# DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES

## Behavioral Health Homes
### Practice Guideline #5 – Health Assessments

**BHH Practice Guideline:**
Health Assessment Data Collection

**Guideline Author:**
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**Purpose:**
Outline the expectations for collecting, documenting, and reporting health data

**Effective Date:**
10/1/2017

**Target Group:**

Nurses

BHH Director

BHH Admin Support

Staff Collecting BP, BMI, tobacco cessation information, and depression screenings

**Contacts for Questions:**

1-844-551-2736 for HA information, entering data into ProviderConnect, or Health Assessment reporting

Lauren Staiger at 860-418-6617 for entering G codes in DDaP/WITS and billing questions.

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### Practice Summary:

This practice guideline outlines the expectations for collecting, documenting, and reporting on health assessment (HA) data, which currently includes body mass index, blood pressure, tobacco use and cessation activities offered, and depression screening.

### Definitions:

**Body Mass Index (BMI)-Value-**for adults 18 and older, a weight to height ratio, calculated by dividing one's weight in kilograms by the square of one's height in meters, used to measure body fat. Refer to Data Reporting Requirements for the underweight, normal, overweight, and obese statuses.

**Body Mass Index (BMI)-Percentile-**for children under 18 years old. For children and teens, BMI is age- and sex-specific. Because weight and height change during growth and development, as does their relation to body fatness, a child's BMI must be interpreted relative to other children of the same sex and age.

**Blood Pressure (BP)-**the force of blood pushing against the walls of the arteries as the heart pumps blood. Systolic pressure is the pressure when the heart beats and diastolic is the pressure when the heart is at rest between beats. Refer to Data Reporting Requirements for the blood pressures categories and values.

**Tobacco Cessation Interventions (TC)-**services/activities an individual participates in or receives, in order to stop smoking or using other tobacco products. This includes educational materials, group and/or individual interventions, medication assistance, rewards to quit, etc.

**Follow-up for Positive Screening for Depression-**as defined in the 2016 CMS specifications, proposed outline of treatment to be conducted as a result of clinical depression screening. Follow-up for a positive depression screening must include one (1) or more of the following:
- Additional evaluation
- Suicide risk assessment
- Referral to a practitioner who is qualified to diagnose and treat depression
- Pharmacological interventions
- Other interventions or follow-up for the diagnosis or treatment of depression

**Depression Screening Exclusions-**as defined in the 2016 CMS specifications.
- Exclude: active diagnosis of depression or bipolar = Patient has an active diagnosis of Depression or Bipolar Disorder-diagnosis codes for the depression and bipolar disorder exclusions are not provided; clinical record review is required to determine the exclusions.
- Exclude: refuses to participate = Patient refuses to participate in screening
- Exclude: in crisis, tx delay to jeopardize health =Patient is in an urgent or emergent situation where time is of the essence and to delay treatment would jeopardize the patient's health status
- Exclude: functional capacity may impact results = Situations where the patient's functional capacity or motivation to improve may impact the accuracy of results of nationally recognized standardized depression assessment tools. For example: certain court-appointed cases or cases of delirium.

## General Steps for Provider Implementation:

1. At a minimum, unless certain exclusions apply, it is expected BHH providers will collect BMI, BP, tobacco cessation information, and depression screenings annually for assessing health. Reporting is done by calendar year so it is expected clients have at least one HA every calendar year.

2. See the ProviderConnect Health Assessment User Guide for detailed data entry instructions.

3. PNPs and SOs will begin entering HA information into ProviderConnect, beginning 10/1/17.

4. PNPs will enter HAs obtained before 10/1/17 in DDaP. They will enter HAs obtained on or later than 10/1/17 in ProviderConnect.

5. SOs will enter previously collected HAs, that were not submitted through spreadsheets, in ProviderConnect beginning October 1, 2017. SOs will have until January 1, 2018 to enter all previously collected HA data into ProviderConnect.

6. It is expected staff will directly enter HA results into ProviderConnect, but a write-in health assessment form, and a fillable health assessment form are available, if needed. These forms are to be used internally for data collection purposes only and should not be sent to ABH or Beacon. If you decide to use the forms to collect HA data, you will still need to upload the information electronically into ProviderConnect.

7. Using data for program improvement - Data entered into ProviderConnect will have a shorter lag time to get to the Tableau dashboards than data entered into DDaP/WITS. Be aware of refresh dates when using the data.

## Body Mass Index (BMI) Guidelines:

**For adults (18 and older):**
Required data elements:
- Date of collection
- Height
- Weight
- BMI value (auto-calculated)

Guidance for collecting data elements:
- Height and weight may be collected by the BHH team or other appropriate agency staff, or they may be obtained from other health care professionals who are collecting the data.
- Height and weight values should be collected on the same date and neither should come from client self report.

