgroup reviewed the second draft, generated over a thousand comments and edits, and sent them to the Coalition project consultants
  - Project consultants consolidated all edits and comments for review and disposition by statewide coalition workgroups
Statewide Coalition Workgroups Meet to Decide on Suggested Modifications

- July - August, 2011
  - Statewide Coalition Workgroups complete edit decisions, consultants incorporate them, and Content Advisory Group resolves parking lot issues
  - Coalition consultants distribute first draft for review and feedback to DMH Medi-Cal and ADP Drug Medi-Cal officials, and to content consultants
Reviews and Edits

- September – November 2011
  - Comments/edits received and collated by consultants
  - Content Advisory Group, including lead clinical consultant and product developer, decided upon disposition of edits and incorporated most of them.
  - Reviewers were contacted to discuss disposition of their suggestions and agreed to them.
  - Steering Committee made final decisions and determined there were no parking lot items of controversy requiring reconvening of the entire Coalition.
Product Completion

- January 2012 – Final product available for licensing and use to Coalition counties and their contracted providers at $1 for first year and steep discounts for ensuing years
- February 2012 – Final product also made available for licensing and use to non-Coalition counties and to non-County-affiliated provider organizations at regular fee
The completed Treatment Plan Library has a comprehensive set of over 5,000 items spanning 7 treatment plan categories.

The items within each category are associated/nested within many types of optional headings designed for use in EHRs as search functions in drop down boxes to yield short, targeted item lists.

The items are also intended to be searchable through keywords for easy access.
How Counties Can Each Make Further Modifications

- Member counties can choose to:
  - further add, modify, hide or delete item content
  - further add, modify, hide or delete headings as search functions
  - seek trainers to assist staff with learning to constructively use the Treatment Plan Library once it is incorporated into the EHR
  - include additional decision support prompts
How Providers and Consumers Might Use the Product

- Providers are encouraged to:
  - work collaboratively with their clients in selecting treatment and recovery planning content options
  - use headings and/or keywords as search functions to narrow the list of options
  - select items from the Library as is or with modifications, or use free text and refer to the items for guidance regarding phrasing