

TREATMENT SERVICES
Business Meeting
December 12, 2012 - 10am - NYC

I. Welcome/Introductions

Kevin R. Mulcahy, Sr. USPO/DATS, opened the meeting, and introduced CUSPO Michael Fitapatrik, Billing Specialist Chris Delin, Sr. Lab Tech. Jose Rodriguez, Analyst Doreen Mulholland, new DCUSPO Edwin Rodriguez, Jr. and Sr. USPTO Carlos Ramirez. A summary of the meeting will be posted on our public website, **probation.sdney.uscourts.gov**, in the coming weeks.

II. BPA Process Overview

Kevin advised everyone to read the RFP carefully - not only management, but the day to day operations staff, as well, so that everyone who works w/ our population is aware of the requirements and expectations. The RFP contains the “nuts & bolts” of our agreement, particularly Sec. C, which includes the Statement of Work (SOW).

III. Referral Process

Kevin discussed the electronic P-45, 11b & 11i process. Electronic files are password protected & encrypted to ensure confidentiality. Vendors are expected to accept referrals w/out delay. Communication between the officer and vendor is encouraged by the use of email, using the individual’s initials and PACTS#.

Each unit is equivalent to 30 minutes of service - for example, if an officer requests 2 units of group, the officer is requesting an hour group session.

Services are NOT to be provided w/out a P-45. If services are altered (added, subtracted, etc.), amended P-45s are required. Upon completion of treatment, termination P-45s are also required.

Intake assessments are NOT required for every referral. Prior to the referral, an internal assessment is completed by the officer, at which time it is determined if an assessment by the program is necessary. If an assessment is not requested, in an effort to satisfy OASAS requirements, the vendor may complete an assessment, and bill us for 2 units of IC to compensate for the time.

IV. Billing Format

Chris outlined our billing procedures - accuracy, timeliness, requirements & attachments.

At this time, although it is not required, we encourage vendors to utilize our electronic billing system. If interested, contact Chris for details.

As discussed at the Offerors’ Conference in July, ‘No Shows’ were to have been built into the pricing (Sec. B of RFP) that was submitted prior to the award to ensure compensation. Vendors are not permitted to bill for ‘No Shows’.

V. Monthly Treatment Reports (MTRs)

Kevin reminded everyone that the new MTR, which is located in the RFP, should be used for each case, and MUST be legible (preferably typed). Beginning February 2013, vendors will be required to email each MTR to a general probation email account, using our labeling system - further details to come. In addition, copies of the MTRs must still be included w/ the bills. Faxes will no longer be accepted.

V. Confidentiality & Disclosure

Kevin discussed confidentiality and disclosure, but reminded everyone that we, the federal government, are not bound by the same state regulatory agencies, ie: OASAS. However, we will certainly work w/ you to ensure requirements are met, and licencing is not jeopardized.

Issues that shouldn't be discussed w/ offenders include: validity of drug test results, questioning of supervision conditions. If these issues should arise, individual should be directed to discuss the issue with the officer. We MUST be informed about disclosure requests from 3rd parties.

VI. Drug & Alcohol Testing

Kevin & Jose discussed our drug & alcohol testing procedures and guidelines - ALL tests are to be RANDOM & OBSERVED. All vendors have rec'vd training, and the supplies for testing and shipping. Jose briefly went over shipping & supply procedures, chain of custody (COC) and drug testing results. Upon prior officer approval, offenders may submit a drug test at the program ONLY when their Tx session falls on the same day their RUP color/code has been selected - however, officers must be notified, via email, if this occurs. All urine specimens are to be sent to the lab w/in the 24 hrs, and should not be held to allow for additional specimens.

VII. Post-Award Monitoring (PAM)

Kevin discussed the Post Award Monitoring (PAM) process, which will begin in January 2013. PAM visits and reports must be completed 120 days after the initial award (January), 120 days prior to each renewal (June), and 120 days after each renewal (January) - in addition, if there are unsatisfactory ratings given, a visit must be completed w/in the following 60 days to ensure the program has resolved the issues. The visits are conducted to ensure vendors are complying w/ our requirements.

VIII Medicaid

Kevin & Ed discussed the importance of Medicaid, and that this payment option should always be applied as the primary billing source, if applicable. If an offender is not eligible, and all alternate payment options (private insurance, co-pay) have been explored, we will pay for the services. As a reminder, affordable healthcare options (Obama Care) goes into effect beginning January 1, 2013, and providers should consider these options as alternate payment sources, as well.

IX. **Questions**

In response to questions, Kevin, Ed, Chris & Jose provided the below responses:

- **Notification of non-compliant behavior w/in 24 hrs (no exceptions).**
- Vendors may and should request previous treatment assessments and/or reports, and officers will try and accommodate their requests.
- **Cost for written reports (ie: Court reports) & conferences should have been incorporated w/ the initial pricing & are not an additional cost.**
- Medicaid, private insurance and co-pay are always considered as the primary billing source. However, if an offender is not eligible for any, we will provide payment.
- **Vendors are required to provide credentials for all new staff.**
- Bills MUST be rec'vd no later than the 10th of each month.
- **All requests for testing supplies should be submitted by the 15th of each month. It's important to order supplies in advance to avoid running out.**
- All vendors have/will receive probation issues breathalyzer devices, which are to be issues for our cases.
- **Each client MUST have their own separate sign-in sheet - copies are included in the file, and sent with each with the bill.**
- With electronic billing, all the required documentation, including sign-in sheets, must be included w/ the bill.
- **If a service is provided late in the month, vendors can include this service in the following month's bill, as long as it is documented.**
- During OASAS audit, OASAS is permitted to review our files.
- **Breath samples should be collected, via breathalyzer device, when requested, and if there is suspicion of alcohol use - if this situation occurs, the officer must be notified immediately.**
- If an individual's Medicaid becomes active during his Tx term, Medicaid becomes the primary billing source.
- **For private insurance purposes, the individual is responsible for any deductible they may have in place - probation is not to be billed for deductibles.**
- If an individual refuses to allow a vendor bill a 3rd party payment source, officer should be immediately notified to address issue.