Steps for entering data in ProviderConnect:
- Enter date of data collection
- Enter height and weight values
- ProviderConnect will calculate the BMI value

**For children (under 18):**

Required data elements:
- Date of collection
- BMI percentile

Guidance for collecting data elements:
- BMI percentiles may be obtained from a Pediatrician or can be calculated by the BHH team or other appropriate agency staff.
- If BMI percentile is calculated by the BHH provider, it should be calculated according to the Centers for Disease Control and Prevention (CDC) or American Academy of Pediatrics (AAP) guidelines. Calculating BMI involves measuring height and weight, and getting a BMI using child/teen calculator that can be expressed as a percentile.

Steps for entering data in ProviderConnect:
- Enter date of data collection
- Enter BMI percentile

**Blood Pressure (BP) Guidelines:**

Required data elements:
- Date of collection
- Systolic value
- Diastolic value

Guidance for collecting data elements:
- BP values may be collected by the BHH team or other appropriate agency staff, or they may be obtained from other health care professionals who are collecting the data.
- Both BP values should be collected on the same date and neither should come from client self report.

Steps for entering data in ProviderConnect:
- Enter date of collection
- Enter systolic value
- Enter diastolic value

**Tobacco Cessation (TC) Guidelines:**

Required data elements:
- Tobacco Assessment Date
- Tobacco Assessment Results

Guidance for collecting data elements:
- Information may be collected from real-time assessments, or from review of client records.
- For entering older health assessment data, the following crosswalk may be used for TC intervention response options for older HAs:

| Old Health Assessment Response Options | New Health Assessment Response Options |
| --- | --- |
| Group Intervention | Cessation Intervention Offered |
| Individual Intervention | Cessation Intervention Offered |
| Nicotine Replacement Therapy | Cessation Intervention Offered |
| Rewards to Quit | Cessation Intervention Offered |
| Educational Material | Cessation Intervention Offered |
| N/A | Not a smoker/tobacco user |
| None | Cessation Intervention Offered OR Cessation Intervention Not Offered |
| Refused | Cessation Intervention Offered |

Steps for entering data in ProviderConnect:
- Enter date of assessment
- Select from the drop-down, one of the following:
    - Not a smoker/tobacco user
    - Cessation intervention not offered
    - Cessation intervention offered

**Depression Screening Guidelines:**

Required data elements for ProviderConnect:
- Date of Depression Screening (date of screening or exclusion determination)
- Depression Screening Outcome

Steps for entering data in ProviderConnect:
- Enter date of collection (date of screening or exclusion determination)
- Select from the drop-down, one of the following:
    - Positive screen, follow-up plan documented
    - Negative screen, no follow-up
    - Exclude: active diagnosis of depression or bipolar
    - Exclude: refuses to participate
    - Exclude: in crisis, tx delay to jeopardize health
    - Exclude: functional capacity may impact results

Required data elements for DDaP/WITS:
- Date of Depression Screening (service date)
- Appropriate G codes (for billing)

Guidance for collecting data elements:
- Every BHH client 12 years old or older should be assessed annually and have either: a) a depression screening completed, or b) identified as being excluded from screening.
- If the client is in outpatient services, and is eligible for screening (doesn't meet exclusionary criteria above), the screening should be done on the same day as an outpatient visit. It doesn't have to be done by the clinician, but should have the same date, if possible.
- Providers can use any assessment tool that has been appropriately normalized and validated for the population in which it is being utilized (PHQ-9, PHQ-2, etc).
- Clients not eligible for screening, for any of the four exclusionary reasons indicated above, should still have a date entered and the appropriate reason for excluding them, in ProviderConnect.

Guidance for entering data elements:
- PNP and SO providers will enter depression screening data as follows for each client:
    - A G code in DDaP or WITS if the depression screening completed did not happen within a billable OP service. The G code entered in DDaP/WITS will then be billed under BHH.
    **OR**
    - A positive or negative screening outcome in ProviderConnect if the screening happened as part of another billable service. This will ensure it does not get billed under BHH.
    **OR**
    - An exclusion in ProviderConnect if the client meets one of the 4 exclusionary criteria and wasn't screened.

**Data and Reporting Changes (see data flow charts on pages 5 for PNPs and page 6 for SOs):**

- BMI Height and Weight fields are new. New data elements will be required once HA is live in ProviderConnect.

