CHILD AND ADOLESCENT MENTAL HEALTH DIVISION
MAX – Provider Portal
Training Exercises for Contracted Providers
<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td><strong>PORTAL BASICS</strong></td>
<td>3</td>
</tr>
<tr>
<td>1.1</td>
<td>LOGIN &amp; USER PROFILE</td>
<td>3</td>
</tr>
<tr>
<td>1.2</td>
<td>USER ROLES</td>
<td>4</td>
</tr>
<tr>
<td>1.3</td>
<td>AGENCY PROFILE</td>
<td>4</td>
</tr>
<tr>
<td>1.4</td>
<td>MULTIFACTOR AUTHENTICATION (MFA)</td>
<td>6</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td><strong>REFERRALS</strong></td>
<td>8</td>
</tr>
<tr>
<td>2.1</td>
<td>VIEWING REFERRALS</td>
<td>8</td>
</tr>
<tr>
<td>2.2</td>
<td>ACCEPTING REFERRALS</td>
<td>9</td>
</tr>
<tr>
<td><strong>3</strong></td>
<td><strong>THE MENTAL HEALTH TREATMENT PLAN (MHTP)</strong></td>
<td>11</td>
</tr>
<tr>
<td>3.1</td>
<td>DEVELOPING THE MHTP</td>
<td>11</td>
</tr>
<tr>
<td>3.2</td>
<td>REVISIING THE MHTP</td>
<td>15</td>
</tr>
<tr>
<td><strong>4</strong></td>
<td><strong>PROGRESS NOTES</strong></td>
<td>17</td>
</tr>
<tr>
<td>4.1</td>
<td>IN-HOME SERVICES (ABI, IIH, IILS, FFT, MST)</td>
<td>17</td>
</tr>
<tr>
<td>4.2</td>
<td>OUT-OF-HOME SERVICES (CBR, HBR, TFH) – THERAPY &amp; GROUP SESSIONS</td>
<td>20</td>
</tr>
<tr>
<td>4.3</td>
<td>OUT-OF-HOME SERVICES (CBR, HBR) – OVERNIGHT SHIFT NOTE</td>
<td>23</td>
</tr>
<tr>
<td>4.4</td>
<td>OUT-OF-HOME SERVICES (CBR, HBR) – AM / PM SHIFT NOTE</td>
<td>24</td>
</tr>
<tr>
<td>4.5</td>
<td>OUT-OF-HOME SERVICES (TFH, TRH) – DAILY NOTE</td>
<td>25</td>
</tr>
<tr>
<td>4.6</td>
<td>SUPERVISOR APPROVAL</td>
<td>26</td>
</tr>
<tr>
<td><strong>5</strong></td>
<td><strong>INVOICING</strong></td>
<td>29</td>
</tr>
<tr>
<td>5.1</td>
<td>CREATE INVOICE</td>
<td>29</td>
</tr>
<tr>
<td>5.2</td>
<td>EDIT UNIT COST/FEE FOR SERVICE CONTRACT INVOICE</td>
<td>30</td>
</tr>
<tr>
<td>5.3</td>
<td>EDIT COST REIMBURSEMENT CONTRACT INVOICE</td>
<td>31</td>
</tr>
<tr>
<td>5.4</td>
<td>VIEW PROGRESS NOTE &amp; ASSOCIATED INVOICE STATUS</td>
<td>37</td>
</tr>
<tr>
<td><strong>6</strong></td>
<td><strong>EXTRAS</strong></td>
<td>39</td>
</tr>
<tr>
<td>6.1</td>
<td>VIEWING CUSTOMERS</td>
<td>39</td>
</tr>
</tbody>
</table>
1 Portal Basics

1.1 Login & User Profile

- Go to https://bhaprod.dynamics365portals.us/ to access the Provider Portal login page
  - You can access the training portal here: https://bhatrainportal.dynamics365portals.us/
  - The training portal is the best environment for new staff to learn the system
- Click Sign In located in the top navigation bar

Welcome to the Provider's Portal!

- Sign in using your username and password
  - Username:
  - Password:
- This brings you to your user Profile where you can update your business information
1.2 USER ROLES

There are three user roles within the provider portal with different viewing and editing capabilities.

- **Provider Administrator**: This designated person(s) within your organization can edit agency profile information, send portal invites, edit provider roles/access rights, respond to provider referrals, and create and submit progress notes and invoices.

