## **CANS Implementation Team**

# Meeting Minutes 7-7-23

9:15-10:00

**Facilitator:** Jen White **Notetaker:** Cheryle Wilcox

**Present:** Cheryle Wilcox, Jen White, Angela Fagginger-Auer, Katina Idol, Dillon Burns, Melisa Beaulieu, Marianna Donnally, Beth Sausville, Matt McNeil, Heather Wilson

## Yellow indicates follow up

Agenda Item	Discussion Notes	Next Steps	
Regional updates and	Annual TCOM Conference:		
questions	<ul> <li>If you are interested, you can find all of the information here:</li> </ul>		
	https://cph.uky.edu/news/19th-annual-tcom-conference	e-lex-go-pop-	
	<u>health</u>		
	Cheryle and Alison will be attending.		
	Katina Idol, Lamoille:		
	<ul> <li>Using CANS at intake-their agency has discussed using it</li> </ul>	25.2	
	treatment planning tool, not at intake for assessment.	as a	
	treatment planning tool, not at intake for assessment.		
	Heather Wilson, NCSS:		
	<ul> <li>They shared with staff that they can get certified every to</li> </ul>	wo years, but	
	they are encouraging annual certification just to make it	easier to	
	track.		
	Coding: (see more detail below these notes)		
	H2000 code went live July 1 <sup>st</sup> .		
	<ul> <li>Request for an FAQ to be put on the DMH website. Does</li> </ul>	it apply to	
	the Adult and Child case rate and Success Beyond Six?	it apply to	
	<ul> <li>Could we add the agreement that we got from Praed about</li> </ul>	out the 2-	
	year certification for agencies to have something written		
	Cheryle followed up with Katie Smith, DMH Policy team,	to get more	
	information.		
	<ul> <li>This coding only applies to DA (not NFI as an SSA)</li> </ul>		
	Data:		
	<ul> <li>Biggest impact on benefit for outpatient therapy that Ho</li> </ul>	ward Center	
	found was severity score is most impacted in the first 6 r		
	Lauren Welch, DMH, presented about a month ago on a		
	show on Success Beyond Six CANS data. Lauren stated th		
	will be live on the DMH website at some point. Instead o		
	report, this data dashboard will provide immediate access	ss to data and	
	show it in a more digestible way. The data will not be filt	•	
	Cheryle will follow up for more information about timeling		
	and to see if Lauren can come to Sept. CANS meeting to	show the	

Agenda Item	Discussion Notes Next Steps
	data. Answer from Lauren—she is happy to come to our Sept. meeting and she is checking with IT about the go live date!
Certification updates from Praed	<ul> <li>Praed has agreed to <i>pilot</i> a two-year certification option.</li> <li>The two-year certification would be triggered by a .80 test score. (It's .70 for a one-year certification).</li> <li>You can take the test any time to get that .80 - so not dependent on how many years you've been doing the CANS, just by how well you understand the concepts as shown in your test score. If you get below a .80 you can take it again right then, or any time. As soon as you achieve a .80 you get two years from that date.</li> <li>In terms of timeline, they think they can work out the technical logistics of getting the Schoox system to allow two-year certifications for our group by May. Sounds like from this this hasn't happened so Cheryle will follow up with Praed.</li> </ul>
Vignettes: Praed thinks with our own vignettes testing will be more effective and less frustrating for users. Praed has requested that	<ul> <li>O-5 CANS Vignettes:         <ul> <li>Heather Wilson did this for the 0-5 CANS (thank you, Heather!) and is finalizing the rationale for the scoring sheets.</li> <li>Once that is all complete, Cheryle will submit these to Praed.</li> </ul> </li> <li>5-22 CANS:</li> </ul>
Vermont engage in writing two of our own testing vignettes. For the 5-22 CANS we need to identify some volunteers who can	Melisa has some she used for a train the trainer she will send. Jen offered to look at it and score it as well. Folks can review and send feedback to Melisa. Thank you, Melisa!!!  Test time:
draft Vermont vignettes and score them using our CANS. April and her team will then work with us to refine them, and make sure we're all on the same page about why things are scored certain ways. The new vignettes will eventually be put into our state's final.	<ul> <li>Some folks find printing the vignettes to have as reference during the test is helpful.</li> <li>Discussed it would be helpful in our vignettes to mention all items from the CANS so folks aren't just reading just looking to see if something is missing.</li> <li>It can feel like folks are just practicing how to take the test and pass rather than understanding fidelity to the tool and how to score.</li> <li>One agency has someone sit with each person when they take the test for the first time to support them.</li> <li>One tip folks share with test takers is to read the vignette that if it isn't talked about put a 0 for need or a 3 for strength; and then only go back if it's mentioned.</li> </ul>
Wrap Up and Next Steps	Next meeting on September 1 <sup>st</sup>

Billing Criteria	Minimum Clinical Documentation Required	Encounter Data to Support Clinical Documentation	Provider Qualifications	
B01 – Child and Adolescent Needs and Strengths Assessment (CANS 0-5 & CANS 5-22)				
Target Population: Children, Ages 0-22  Minimum duration for payment: N/A (session based / untimed)  Qualifying Encounter Yes	Vermont CANS Requirements  Resiliency Anxiety Depression Oppositional Anger Control Family / Family Relationships Impulsivity / Hyperactivity Adjustment to Trauma Caregiver Knowledge Suicidal Thought / Behaviors Self-Injury  Required at: Initial Assessment Every 6 months while the client remains enrolled in services.	Chronological log of all assessment services provided  Qualified providers may only use this code to document time spent face-to-face or telemedicine providing clinical assessment services to an individual.  All encounter data must include: -Client Identification -Name of Service -Staff Providing Service -Date of Service -Duration of Service -Location of Service	PRAED Foundation Certified Provider Supervised Billing Requirements Apply	

## Here is the list of case-rate qualifying codes:

#### ATTACHMENT E

MMIS CPT/HCPCS Procedure Codes and MSR Category Cross Walk

#### MENTAL HEALTH CASE RATE QUALIFYING CODES

MSR CATEGORY	ASSOCIATED MMIS ENCOUNTER CODES
A01	H2017
	T1017
	Howard Center
A01	ARCH
B01	H2015
B01, B02	H2014
B01	H2000
E01-E05	99212
E01-E05	90791
E01-E05	90792
E01-E05	90832
E01-E05	90834
E01-E05	90837
E01-E05	90846
E01-E05	90847
E01-E05	90853
E01-E05	99202

MSR CATEGORY	ASSOCIATED MMIS ENCOUNTER CODES
E01-E05	99203
E01-E05	99204
E01-E05	99205
E01-E05	99213
E01-E05	99214
E01-E05	99215
E01-E05	99241
E01-E05	99242
E01-E05	99243
E01-E05	99244
E01-E05	99245
E01-E05	H0031
E01-E05	H2010
E01-E05	90833
E01-E05	90836
E01-E05	90838
G01	90839

MSR CATEGORY	ASSOCIATED MMIS ENCOUNTER CODES
E01-E05	97151
E01-E05	97152
G02	H0046
H02-H03	T2038
E05	99366
E05	99367
E01	H0001
E01-E05	H0004
E04	H0005
	H0040
B01	Pathways Only
B01	H2019
B01	H2020
B01	H2032
E01	96130
E01	96136