KP External Provider Visits and Documentation

We appreciate your work with KP members to provide the best possible quality care.

It is important that you know:

When a need for treatment with individual therapy is identified, a patient is screened to ensure they are clinically appropriate to refer to an outside provider.

- You are responsible for administering the Treatment Process Indicator (TPI) the first session and each subsequent session.
- During the first appointment please orient the patient to the TPI and Feedback Informed Care (FIC).
- You are also responsible for uploading the Intake notes within 48 hours of the Intake session.
- ❖ Discussion of graduation should start at the first session and be discussed frequently during treatment to establish and normalize the expectation of progress and improvement.
- ❖ Treatment plans should be documented within the Initial Evaluation and include Specific, Measurable, Achievable, Relevant, and Time-bound (SMART) goals.
- * Follow-up sessions should include a review with the patient of the TPI at the beginning of session.
 - o Review progress graph with patient at every session.
 - o Ensure patient's perception of their own level of distress is consistent with the TPI scores.
 - o Review Therapeutic Alliance questions at each session.
 - o If there is not progress, make sure you try something different as early as possible.
 - o If there is progress, and patient has achieved benefit or has reached a plateau, consider decreasing session frequency and graduation.
- When discharging a patient, please enter and submit a discharge summary within 48 hours on Lucet.

You would consider submission of a discharge summary when:

- ❖ The patient has met goals and completed treatment.
- The patient has missed appointments without notice. If after attempting to contact the patient, they have not responded, you would submit the discharge paperwork.
- The patient is planning to take a <u>4-week or more break from therapy</u>; this may be a time for patient to complete the episode of care and patient can return if needed.
- If you do not have a next scheduled appointment anticipating that patient will not need to return.

Patients returning to treatment:

If a patient returns for treatment within 4 months of the last session, <u>and</u> within a year of the <u>original referral</u> (or appointment), services can resume. However, if greater time has elapsed, the patient must call the local KP Behavioral Health call center for screening and a new referral. <u>This call also helps to ensure the insurance coverage is appropriate to your practice.</u>

<u>There is no guarantee that screening will indicate an external referral</u>. The provider must have availability on Lucet to have patient booked with them. Providers can utilize the HOLD in Lucet for a returning patient to be scheduled for an intake if the patient is eligible for an external referral.

A note about insurance:

- ❖ It is the provider's responsibility to verify insurance prior to each session.
- You must be Medicare credentialed to see Medicare patients.
- Currently, Medicare patients are not able to be seen by LMFT's.
- ❖ You must be Medi-Cal credentialed to see Medi-Cal patients.

If your patient's insurance has changed, please let us know so we can connect them with an appropriate provider.

