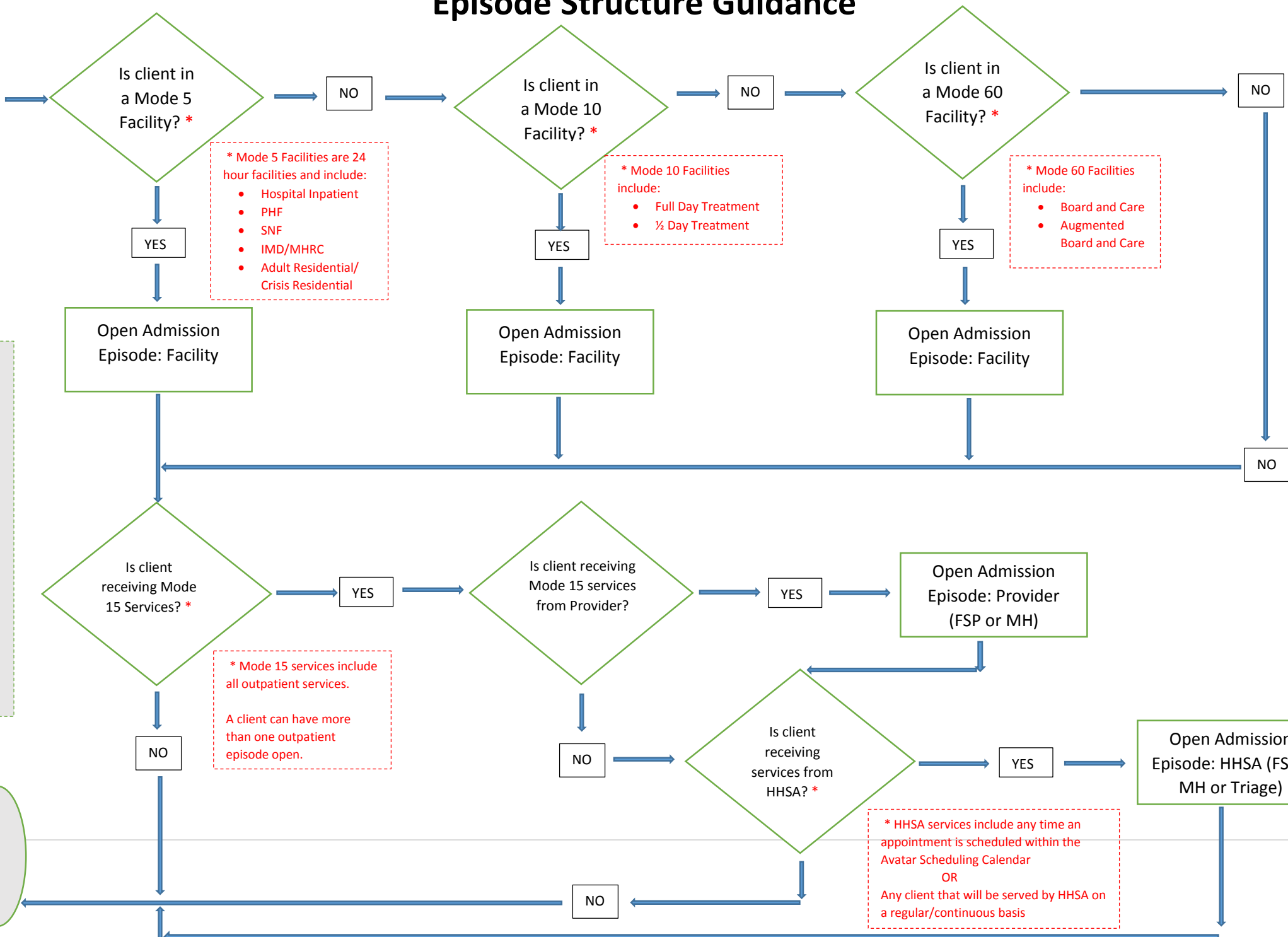


Episode Structure Guidance

START
Client requires an Episode to be Opened



* Mode 5 Facilities are 24 hour facilities and include:

- Hospital Inpatient
- PHF
- SNF
- IMD/MHRC
- Adult Residential/ Crisis Residential

* Mode 10 Facilities include:

- Full Day Treatment
- ½ Day Treatment

* Mode 60 Facilities include:

- Board and Care
- Augmented Board and Care

* Mode 15 services include all outpatient services.
A client can have more than one outpatient episode open.

* HHSA services include any time an appointment is scheduled within the Avatar Scheduling Calendar
OR
Any client that will be served by HHSA on a regular/continuous basis

This flow chart starts at: "Client requires an Episode to be opened".

This flow chart stops at: "No further Episodes to open"

The user of this flow chart must follow through all options until "No further Episodes to open" is reached.

