

BHPN Therapy Provider Meeting



October 28, 2021



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Welcome!

**Quarter 4
BHPN Therapy Provider Meeting**

theBHPN
behavioral health provider network

Today's Agenda

1. Welcome

2. BHPN Reminders

3. KP Therapy Report Section IV – Episode of Care Goal Considerations

4. Clinical Recommendations – AAC

5. Questions

BHPN Reminders

- Please be sure to submit progress reports to theBHPN 5-7 days before the progress note is due to KP.
 - All progress reports are due to KP 30 days prior to end of authorization. Reports submitted to KP after 30 days prior to the end of authorization date are considered late.
 - Most revision submissions are due by the end of the next business day.
- When submitting a discharge report for ending an episode of care for clinical reasons, please add the anticipated final session date into the comments section of the discharge portion in Section V.
 - FYI Christina is calling families when discharge reports are received to review the discharge process and next steps.
- Please reach out to BHPN with attendance concerns prior to submitting a discharge report so theBHPN has an opportunity to assist providers and families on the attendance issues.
- Don't forget the decimal for ICD-10 codes along with the description per the authorization vs. the ST evaluation report.
- Coordination of care is an essential part of KP's model of care. Please be sure to coordinate care with other providers before submitting a report. Don't have a contact? Reach out to Christina and she can locate this information for you!
- Christina's email is now christina.mejia@theBHPN.org. When emailing about a client, please email theBHPN@theBHPN.org and CC Christina.

Goal Considerations for Section IV



Episode of Medical Therapy Will Be Completed When... Goal Considerations

- Goals need to be specific and long-term.
- They should include functional skills therapist hopes to achieve during a short burst of medically based treatment.
(Think 18–24-month period of time at the onset of treatment)
- Avoid general statements found in the discharge criteria of the initial KP evaluation.

Discharge from therapy when the following goals/tasks have been met/occurred:

1. When functional goals stated above and/or those created in conjunction with the treating SLP have been met.
2. When parents are sufficiently trained to implement home exercise program (HEP).

Discharge from therapy may occur given any of the following:

1. Discharge may occur if no/limited functional progress is made toward current goals.
2. Discharge may occur if patient/family does not participate or attend therapy services.
3. Discharge may occur if patient meets functional goals for episode of care.
4. Discharge may occur when clinical observation and/or standardized assessment scores are within the average range suggesting that speech therapy is no longer warranted.

Example of discharge criteria of initial KP evaluation

Goal Examples	
Instead Of...	Try...
Parent is able to carry over strategies taught in sessions.	Adding in the type of cue you can observe parent using that would support the client's functional skill. Perhaps it is the parent offering a verbal reminder to make a request or offering two choices to assist client with making a request.
Client is able to improve receptive and expressive language for functional communication.	What specific receptive skills do you hope to achieve during the short burst of treatment? Is it following 2 step directions during daily activities? Same for expressive language. What is reasonably expected during a short burst of medically based therapy treatment?

AAC Update



Thinking About High Tech AAC Options

Before recommending a speech generating device (SGD) for a client in a progress note, please do the following:

Be sure to check in with the family to determine if the client receives school-based speech therapy. If so, complete a release of information form and be sure to consult with them as there may be an assessment for AAC with the district.

Email theBHPN@theBHPN.org and CC christina.mejia@theBHPN.org with the client's name and MRN. Include summary of treatment and reasons for considering AAC as a possible support for client.

- BHPN/Christina will review case and reach out to discuss.
- This may lead to requesting a meeting with the PDDO SLP assigned to the case.
- The PDDO team can assist providers with determining if an SGD is an appropriate option for the client.

Questions?

