Instructional Guide for the Use of Treatment Home Stabilization Progress Notes

December 2019 - (01503)

Instructional Guide

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I. Introduction

The goal of treatment home stabilization services (THSS) is to develop a resource that supports treatment home agencies in the management of escalating behaviors so that a youth may stabilize, thus avoiding premature discharge and admission to a more restrictive environment.

In CYBER, Treatment Home providers can request stabilization services for a youth who is at risk of jeopardizing current treatment due to pre-crisis situations by entering specific progress notes into the youth's record.

- Treatment Home Stabilization
- Treatment Home Stabilization Summary

This guide discusses the use of the progress notes and the process which must be followed prior to, and following the use of the note(s).

II. Accessing CYBER

Users must first log into CYBER with their Username and Password. CYBER can be accessed via the PerformCare website – <u>www.performcarenj.org</u>. The link is available at the top and bottom of the main page.



Security Administrator, and your agency's CYBER Security Administrator can set up a login for you.

Your access will be based on your login type and security levels.

Before you log in, keep in mind...

- There is no 'back button' use in CYBER!
- Most areas/buttons are single-click do not double-click on a button!
- Every time you launch CYBER, you will be required to enter your Username and Password and Enter, Tab and Enter or click the LOGIN button to continue.

Above the log in area is a statement that, as a CYBER user, you acknowledge your responsibility to protect the privacy of, and to guard against, the inappropriate use of the Protected Health Information (PHI) contained within the system.

http://www.hhs.gov/ocr/hipaa/ CYBER contains substance abuse diagnosis and treatment information that is protected by federal confidentiality rules (42 CFR Part 2). CYBER users are not permitted access to that information without a valid written consent that meets the requirements of 42 CFR Part 2. Users that access such confidential information pursuant to a valid written consent are prohibited from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

CYBER LOGIN

As a CYBER User I understand that my work will involve access to Protected Health Information (PHI) as defined by HIPAA (The Health Insurance Portability and Accountability Act) for the purpose of providing or arranging treatment, payment or other health care operations. I also acknowledge that I

am engaged by a covered entity. I further acknowledge my responsibility to protect the privacy of and to guard against inappropriate use or disclosure of this PHI by logging in as a CYBER User.

This is in compliance with The Health Insurance Portability and Accountability Act (HIPAA) of 1996

and its implementation regulations. For more information on HIPAA please go to



Please CLEAR your browser Cache before using this new version of CYBER

This statement will appear each time you log in.

Please also check the **Providers** section on the PerformCare website for the most up-to-date technical requirements (such as browser compatibility and operating systems) that a user would need to access CYBER.

III. Creating the Treatment Home Stabilization Request/Summary Progress Notes

The user will access the youth's Progress Note screen via the Progress Note button on the left side of the youth's Face Sheet.



Clicking on the New Progress Note button in the upper-right hand corner will bring up a blank progress note.

	Progress Notes OS S OS	Show All Draft Progress Not Show My Draft Progress No Show Committed and Signe	es tes d Progress Notes	✓ Truncate Notes	Filter Notes Print Selected	Show All Notes Print All	New Progress Note
l	Note Date	Note Type	Note SubType	Created By	Note		
	2019/12/20 10:30:00	Billable CC					<u> </u>
	2019/12/20 10:30:00	CMO Outreach Efforts					

Users can click the Notation Type and scroll to the bottom of the list to select the 'Treatment Home Stabilization Request' Note type



The following process must be followed when entering the Treatment Home Stabilization Request Progress Note:

- The Child Family Team Meeting has taken place and all parties agree that stabilization services are required;
- The Treatment Home provider has completed an updated Strength and Needs Assessment (SNA) within two (2) business days of the Stabilization service request and it has been submitted to PerformCare;
- The provider has entered the Treatment Home Stabilization Request Progress Note in the youth's CYBER record which must contain the following information:
 - 1. Confirmation that the Strength and Needs Assessment (SNA) was completed and submitted to PerformCare
 - 2. The ID# of the SNA for reference; (this number is located in the Assessment Treatment Plan grid column titled "Assessment ID" to the right of the column titled 'Submitted to CSA Date')
 - 3. Confirmation that the provider advised and collaborated with Care Management (if applicable) regarding the need for this service
 - 4. A brief description of the clinical behaviors that are jeopardizing placement and justification for stabilization services
 - 5. A description of how service will lead to a sustainable plan moving forward

The provider will use the Customer Service Request Form <u>www.performcarenj.org/ServiceDesk/</u> and select Type of Issue: 'Out of Home' and Type of Category: 'Treatment Home Progress Note' to formally request the service. This e-mail must include the following information:

- Youth CYBER ID
- Treatment Home Provider Name/Medicaid ID (in Requester Details)
- Provider Name/Medicaid ID of the BA/IIC being requested for Treatment Home Stabilization Services

NJ Children's System of Care Contracted System Administrator – PerformCare®

Customer Service Request Form

	HELP		
Please provide a brief subject for your requ	iest		
Requester Details			
First Name	*Last Name	CYBER Username	
Email	Phone Number (XXX-XXX-XXXX)	Ext	
Preferred Method of Follow Up	*Provider Agency ID (Enter 000 if unknown)	*Name of Program/Agency	
Type of Issue			
Out of Home	~		
Aequest Details			
Treatment Home Progress Note ♥			
• Type of Category Treatment Home Progress Note ✓ • CYBER ID			
*Type of Category Treatment Home Progress Note ♥ *CYBER ID *Please provide additional information			
*Type of Category Treatment Home Progress Note ✓ CYBER ID Please provide additional information			
*Type of Category Treatment Home Progress Note ✓ CYBER ID Please provide additional information Upload			
*Type of Category Treatment Home Progress Note ✓ *CYBER ID *Please provide additional information Upload Brow	rse		

- This request is assigned to a Clinical Care Coordinator for review and authorization. The Clinical Care Coordinator will render a decision within one (1) business day of receipt.
- If clinical justification is insufficient or there is missing information, the Clinical Care Coordinator will indicate what information is needed in a CSA Progress note. The OOH Treatment Home provider may then submit attachments or additional information in a new Customer Service Request Form initiating the request again.
- Once the request is reviewed and approved, PerformCare will generate an authorization in CYBER and will document the authorization confirmation in the youth's progress note.

• Upon completion of the stabilization service, the Treatment Home provider will enter a special progress note type called 'Treatment Home Stabilization Summary'. The Treatment Home Stabilization Summary progress note will document the outcome of the intervention and its effectiveness in maintaining the youth's placement.

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Determination of DD (Functional Support) El	igibility			
Face to Face w/Family				
FFT Note				AE
FS & Eligibility Unit				
Health Insurance Claim				
IIC/BA SEL				
Initial Crisis Response				
Intensive In Community				
JCR Review				
Late ISP				
MD Review				
MST Note				
On-Call				
Out of Home Admission				
Out of Home Referral				
Referred to FS & Eligibility Unit	ive	Draft Commi	t Cancel	Delet
Treatment Home Stabilization				
Treatment Home Stabilization Summary	•			

IV. References

PerformCare Website Training page: <u>http://www.performcarenj.org/provider/training.aspx</u>

Resources and FAQs: https://www.performcarenj.org/provider/resources-faq.aspx

- Treatment home stabilization services process (PDF)
 - o <u>https://www.performcarenj.org/pdf/provider/training/out-of-home/thss-provider-comm-process.pdf</u>

PerformCare Customer Service

www.performcarenj.org/ServiceDesk/

1-877-652-7624