- **Rendering Provider Supervisor**: This designated person(s) within your organization has permission to view and complete tasks, view customers, cases, and service authorizations, respond to provider referrals, edit and submit provider plans, and create and submit progress notes.

- **Rendering Provider**: This designated person(s) within your organization has permission to view and complete tasks, view customers, cases, and service authorizations, edit provider plans, and create progress notes.

1.3 AGENCY PROFILE

**Note**: All authenticated users for the agency can view the profile, but only individuals with a **Provider Administrator role** can edit the information within the Provider Profile.

- As a Provider Administrator, you can navigate to the Provider Profile the following ways:
  - Navigate to **Provider** in the green navigation bar at the top of the page, then select **Provider**
  - Click the **Home** button in the green navigation bar at the top of the page, then select **Provider Profile**
  - From the **Provider Profile** page, the user can:
    - Update Provider Attributes
- Update Contact Details (General)
- Add or Edit Provider Services
- Update Provider Address
View Rendering Providers and Credentials

View Provider Contracts

Enter data in the fields you would like to update then click Update Information at the top right of the profile page

1.4 Multifactor Authentication (MFA)

Note: You will need to set up Multifactor Authentication (MFA) for logging in to the Provider Portal. Each time you are login in, you will need to enter a six-digit code that will be sent to you via Landline, Business cell phone, or Personal cell phone.

- When setting up your MFA, you have three options:
  - Landline (i.e. Business line, home phone, etc.)
  - Business cell phone
  - Personal cell phone
**Note:** If a Landline is used, a call will be sent to your landline to give you a six-digit code (you need to be around the landline that you had set up when logging in to the provider portal).

- **Landline:**
  - If you are choosing a **landline**, you will receive a call with a voice message that will have a six-digit code

- **Business cell phone:**
  - If you are choosing a **business cell phone**, your cell phone will receive a text message with a six-digit code

- **Personal cell phone:**
  - If you are choosing a **personal cell phone**, your cell phone will receive a text message with a six-digit code

**Note:** When entering your six-digit code you will be given an option to remember your login for up to 14 days.
2 Referrals

2.1 Viewing Referrals

*Note:* Only Provider Administrator and Rendering Provider Supervisor users can respond to a Referral.

- Navigate to Provider in the green navigation bar at the top of the page, then select Referrals.

*Note:* By default, the Referrals page will display a list of all referrals that have been Submitted to your agency. If another agency is selected by CAMHD to provide the service (Status Reason = Alternate Provider Selected), the referral will no longer appear on your referral list.

- You can change the list view by selecting an option from the menu or clicking on a column heading to sort ascending / descending.

- To view referrals, click on the Customer name or the action dropdown (downward arrow on the far right of the screen) and select View Details.

- From the Referral Details page, review the Customer, Case and Service Plan information.
2.2  Accepting Referrals

- Open a referral and click **Accept the Referral**

- On the Referral Acceptance Form (RAF), complete the following fields:
  
  o **Provider Referral Status** (select option: Accepted by Provider; Accepted but No Start Date; or Accepted as Waitlist)

  o **Anticipated Admit / Start Date** (if Status = Accepted by Provider)

  o **Date Waitlisted & Waitlist Number** (if Status = Accepted as Waitlist)
- Rendering Provider 1 (assign therapist)
- Rendering Provider 1 Credential (select therapist’s credential level)
- Rendering Provider 2 (assign paraprofessional / additional provider if applicable)
- Rendering Provider 2 Credential (select additional provider’s credential level)
- Provider Agency Contact Signature (enter name of person completing the RAF)

• Click **Accept the Referral** at the top of the form to submit the RAF

**Note:** For Accepted Customers, the RAF can be updated or modified, this includes changing the Rendering Provider and/or Provider Referral Status by clicking **Accept the Referral** on the Referral Details page (Reject the Referral no longer appears).

