



Provider Newsletter

2021 Q1

Medical Advisory Committee

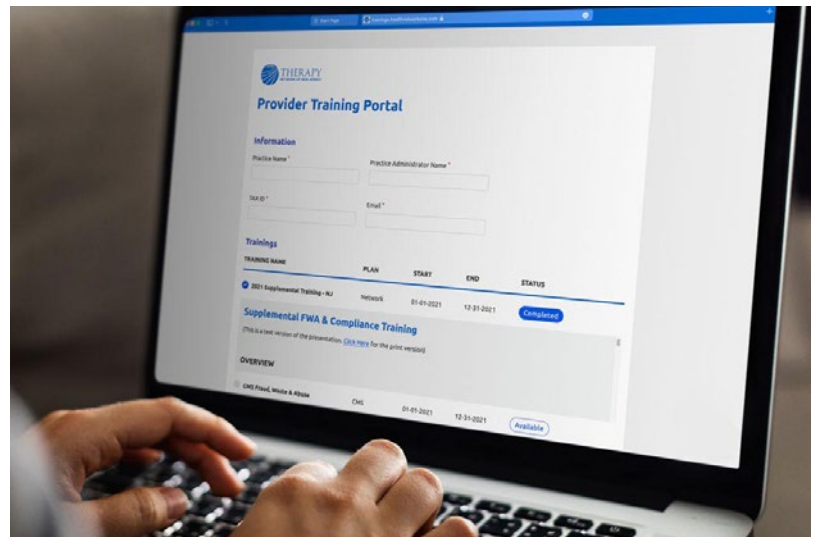
The Q1 2021 TNNJ MAC was held via WebEx on 3/18/2021. Items pertaining to gaps in our GEO access in the different counties were discussed, as well as new contract additions and the use of the web portal. We also discussed the distribution of different bulletins and important information regarding COVID-19, as well as PPE to the network at no cost to our providers. The TNNJ Medical Advisory Committee is used to discuss a number of policies, protocols, and clinical guidelines, quality related issues, integrated care delivery activities, as well as continued provider education initiatives.

The next TNNJ MAC will be held on June, 2021.

Retro Authorizations

As per Amerigroup’s directive we do not process any retroactive authorization request. The request for authorization must come within 30 days of the member being evaluated.

If the request is submitted after the 30 day window has expired, the authorization request will be denied.



Required Annual Provider Trainings

All providers with Therapy Network of New Jersey, are required to complete the Provider Trainings, within thirty days of their contract effective date and annually thereafter. The trainings can be located at:

 mytnnj.com/trainings

You may complete the trainings on any desk top or mobile device for ease of access and completion. Your attestation will confirm that your office has received all mandatory trainings for the year. Should you want a copy of the trainings for your office, they can be downloaded from the attestation page. NOTE: For providers who function under more than one Tax ID; please be sure to complete an attestation for each Tax ID that is contracted with Therapy Network of New Jersey.

Minimizing Peer to Peer Reviews

We see that majority of the Peer to Peer Review that are being conducted are due to one, or several, of the following reasons.

- Missing Documentation (evaluation, POC, signed POC, prescription/referral, standardized testing, baseline information related to goals, etc.)
- Standardized test information not complete
- Paperwork is not legible
- Goals are missing
- Assessment of impairment is missing
- No clarification when there are major discrepancies on tests or decline in patient status in comparison to prior episode

We at TNNJ would love to hear back from our Provider Network about what type of standardized tests you have found that are the most helpful in your setting.

In an effort to reduce the number of Peer to Peer reviews please be sure to do the following:

- Include medical history with pertinent diagnosis to assist in determining rehabilitation/habilitation potential and also supports current level of function
- Include detail in your documentation that speaks to the status of functional abilities prior to the condition resulting in the need for rehabilitation/habilitation services
- Include both treatment and medical diagnosis
- Include baseline information. All goals should have a baseline in the body of the objective findings.
- Short and Long Term Goals. STGs should track progress and work towards the Long term goals (LTGs). LTGs should support why the patient is being seen.
- Include exact frequency and duration of plan of care

Best Practices

Eleven Documentation Reminders

Did you include the following in your documentation, when requesting an authorization and/or continues treatment?

- Pertinent medical history, not just the treatment Dx.
- Prior level of function, if applicable.
- Baseline information that is related to the goals.
- Level of overall impairment.
- Specific level of skills for areas of concern.
- Short / Long term goals (Measurable and Functional).
- Updated goals.
- Specific Frequency and Duration.
- Approved abbreviations.
- Is your document legible?
- Did you document why there were missed visits?

Four Documents to include in evaluation and progress notes:

- Case History
- Testing
- Clinical, Summary and recommendations
- Plan of care: Goals

Plan of Care: Outcomes, what to consider?

- Write long and short-term goals that are functional and measurable
- Write progress notes that document progress towards functional gains and achieving goals (Short and Long term goals)

Why does it matter?

Goals guide your treatment, ensure continuity of care across clinicians and provide a benchmark for insurance to justify continued payment of services and keep Your Goals SMART (Specific, Measurable, Attainable, Relevant and Time bound).



Severity check list for the three specialties:

SLP Profound Severity Checklist:

- Standardized test scores 64 and lower or below 1st percentile
- Extremely limited communication ability- simple speech and communication is very difficult. They often have to rely on basic gestures or sounds to communicate. (May need use of AAC device, PECS, etc.)
- Limited functional expression and /or comprehension. Seriously interferes with and/or prevents communication.
- Many articulation errors and/or phonological processes are present. Connected speech mostly unintelligible. No error sounds stimulable for correct production.
- Voice or fluency disorder significantly impairs communication and intelligibility. Avoidance of speaking situations may be observed. Frustration behaviors are present. Awareness of dysfluent behavior.
- Dysphagia showing one or more of the following: significant oral stage bolus loss or retention, unable to clear; silent aspiration with 2 or more consistencies; nonfunctional volitional cough; unable to achieve swallow. NPO: unable to tolerate any P.O. safely.
- For oral aversion and feeding disorders, such as oral motor (delayed skills affecting oral phase of swallowing) or oral sensory processing disorders (hypersensitivity to smell, taste, or textures of foods): patient may struggle to meet basic nutritional requirements and may require full or partial nutritional support as a result of their restrictive dietary intake.

PT Profound Severity Checklist:

- Standardized test scores 80% or greater developmental delay. Or standardized test scores 80% disability or greater (Per objectives standardized tests scores).
- Dependent on adults for mobility and positioning.

OT Profound Severity Checklist:

- Self-care deficits resulting in maximal to total assistance.
- Sensory system deficits which contribute to profound delays in functional performance.
- Cognition deficits requiring maximal cues for redirection to stay on task or to follow 1 step commands.
- Standardized testing resulting in standard deviations 2.5 or greater from the norm