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Functional Assessment Tools Questions and Answers (Q&A): October 2018

In accordance with **DHCS INFORMATION NOTICE NO. 17-052**, which mandated the use of the Child and Adolescents Needs and Strengths (CANS) assessment tool and the Pediatric Symptom Checklist (PSC-35) to measure child and youth functioning, CCBHS released Quality Management and Utilization Review memos, in addition to, "Print and Write" versions of the Contra Costa CANS, PSC 35, and the revised Initial and Annual Assessments on Friday September 28, 2018.

While the release of the CANS and PSC-35 forms was expected, there was some confusion regarding implementation and the revised Initial and Annual Assessment Forms. CCBHS updated both the Initial and Annual Assessment Forms to remove redundant items, and created a "Frequently Asked Questions" document to streamline responses to CANS implementation questions.

Beginning October 1, 2018, in order to receive service authorization a CANS must be done and submitted in conjunction with the Initial or Annual Assessment.

The original memo only contained the "Print and Write" version of the forms. In order to meet the needs of our Community Based Organizations, we are releasing the fillable templates for the revised Initial and Annual Assessments. The PSC-35 templates were configured to allow the clinician to "fill-in" the client's demographics as the form itself is to be completed by the parent/caregiver (Please visit the forms website to obtain these fillable forms: http://cchealth.org/mentalhealth/clinical-documentation/. We will release the complete CANS "fill-in-able" template at a later date.

Question and Answer

1. Regarding data reporting requirements, in December will you want all the completed CANS and PSC-35 from October on or will you just want those collected in December?

Response: For the first data submission, submit to Contra Costa Behavioral Health Services (CCBHS) all data from October onward.

2. December 15th is a Saturday, are we expecting that providers submit data by Friday the 14th?

Response: The first data submission should be sent to County by Friday, December 14, 2018. CCBHS encourages early submissions starting November 15, 2018. Note that CCBHS could revise schedule as needed or may permit submissions on a rolling basis.

3. For submitting the CANS and the PSC-35, what is the correct mail address? Would you like these posted by the 15th, or by an earlier date to be received by the 15?

Response: Please see the response above. Providers are expected to submit the data by Friday, December 14, 2018. Forms can be mailed to CCBHS at 1340 Arnold Drive, Suite 200, Martinez CA 94553.

4. We are wondering the status of the new Initial Assessment and Annual Assessment forms. We are hoping to implement those forms along with the PCS-35 and switching to the Contra Costa version of the CANS. If it is going to be some time that the final then will wait and do it in two phases.

Response: Updated forms and the CANS manual have been posted on the Clinical Documentation website. The CANS manual can be found under the "Documents" tab, and the Clinical Forms can be found under the "ShareCare Forms" tab at: https://cchealth.org/mentalhealth/clinical-documentation/

5. We did not know that there were new Initial and Update Assessment Forms to use as of October 1, 2018. I see these on the list, though. So, do we need to have clinicians use these forms instead of the ones they were using if the Assessment is happening after October 1? These new forms are not fillable, and the old forms were fillable. So please advise what we should do.

Response: Yes, please use the new Initial and Update Assessment Forms. We have updated them to remove redundant items that are in the CANS as they should be completed with the CANS.

6. The forms that you linked to are not fillable is that correct? Do we print out and complete them by hand, or ...?

Response: As of October 8th, fillable forms have been created for the Initial and Annual Assessments, and the demographics section of the PSC-35. The fillable form of the CANS will be sent out once it has been finalized.

7. Will the 6-month CANS and PSC-35 follow the current procedure of being due according to the UR Track? Or, will it be based on the Episode Opening Date with our agency?

Response: Follow the current procedure of being to the UR track, except an additional requirement at the half-way (6-month) point of the track.

8. The attached instructions state, "For existing clients (enrolled prior to October 1), these tools can be administered starting at the client's annual assessment date. At the same time, DHCS expects that all existing clients have completed CANS and PSC-35 no later

than February 28, 2019, a CANS and PSC-35 must be completed in February regardless?

Response: CCHBS needs to confirm this request with DHCS and how to reconcile this with the required time frame for CANS (every 6 months starting at initial or annual assessment). We will release more information, once available. For now, for existing clients, administer these starting at their next annual assessment date.

9. Will the PSC-35 follow the same procedure as CANS, where only the original or the primary agency is responsible to ensure the form is completed? For instance, if we are the secondary agency, and we do the PSC-35, then we give it to the primary agency to submit it?

Response: The CANS and PSC-35 have the same data submission requirements. However, whoever collects the data should be responsible for handling data submission to CCBHS be it submitting the paper forms or doing so electronically (see attached Q1/QA memo 18-02). DHCS prefers that we do not duplicate efforts and is only requiring that one agency submit forms during the designated time frames.

10. Regarding completion of the PSC-25, is there any requirement from the County for completion of the CBCL as well? The two instruments are very similar, so we may want to opt to complete the PSC-35 only.

Response: CCBHS and DHCS does not require completion of the CBCL, just the PSC-35 and CANS.

11. I recall that providers seeing adults did not have to join in using the CANS since the ANSA is coming sometime in the future. Is that true or do I need to get staff trained on the CANS?

Response: CANS in CCBHS is required for youth up to the age of 21 starting October 1, 2018.

12. Is there any other information you could please provide us regarding the CANS implementation? Are you aware of any meetings we could attend?

Response: Updates have been shared at Contractor Luncheons; materials are posted on our outcomes website at https://cchealth.org/mentalhealth/outcome-measures.php and Quality Improvement and Quality Assurance Memos are posted at https://cchealth.org/mentalhealth/quality-management.php. An internal CCBHS CANS Implementation Team has been meeting monthly to plan training and other implementation logistics. These meetings will be open to contract providers as needed to get feedback on implementation to inform quality improvement efforts.

13. The new policy states that CANS, PSC-35 and CALOCUS are required for

beneficiaries' ages 0-21 years old. All of these are pediatric tools and not written for adults. The CANS assessment, assumes that all ages have a "caregiver". Will it be required to submit both, an adult and children's assessment? Would like to be updated on County policies, information and guidance regarding these issues.

Response: A children's assessment should be utilized, in conjunction with the CANS and the PSC-35, for ages 18-21, clients. Although the children's assessment does not request information that pertains to young adults, the information can be stated on the final page, in the section "space for data continuation". Please provide any pertinent client information in this provided area. We are working on consolidating the assessments so that there will be minimal duplication of information. Please continue to enter the data in CALOCUS. On the PSC-35, mark "no caregiver," for young adults, if the client comes in alone. On the CANS, mark "Youth has no known caregiver" if appropriate.

14. We were curious about how to advise our staff about what service code to bill for the completion of the CANS, when we are doing it during the 6 month cycles (outside of the initial and annual assessment). I was going to advise people to use the "Evaluation" service code for this purpose, and was wondering if this fits with what you are advising folks or if we should be billing, say, "Assessment" for this purpose.

Response: At the 6 month mark, the CANS (when not done in association with an assessment) can be done by an unlicensed clinician. If it is done by an unlicensed clinician (DMHW/MHRS designations), then evaluation is appropriate to bill. If it is done by a licensed/licensed eligible clinician (PhD, MFT, LCSW, trainees, waivered or interns) than either evaluation or assessment are viable options. It is only when it is done as part of the initial or annual assessment that we require license/licensed eligible clinicians to conduct and bill.

Should you have any additional questions, please contact the relevant staff listed below.

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