STOP
No further Episodes to open

Episode Structure Guidance

Scenarios:

1. Client is in a Mode 60 facility (B&C) and is receiving Mode 15 services (Outpatient) by Provider – open the appropriate **FACILITY PROVIDER EPISODE** and outpatient **PROVIDER Episode (FSP or MH)**. **NO HHSA Episode is needed.**
2. Client is in a Mode 60 facility (B&C) and is receiving (continuous and/or regular and/or appointments are being scheduled within AVATAR scheduling Calendar) Mode 15 services (Outpatient Services) by HHSA – open the appropriate **FACILITY PROVIDER EPISODE** and a **HHSA EPISODE**.
3. Client is in a Mode 60 facility (B&C) and is receiving irregular (where the client plan is NOT held by HHSA and services are based upon status checks) Mode 15 services (Outpatient Services) by HHSA– open the appropriate **FACILITY PROVIDER EPISODE**. **NO HHSA Episode is needed.**
4. Client is in a Mode 60 facility (B&C) and is receiving irregular Mode 15 (Outpatient) services, but is being scheduled within AVATAR Scheduling Calendar, by HHSA– open the appropriate **FACILITY PROVIDER EPISODE** and a **HHSA EPISODE**.
5. Client is receiving Mode 15 (outpatient services) from HHSA (where the client treatment plan responsibility is held by HHSA), and receiving Mode 15 (outpatient services) by a provider (client treatment plan responsibility is held by HHSA) - Open an **HHSA episode** and the **Provider Outpatient Episode**.
6. Client is receiving Mode 15 (outpatient services) from HHSA (where the client treatment plan responsibility is held by HHSA), and receiving Mode 15 (outpatient services) by a provider (where the client treatment plan responsibility is held by Provider) - Open an **HHSA episode** and the **Provider Outpatient Episode**.
7. Client is receiving Mode 15 (outpatient services) from TP ACT/AOT (adult or child, in system as TP FSP) and receiving Mode 15 (Outpatient Services) from a different TP program – Open a **Provider FSP episode**.
8. Client is receiving Mode 15 (outpatient services) from TP ACT/AOT (adult or child, in system as TP FSP) and receiving Mode 15 (Outpatient Services) from another provider – Open a **Provider FSP episode (for TP ACT/AOT)** and **Provider FSP episode (For other Provider)**.
9. Client is receiving Mode 15 (outpatient services) from Provider A (where the client treatment plan responsibility is held by the PROVIDER) and receiving Mode 15 (Outpatient Services) from a Provider B, (where the client treatment plan responsibility is held by the PROVIDER) – Open a **Provider A episode (FSP or MH)** and a **Provider B episode (FSP or MH)**.
10. Client is in a Mode 5 facility (24 hours) and is receiving Mode 15 services (Outpatient) by HHSA (HHSA is responsible for the client treatment plan)– open the appropriate **FACILITY PROVIDER EPISODE** and **HHSA Episode**

Episode Structure Guidance

11. Client is in a Mode 5 facility (24 hours) and is receiving Mode 15 services (Outpatient) by Provider (Provider is responsible for the client treatment plan)– open the appropriate **FACILITY PROVIDER EPISODE** and **Provider Outpatient Episode**

Examples:

- 1) Client is in Mode 60 (Psynergy Program) and is receiving services in a Mode 15 (outpatient) setting, with HHSa staff providing services on an irregular basis.
 - **Open Psynergy Facility Episode and a Psynergy MH Episode. HHSa will document notes under the Psynergy Facility Episode.**

- 2) Client is in Mode 5 (Safe Harbor Program) and appointments for Mode 15 (Outpatient) are being scheduled within the Avatar Scheduling Calendar.
 - **Open Safe Harbor Facility Episode and a HHSa MH Episode. HHSa will document notes under the HHSa Episode.**

- 3) Client is receiving Mode 15 (outpatient) services by Turning Point ACT/AOT and Turning Point COPDHR.
 - **Open Turning Point – FSP Episode.**

- 4) Client is receiving Mode 15 (outpatient) services by HHSa (MH) and Mode 15 (Outpatient) services for Turning Point Housing and Support.
 - **Open Turning Point MH Episode and a HHSa MH Episode. HHSa will document notes under the HHSa Episode.**

- 5) Client is receiving Mode 15 (outpatient) services by HHSa (FSP) and Mode 15 (Outpatient) services for Turning Point Housing and Support.
 - **Open Turning Point FSP Episode and a HHSa FSP Episode. HHSa will document notes under the HHSa Episode.**

- 6) Client is receiving Mode 15 (outpatient) services by Turning Point (MH) and Mode 15 (Outpatient) services for YFSA.
 - **Open Turning Point MH Episode and a YFSA MH Episode.**

- 7) Client is receiving Mode 10 (1/2 Day TX) services by Summit View and Mode 15 (Outpatient) services by Summit View.
 - **Open Summit View Facility Episode and a Summit View MH Episode.**

Episode Structure Guidance

Mode and Service Function DEFINITIONS:

Mental Health Medi-Cal Mode of Service and Service Function (MS/SF) codes are mapped to HCPCS Procedure Codes, Procedure Modifiers, and Revenue codes for the 837 transaction. MHPs vary in the ways their staff code mental health services. Local coding may be in the form of HCPCS or CPT codes, DHCS MS/SF codes, are a unique set of codes, which is linked to HCPCS, CPT, or MS/SF codes through crosswalk tables. In all cases, MHPs must conform or translate their local codes to those 837 transaction coding requirements found in the Companion Guide.