• On the Referrals page, notice that Provider Referral Status has been updated

• The Care Coordinator will review the RAF and select an Agency to provide the requested service, this is reflected in the Status Reason column of the Referrals page

**Note:** If the Care Coordinator selects another Provider, the referral will disappear from your Referrals page.
3 The Mental Health Treatment Plan (MHTP)

3.1 Developing the MHTP

- Once the Care Coordinator selects an Agency, the assigned therapist (Rendering Provider) will see New Customer Case, Submit MHTP on their Tasks list.
- Click the Customer’s name to view additional information about the youth / family.
- Scroll down to the Provider Plan section – an MHTP template has been started by the Care Coordinator – from the action dropdown, select Edit.
- Alternatively, navigate to Customers in the green navigation bar at the top of the page, then select Provider Plans to view a list of MHTPs assigned to you; select Edit from the action dropdown to open the MHTP.
• Select the customer you will be working on
• On the customer's profile page, scroll down to "Provider Plans" and click +Create

You will see one or more "Initial Plan" as Submitted and Approved/Complete, these are for billing purposes and will not be for editing. A new working MHTP will need to be created.

• Click on the magnifying glass next to the Service Plan box which will open a new screen.

• Only one "Plan Name" should show up. Confirm the customer's name.
• Click the "Select" button at the bottom of the box.

• Complete the following fields:
  o Plan Mode (select Initial Plan)
  o Date of Plan (date plan developed)
  o Start Date (admission date)
- **Youth Information** (Description, Strengths, Barriers)
- Notice the **Treatment Focus Areas** and **Treatment Targets** from the CMP appear in the **Treatment Recommendations** section
- Click **+ Create** in the **Provider Treatment Targets** section and complete the following fields:
  - **Treatment Focus** (select one of the options from the CMP)
  - **Behavior [Treatment Target]** (select one – preferably one that matches the CMP)
  - **Start Date** (goal start date)
  - **Projected End Date**
  - **Measurable Goal/Outcome**
- Click **Submit**
- The treatment target should populate in the **Provider Treatment Targets** table
  - See attachment / last page for full listing of Treatment Target options

- From the action dropdown, select **Edit** to add Practice Elements for the given treatment target
- At the bottom of the treatment target form, click **+ Create** to add practice elements

- Choose the practice element using the look up function (magnifying glass)
  - See attachment / last page for full listing of Practice Element options
• Add Start date and any treatment description as necessary

• Repeat the above steps to create Goals and Practice Elements for each identified Treatment Target

  • Click **+ Create** in the **Treatment Format** section and complete the following fields:
    - **Name** (enter a number or letter – 1 or A)
    - **Intervention Format** (select one of the options)
    - **Sessions Per Week**
    - **Units Per Session**
    - **Additional Comments** (if necessary)

• Click **Submit**

• Repeat the above steps for all planned Treatment Formats

• Click **Update** at the bottom of the MHTP form

**Note:** You do not have to complete the **Provider Plan Services** and **Provider Recommended Step-Down Treatment** sections at this time.

• Once all necessary info has been added to the MHTP, the **Rendering Provider Supervisor** can select **Proceed to Approval** at the bottom of the page
If you need to make changes to the MHTP, click **Back to Edit**.
If you are satisfied with the MHTP, enter a **Provider Approved Date** then click **Submit Provider Plan**.

**Note:** The MHTP cannot be changed once it has been submitted.

The Care Coordinator and Clinical Lead will be notified that the MHTP has been submitted; after reviewing it, they will set the status to either **Approved/Completed** or **Needs Revision**.

### 3.2 Revising the MHTP

Only **Rendering Provider Supervisors & Provider Administrators** will see the “Proceed to Approval” and “Submit the Provider Plan” buttons.

If the MHTP Status Reason reads **Needs Revision** or **Pending**, the MHTP can be modified by selecting **Edit** from the action dropdown.
• When the MHTP opens, notice the **Revisions Requested** field

![Image of MHTP form]

• Make the necessary changes and click **Update** at the bottom of the MHTP form
• Open the MHTP again, select **Proceed to Approval** at the bottom of the page
• Enter a **Provider Approval Date** and click **Submit Provider Plan**

**Note:** When you need to update the MHTP, ask the Care Coordinator to set the Status to **Draft** or initiate a new MHTP template.

