# Anomaly Management Function

For Providers

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## Objectives

- Anomaly Management purpose
- Access and functionality
- Definitions of indicated anomalies
- Steps to take to resolve indicated anomalies

In CYBER, an 'anomaly' refers to specific details about the youth record; anomalies indicate something about the record is incomplete, incorrect, or is outside of the expected range.

Who can access:

• Users with Level 2 and Level 3 security will have access to Anomaly Management from the Welcome Page.

What is displayed:

• Anomaly Management screen will list anomalies for any youths open to the agency.

Why they are needed:

• Anomalies act as an alert to providers to indicate review or action needed

Anomaly Management is a tool for the provider. It is not a report that is reviewed by CSOC and cannot be printed.

## Who Can Access Anomalies

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Users with Level 2 and Level 3 security will permit access to the Anomaly Management screen. Level 1 security will make the links non-functional.



#### Only these Provider Types can view Anomalies:

Children's Crisis Intervention Services (CCIS) Care Management Organizations (CMO) Mobile Response Stabilization Svcs (MRSS) Div of Child Permanency and Protection (DCP&P) Intensive in Community (IIC) Intensive in-Home (IIH) Intermediate Units (IU) MutItisystemic Therapy (MST) Out of Home (OOH) Partial Hospital Provider (PHP)

#### User security is set up by your agency Security Administrators.

# What is displayed: Types of Anomalies

There are two types of Anomalies:

#### **Administrative Anomalies**

- Located on the youth's Demographics tab
- Data identifies information that is missing or 'malformed' in the youth's record
- Identifies youth that will need to be transitioned out of the Children's System of Care due to 'aging-out' (turning 21 years old).

#### **Practice-related Anomalies**

- Located on the Treatment Plans Assessment screen
- Data is from Dashboard and Assessments
- Identifies the need for in-depth review of service utilization and Length of Stay (LOS)

Select Treatment Plan or Assessment type to

Select an Assessment/Treatment Plan

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# Anomaly Management Functions Screen

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Clicking the **Anomaly Management** link on the Welcome Page will open the Anomaly Management Functions window, displaying all the current anomalies for youth open to the agency.



# Select A Specific Type of Anomaly

Clicking the "Select A Specific Type of Anomaly to List" drop-down displays all the types of anomalies.

- **Show All Anomalies**, displays <u>all</u> the current anomalies for active youth.
- Select a *specific anomaly type* to filter the grid.

Anomaly Management Functions			
urrent Anomalies o	on File Select a Specific Type of Anomaly to List	Show All Anomalies	
Youth/Child ID	Description	Show All Anomalies Open Tracking Element/No Medicaid	
	Consistent Low Ratings in One Or More Domain	Open Tracking Element/No Progress Notes in 30 Days Missing Address Data	
	Exceeds Expected Length of Stay	Open Tracking Element Missing/Malformed SSN	
	Open Tracking Element/No Progress Notes in 30 Days	Open Tracking Element Missing/Malformed DOB Open Tracking Element/Over 20 1/2 Years Old	
	Consistent Low Ratings in One Or More Domain	Open Tracking Element/Over 20 Years Old	
	Exceeds Expected Length of Stay	Exceeds Expected Length of Stay	
	Open Tracking Element/No Progress Notes in 30 Days	Less Than Expected Length of Stay Consistent High Rating in One Or More Domain	
	Consistent Low Ratings in One Or More Domain	Consistent Low Ratings in One Or More Domain	

#### Anomalies cannot be printed from the Anomaly Management screen or the youth's record.

## **Reviewing Anomalies**

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To open an anomaly for review, either:

- Double click on a row in the grid or -
- *Single click* to select a row and click the **Resolve Selected** button.

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Current Anomalies on	File Select a Specific Type of Anomaly to List	Show All Anomalies	1	Clear Search Resolve Selected
Youth/Child ID	Description	Date		
and the second s	Consistent Low Ratings in One Dr More Domain	THE R. L.		1
1000	Exceeds Expected Length of Stay			
	Open Tracking Element/No Progress Notes in 30 Days			
	Consistent Low Ratings in One Or More Domain			
	Exceeds Expected Length of Stay			
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Either selection will automatically open the youth's Demographics Tab.

## Reviewing Anomalies in the Youth Record

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Administrative Anomalies can be reviewed from within the Youth's record on the Demographics tab

On the Demographics tab, if there is an anomaly, the Anomalies button will be active. If there are no anomalies, it will be gray and will not click.