- PNP and SO providers will enter BMI, BP, and TC data into ProviderConnect, rather than into DDaP (PNP) or Excel Spreadsheets (SO). Depression Screening data will be entered into DDaP/WITS or PC (see guidance in previous section)

- Tobacco cessation questions were changed from previous health assessment. New data elements will be required once HA is live in ProviderConnect.

- If entering a screening outcome or exclusion in ProviderConnect, providers may enter results obtained before the client became active BHH.
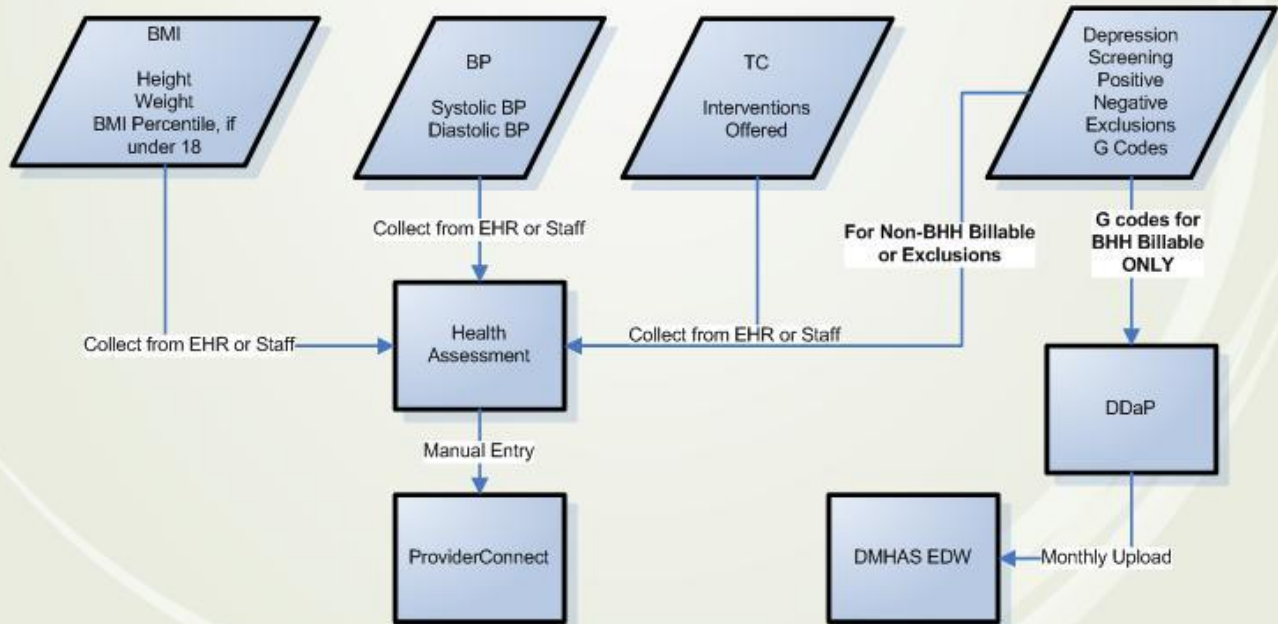
**Available Tools/Resources:**

CTBHP Online Account Request Form-to get ProviderConnect Access
ProviderConnect Health Assessment User Guide
Health Assessment Write-in Form
Health Assessment Fillable Form
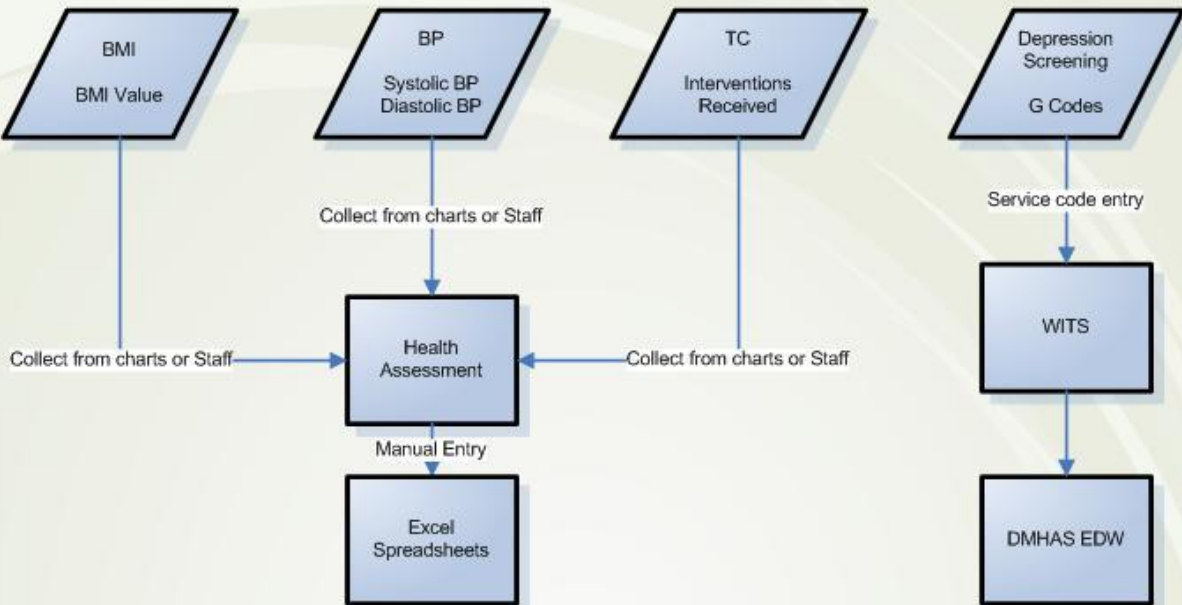AAP BMI Percentile Charts for youth and teens