_We realize this is less than ideal – please know we are working on changing this process and hope to have it corrected in a few months._
4 Progress Notes

4.1 In-Home Services (ABI, IIH, IILS, FFT, MST)

- Navigate to Customers in the green navigation bar at the top of the page, then select Customers
- Click on your Customer’s name to open the Customer record
- Select the Progress Notes tab and click + Create

- When the New Progress Note template opens, complete the following fields:
  - Name (rename the note: DAP – service date)
  - Service Authorization (if there is more than one active Service Auth, click on the and select the appropriate one then click Select)
  - Start Date & Time
  - End Date & Time
  - Place of Service (click on the and select the appropriate location then click Select)
  - Units
  - Service Format
- Other Service Setting (if applicable)
- Other Service Format (if applicable)
- Data
- Plan
- Assessment
- Date Completed

- Click Save & Continue

Once the Progress Note is saved, you can now add Treatment Targets and Practice Elements
- Click + Create to add a Treatment Target

- Click on the select a Behavior (Treatment Target) that matches your MHTP then click Select
- Select a Progress Rating, then click Submit

Practice Elements
• Click **Add** to add a **Practice Element**

Practice Elements

![](Image)

• Click on the **Add** and select a Practice Element that matches your MHTP then click **Select**
• Click **Submit**
• Repeat the above steps to add more Practice Elements
• Click **Save & Return**

Add more Treatment Targets and Practice Elements if necessary

• To submit the Progress Note, click **Proceed To Submission** or **Update** (if Rendering Provider)

**NOTE:** Only Rendering Provider Supervisors and Provider Administrators can Proceed to Submission.
4.2 OUT-OF-HOME SERVICES (CBR, HBR, TFH) – THERAPY & GROUP SESSIONS

- Navigate to Customers in the green navigation bar at the top of the page, then select Customers
- Click on your Customer’s name to open the Customer record
- Select the Progress Notes tab and click + Create

When the New Progress Note template opens, complete the following fields:
- Name (rename the note: DAP – service date)
- Service Authorization (if there is more than one active Service Auth, click on the and select the appropriate one then click Select)
- Start Date & Time
- End Date & Time
- Place of Service (click on the and select the appropriate location then click Select)
- Units (DAP Note Units = 0)
- Service Format
- **Other Service Setting** (if applicable)
- **Other Service Format** (if applicable)
- **Data**
- **Plan**
- **Assessment**
- **Date Completed**

- Click **Save & Continue**
- Once the **Progress Note** is saved, you can now add **Treatment Targets** and **Practice Elements**
- Click **+ Create** to add a **Treatment Target**

### Treatment Targets

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Progress Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggression</td>
<td>4</td>
</tr>
</tbody>
</table>

- Click on the **search** to select a Behavior (Treatment Target) that matches your MHTP then click **Select**
- Select a Progress Rating, then click **Submit**

### Practice Elements

- Click **+ Add** to add a **Practice Element**

<table>
<thead>
<tr>
<th>Practice Name (Practice)</th>
<th>Practice Category (Practice)</th>
</tr>
</thead>
</table>

- Click on the **search** and select a Practice Element that matches your MHTP then click **Select**
- Click **Submit**
- Repeat the above steps to add more Practice Elements
• Click **Save & Return**

**Practice Elements**

<table>
<thead>
<tr>
<th>Practice Name (Practice)</th>
<th>Practice Category (Practice)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attending</td>
<td>Behavior Management</td>
</tr>
</tbody>
</table>

**SIGNATURE**

- **Provider**
  - CW Behavioral Health Services
- **Rendering Provider**
  - Ralph Dbny
- **Date Completed (Rendering Provider)**
  - 12/18/2018

**NOTE:** Only Rendering Provider Supervisors and Provider Administrators can Proceed to Submission.
4.3 **OUT-OF-HOME SERVICES (CBR, HBR) – OVERNIGHT SHIFT NOTE**

**Note:** The Overnight Shift Note is the billing moment for Residential Services.

- Navigate to Customers in the green navigation bar at the top of the page, then select Customers
- Click on your Customer’s name to open the Customer record
- Select the Progress Notes tab and click + Create
- When the New Progress Note template opens, complete the following fields:
  - **Name** (rename the note: Overnight Shift - service dates)
  - **Service Authorization** (click on the search and select the appropriate Service Auth and click Select)
  - **Start Date & Time** (Note: these must be on the same day, i.e. 12:00 midnight to 7:00 am)
  - **End Date & Time**
  - **Place of Service** (click on the search and select the appropriate location then click Select)
  - **Units (Overnight Shift Note Units = 1)** Note: 1 unit per note is the maximum acceptable.
  - **Other Service Setting** (if applicable)
  - **Data** (state if youth was present – in their bed – at midnight)
  - **Date Completed**
  - Click **Save & Continue**
  - To submit the Progress Note, click **Proceed To Submission**
4.4 OUT-OF-HOME SERVICES (CBR, HBR) – AM / PM SHIFT NOTE