Clicking the *active* Anomalies button will display a message box listing the different anomalies associated with the current youth's record.



Inactive (gray) and active Anomalies button in youth record.

Anomalies displayed from youth record.

Note: Anomalies button is activated only when anomalies are present in the youth's record.

## Reviewing Anomalies in the Youth Record

Practice-related Anomalies will be on the Treatment Plans Assessment screen.

- Clicking the Anomaly in Anomaly Management will bring the user to the Face Sheet.
- Click the Treatment Plans Assessment link on the left side
- The indication of an anomaly will appear as a magnifying glass.



## Administrative Anomalies

- 1. Open Tracking Element/No Medicaid youth is open to the agency, but no Eligibility is associated with their CYBER record.
  - Notifies the Provider/PE (Presumptive Eligibility) staff to gather information about the youth's behavioral healthcare coverage; can affect payment for services.
- 2. Open Tracking Element/No Progress Note in 30 Days youth is open to the agency and no committed Progress Notes have been entered in their record for the last 30 days.
  - Notifies the provider to ensure that there are progress notes entered and they have been committed to the youth's record.

*Providers are expected to enter progress notes at regular intervals to document treatment, CMOs must enter progress note "Continued Need for OOH" to maintain referrals posted on YouthLink.* 

# Administrative Anomalies (Cont'd)

- **3.** Missing Address Data youth is open to the agency and has incomplete or missing address information.
  - Essential data used when PerformCare dispatches MRSS to a youth's location; is also used by providers that are providing services at a youth's location.
  - Can only be updated by CMO or MRSS when providing services.
  - Used by PerformCare when mailing authorization letters to families.
- 4. Open Tracking Element Missing/Malformed SSN youth is open to the agency and has a blank Social Security Number field or is not in the proper format on their Face Sheet.
  - SSN\* verification can be used by PerformCare to ensure they are accessing the correct youth's record.
  - 3560 cannot be submitted without a required SSN (verify Medicaid coverage).
  - Billing and payment can be affected.

\*SSN can only be modified by CMO or MRSS with the proper security group.

## Administrative Anomalies (Cont'd)

- 5. Open Tracking Element Missing/Malformed DOB youth is open to the agency and has an incorrect or blank date of birth field on their Face Sheet.
  - Used by PerformCare to ensure they are accessing the correct youth's record.
  - Essential information for 3560 Applications; Applications can't be submitted to PerformCare without a complete DOB. Also used to verify Medicaid coverage.
    - Billing and payment can be affected.
- 6. Open Tracking Element/Over 20 Years Old <u>or</u> Open Tracking Element/Over 20 ½ Years Old – youth is open to the agency and:
  - Is in need of transitional planning.
  - Will age out of the Children's System of Care within 6 months to a year.
  - Will display both anomalies if the youth is 20 ½ years old.

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## **Exceeds Expected Length of Stay**

This anomaly will appear when the length of stay exceeds the Average Length of Stay\*. The anomaly may indicate:

- Potentially over-utilizing services
- Provider should review for transitional planning

\*Based upon the Average Length of Stay (one month = 30 days) and specific Provider Type.

Average Length of Stay is based upon the average utilization for service lines and Level of Care; an additional 90-day authorization period has been added onto the average to create the Length of Stay threshold.

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**Exceeds Expected Length of Stay** anomaly will appear for Out of Home providers in these Levels of Care:

- <u>PCH (Psychiatric Community Home) and GH (Group Home)</u>
  - Youth has been receiving services for **360** days or more.

- SPEC (Specialty Services) and RTC (Residential Treatment Center)
  - Youth has been receiving services for **450** days or more.

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# **Exceeds Expected Length of Stay** anomaly will appear for Care Management Organizations for...

## **In-Home Services**

- CMO HI youth has been receiving services for **450** days or more.
- CMO MOD youth has been receiving services for **270** days or more.

## **Out-of-Home Services**

- CMO HI youth has been receiving services for **780** days or more.
- CMO MOD youth has been receiving services for **660** days or more.

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**Exceeds Expected Length of Stay** anomaly will appear for these provider types if...

#### Partial Hospitalization Program (PHP)

• Youth has been receiving services for **210** days or more.

Multisystemic Therapy (MST)

• Youth has been receiving services for **210** days or more.

## Family Functional Therapy (FFT)

• Youth has been receiving services for **210** days or more.