Mode 05 24-Hour Mode of Service

Services designed to provide a therapeutic environment of care and treatment within a residential setting. Depending upon the severity of the mental disorder, and the need for related medical care, treatment would be provided in one of a variety of settings.

<i>S/D Mode of Service</i>	<i>Service Function</i>	<i>SD/MC Mode of Service</i>
05	10-18 Hospital Inpatient	07 08 09
05	19 Hosp. IP Admin Day	07 08 09
05	20-29 PHF	05
05	30-34 SNF Intensive	<u>Not Medi-Cal Eligible</u>
05	35 IMD Basic - No Patch	Not Medi-Cal Eligible
05	36-39 IMD with Patch	Not Medi-Cal Eligible
05	40-49 Adult Crisis Residential	05
05	50-59 Jail Inpatient	<u>Not Medi-Cal Eligible</u>
05	60-64 Residential Other	Not Medi-Cal Eligible
05	65-79 Adult Residential	05
05	80-84 Semi Supervised Living	<u>Not Medi-Cal Eligible</u>
05	85-89 Independent Living	Not Medi-Cal Eligible
05	90-94 MH Rehab Centers	Not Medi-Cal Eligible

Episode Structure Guidance

Mode 10 Day Mode of Service

Services that provide a range of therapeutic and rehabilitative programs as an alternate to inpatient care.

<i>S/D Mode of Service</i>	<u>Service Function</u>	<i>SD/MC Mode of Service</i>
10	20-24 Crisis Stabilization ER	12 18
10	25-29 Crisis Stab. Urgent Care	12 18
10	30-39 Vocational	Not Medi-Cal Eligible
10	40-49 Socialization	Not Medi-Cal Eligible
	60-69 SNF Augmentation	Not Medi-Cal Eligible
10	81-84 Day TX Intensive ½ Day	12 18
10	85-89 Day TX Intensive Full Day	12 18
10	91-94 Day Rehabilitation ½ Day	12 18
10	95-99 Day Rehabilitation Full Day	12 18

Episode Structure Guidance

Mode 15 Day Mode of Service

Services designed to provide short term or sustained therapeutic interventions for clients experiencing acute and/or on going psychiatric distress.

<i>S/D Mode of Service</i>	<u>Service Function</u>	<i>SD/MC Mode of Service</i>
15	01-09 Case Management/Brokerage	12 18
15	10-19 Mental Health Services (MHS)	12 18
15	30-57, 59 MHS	12 18
15	58 TBS	12 18
15	60-69 Medication Support	12 18
15	70-79 Crisis Intervention	12 18

Mode 60 Support Services

Supplemental services which assist clients with supportive programs and activities that facilitate the provision of direct treatment services.

<i>S/D Mode of Service</i>	<u>Service Function</u>	<i>SD/MC Mode of Service</i>
60	20-29 Conservatorship Investigation	Not Medi-Cal Eligible
60	30-39 Conservatorship Administration	Not Medi-Cal Eligible
60	40-49 Life Support/Board & Care	Not Medi-Cal Eligible
60	60-69 Case Management Support	Not Medi-Cal Eligible
60	70 Client Housing Support Expenditures	Not Medi-Cal Eligible
60	71 Client Housing Operating Expenditures	Not Medi-Cal Eligible
60	72 Client flexible Support Expenditures	Not Medi-Cal Eligible
60	75 Non-Medi-Cal Capital Assets	Not Medi-Cal Eligible
60	78 Other Non-Medi-Cal Client support Expenditures	Not Medi-Cal Eligible

Episode Structure Guidance

The report called "Service Programs with Assigned Service Codes" can be utilized to determine what Mode a facility is. The below table provides further information:

Service Program Type / Format	Inpatient / Outpatient	Mode Type
XXX-15-XXX	Outpatient	Mode 15
XXX-RE-XXX	Outpatient	SUD
XXX-NR-XXX	Outpatient	SUD
XXX-45-XXX	Outpatient	Mode 45
XXX-10-XXX	Inpatient	Mode 10
XXX-MH-XXX	Inpatient / Residential	Mode 5
XXX-05-XXX	Inpatient / Residential	Mode 5