

SUBJECT: STANDARDS OF ETHICAL CODING

EFFECTIVE
DATE: 02-15-10 (replaces 12-12-07)

APPROVED BY:

Reviewed (no changes): 04-06-11 _____

Executive Director

POLICY

It is the policy of McIntosh Trail CSB to utilize the most recent and up-to-date diagnostic codes as set forth in the DSM IV TR (Diagnostic Statistical Manual, Fourth Edition, Text Revision), ICD-9 coding manual, CPT Code Manual, and the HCPCS Manual (Healthcare Common Procedure Coding System) as set forth in the Utilization Guidelines and Service Standards for Medicaid Community Mental Health Center Programs and the CMS Manual Center for Medicare and Medicaid Services.

PROCEDURE

Any and all diagnoses given to an individual must be conducted by a person authorized to do so. Practitioners identified in O.C.G.A. Practice Acts as qualified to provide a diagnosis are a licensed psychologist, a physician, or a Physician Assistant or APRN working in conjunction with a physicians with an approved job description or protocol. No diagnosis or service procedural codes are included or excluded due to payment being effected.

Comprehensive assessment and reassessment documentation includes all components of the current External Review Organization (ERO) authorization, a bio-psychosocial assessment, a medical screening, an integrated/interpretive summary, and a verified diagnosis. *A verified diagnosis is defined as a behavioral health diagnosis provided by a licensed psychologist, a physician, or a Physician Assistant or APRN working in conjunction with a physician with an approved job description or protocol. *At a minimum, all diagnoses must be verified annually by a licensed psychologist, medical doctor, APRN, or Physician Assistant following a face-to-face evaluation of the consumer (internal or external to the agency). If this requirement is not met due to consumer refusal or choice, documentation in the record should reflect this. If an individual is a licensed practitioner, the printed name must be the name listed on his or her practitioner's license on all medical record documentation.

* Practitioners identified in O.C.G.A. Practice Acts as qualified to provide a diagnosis.

Assessments are conducted by qualified staff who are knowledgeable to assess the specific needs of the individuals served and are trained in the use of applicable tools. Any conflicting or ambiguous information is discouraged and an ongoing assessment of information is made of documentation in the consumers' charts to ensure consistency.

McIntosh Trail CSB staff provide services to obtain optimal payment for service provided following all legal and ethical practices.

References: DSM IV TR (Diagnostic Statistical Manual, Fourth Edition, Text Revision), ICD-9 coding manual, CPT Code Manual, HCPCS Manual (Healthcare Common Procedure Coding System), Utilization Guidelines, Service Standards for Medicaid Community Mental Health Center Programs and the CMS Manual Centers for Medicare and Medicaid Services.