## Less than Expected Length of Stay

This anomaly will appear if the youth is transitioned before the Average Length of Stay\*.

- Youth needs different, higher or lower level of care (misdiagnosed)
- Youth / family are not participating in services (non-cooperation)
- Youth is moving out of county or state (no transfer)
- Youth elopement

\*Based upon the Average Length of Stay (one month = 30 days) and specific Provider Type.

Average Length of Stay is based upon the average utilization for service lines and Level of Care; an additional 90-day authorization period has been added onto the average to create the Length of Stay threshold.

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## **Domain Rating Scale**

Ratings in Assessments affect Practice Related Anomalies.

- Each domain of the Strengths and Needs Assessment has a set of questions that define the domain.
- Each question has a description and rating scale from 0-3.

CYBER users document the youth's and caregiver's strengths, needs, behaviors, etc. in the assessment. The increasing or decreasing score helps evaluate the internal and external changes affecting the youth and family.

* DEPRESSION Symptoms included in this dimension are irritable or depressed mood,	* PSYCHOSIS This rating is used to describe symptoms including hallucinations, delusions, un 0 - This rating indicates a youth with no evidence of thought disturbances. Both th Comments
0 - No evidence.	
1 - History or suspicion of depression or mild to moderate depression	* IMPUL SIVITY AND ATTENTION
2 - Clear evidence of depression associated with either depressed mo	This rating is used to indicate a youth who demonstrates challenges with impuls
3 - Clear evidence of disabling level of depression that makes it virtual	3 - Youth demonstrates evidence of severe challenges with impulse control. The y other children without thinking about it) that can place the youth at risk of physical
	Comments
	Comments are required with this rating.

## **Consistent High Ratings in One or More Domain** is based upon *two*

consecutive Strength & Needs Assessments having a severe rating (3) in two or more questions and in one or more domains.

Providers / Level of Care	Strengths & Needs Assessment has:	Anomaly
OOH / Psychiatric Community Home		
OOH / Specialty Services	Severe rating (3) in	
OOH / Residential Community Treatment	two consecutive Strengths and Needs in two or more questions in	Consistent High Ratings in One or More Domain will
OOH / Group Home		
CMO / HI	one or more domains	appear
CMO / MOD		

**Consistent Low Ratings in One or More Domain** is based upon low ratings in *either or both domains of two consecutive Strengths and Needs Assessments within the past 200 days*:

- Child Risk Behaviors
- Child Behavioral/Emotional Needs

Comparison of two consecutive Strength & Needs Assessments	Anomaly
Questions have a severe rating (3) in either or both domains in assessments:	Consistent Low Ratings in One or More Domain <b>will not appear</b>
There are no questions with a severe rating (3) in the assessment:	Consistent Low Ratings in One or More Domain <b>will appear</b>
If the total rating score for either or both domains is less than 7:	Consistent Low Ratings in One or More Domain <b>will appear</b>
If the total rating score for either or both domains is greater than 7:	Consistent Low Ratings in One or More Domain <b>will not appear</b>

Low Ratings Strength & Needs Assessment will appear to these provider types (left column) if the domains in Strengths and Needs display (center column):

Providers / Level of Care	Strengths & Needs Assessment has:	Anomaly
OOH / Psychiatric Community Home	No severe (3) ratings	
OOH / Specialty Services	No severe (3) ratings	
OOH / Residential Community Treatment	No severe (3) ratings	Low Ratings Strength & Needs Assessment
OOH / Group Home	Total domain score <7	will appear.
CMO / HI	No severe (3) ratings	
CMO / MOD	Total domain score <7	

# **Resolving Anomalies**

## Administrative anomalies

If Anomaly is	Then Resolution is
Open Tracking Element/No Medicaid	Begin Medicaid application or 3560
Open Tracking Element/No Progress Notes in 30 Days	Commit a progress note in the youth record
Missing Address Data	Correct the youth's address
Open Tracking Element Missing/Malformed SSN	Correct the youth's Social Security Number
Open Tracking Element Malformed DOB	Correct the youth's date of birth
Open Tracking Element/Over 20 ½ Years Old	Consider transition planning
Open Tracking Element/Over 20 Years Old	Consider transition planning

Resolutions to anomalies are not reflected in real-time; this information is updated nightly during the system refresh.

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# If you have any questions, please contact PerformCare at 1-877-652-7624

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