# Current PNP Health Assessment Provider Data Flow
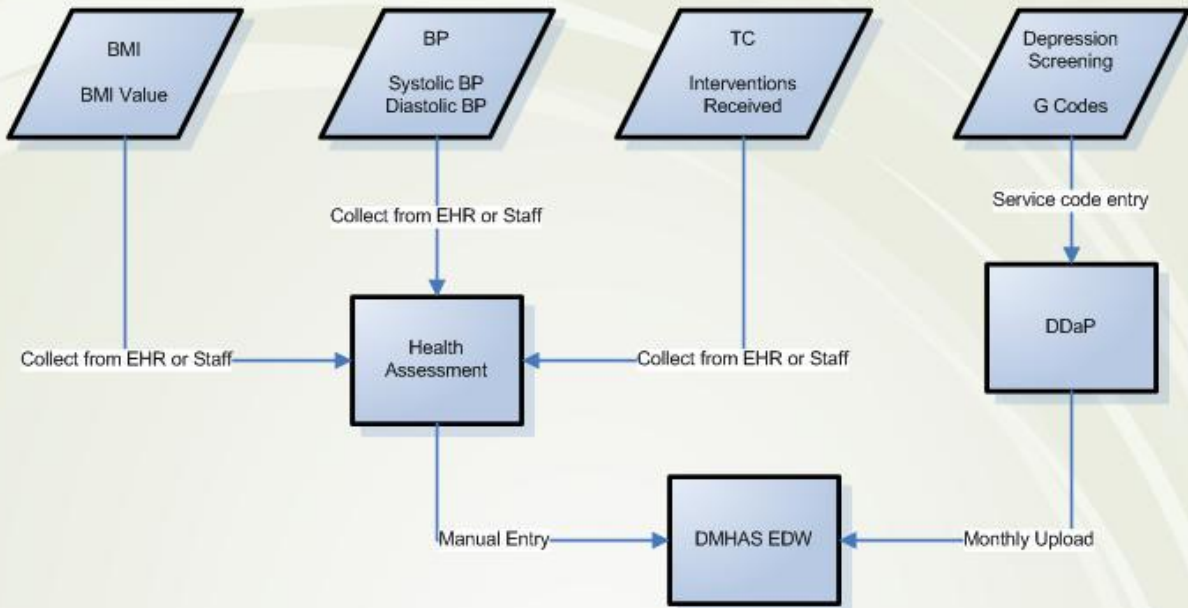


# New PNP Health Assessment Provider Data Flow

# Current SO Health Assessment Provider Data Flow

**BMI**

BMI Value

**BP**

Systolic BP
Diastolic BP

**TC**

Interventions
Received

**Depression
Screening**

G Codes

Collect from charts or Staff

Service code entry

Collect from charts or Staff → **Health Assessment** ← Collect from charts or Staff

**WITS**

Manual Entry

**Excel Spreadsheets**

**DMHAS EDW**

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# New SO Health Assessment Provider Data Flow

**BMI**

Height
Weight
BMI Percentile, if
under 18

**BP**

Systolic BP
Diastolic BP

**TC**

Interventions
Offered

**Depression
Screening
Positive
Negative
Exclusions
G Codes**

Collect from charts or Staff

**For Non-BHH Billable
or Exclusions**

**G codes for
BHH Billable
ONLY**

Collect from charts or Staff → **Health Assessment** ← Collect from charts or Staff

**WITS**

Manual Entry

**ProviderConnect**

**DMHAS EDW**