- Navigate to Customers in the green navigation bar at the top of the page, then select Customers
- Click on your Customer’s name to open the Customer record
- Select the Progress Notes tab and click + Create
- When the New Progress Note template opens, complete the following fields:
  - Name (rename the note: Overnight Shift - service dates)
  - Service Authorization (click on the search icon, select the appropriate service auth and click Select)
  - Start Date & Time
  - End Date & Time
  - Place of Service (click on the search icon, select the appropriate location then click Select)
  - Units (AM / PM Shift Note Units = 0)
  - Service Format
  - Other Service Setting (if applicable)

- Click Save & Continue
- To submit the Progress Note, click Proceed To Submission
4.5 OUT-OF-HOME SERVICES (TFH, TRH) – DAILY NOTE

**Note:** The Daily Note is the billing moment for TFH / TRH Services.

- Navigate to Customers in the green navigation bar at the top of the page, then select Customers
- Click on your Customer’s name to open the Customer record
- Select the Progress Notes tab and click + Create
- When the New Progress Note template opens, complete the following fields:
  - **Name** (rename the note: Daily Note - service date)
  - **Start Date & Time** (Note: these must be on the same day, i.e. 12:00 midnight to 7:00 am)
  - **End Date & Time**
  - **Place of Service** (click on the and select the appropriate location then click Select)
  - **Units** (Daily Note Units = 1)
  - **Data** (state if youth was present – in their bed – at midnight)
  - **Date Completed**
  - Click Save & Continue
  - To submit the Progress Note, click Proceed To Submission
4.6 SUPERVISOR APPROVAL

*Note*: Only users with Provider Administrator and/or Rendering Provider Supervisor roles can approve MHTP and Progress Notes.

**MHTP**

- Navigate to the Provider Plans from the Customers tab in the green ribbob
- Click on Edit on the Provider Plans from the drop down green arrow
- Click on Proceed to Approval to submit the MHTP

![MHTP Image]

**Progress Notes**

- Once on the Submission Form, review the Progress Note and complete required fields in the Supervisor Signature section, then click Submit the Progress Note

![Progress Notes Image]

- If the submission is successfully processed and no errors are found, the Status Reason will update to Validated

*Note*: Once the Progress Note is validated, it will be Read Only, meaning you can no longer edit it.
• If there are any errors found during the validation process, the Status Reason will update to Rejected and a Rejected Reason will display.

• When a Progress Note is Rejected, you can edit and resubmit the Progress Note.

• A list view of Active and Rejected Progress Notes for the Customer is located on the Customer Progress Notes tab.
Barnes, Kelly

<table>
<thead>
<tr>
<th>General</th>
<th>Progress Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Web Portal - Active Progress Notes</td>
<td></td>
</tr>
<tr>
<td>Web Portal - Rejected Progress Notes</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service</th>
<th>Units</th>
<th>Provider Status</th>
<th>Status Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional Family Therapy (FFT)</td>
<td>2</td>
<td>Processed</td>
<td>Rejected</td>
</tr>
</tbody>
</table>

on 11/8/2018
5 Invoicing

5.1 Create Invoice

You must have a Provider Administrator role to access Invoicing.

- Invoices are accessed from the main navigation bar

- Create a new Invoice by selecting +Create
- Enter the following:
  - Invoice Number (unique 10 character max identifier)
  - Invoice date (defaults to current date)
  - Provider (defaults to your provider agency)
  - Provider Contract (Select this by LOC and geographic location)
  - Start and End Date of the Invoice

- Next, click Continue to Submit
• This will create the Invoice Record and you will have the ability to edit additional details

Note. There are two types of invoices that can be created in the Provider Portal: (a) unit cost/fee for service contracts, and (b) cost reimbursement contracts.

5.2 EDIT UNIT COST/FEES FOR SERVICE CONTRACT INVOICE

When Contract Type = Unit Cost, the Provider will submit only Progress Notes and Invoices.

- Leave Invoice Amount blank (this will be calculated by CAMHD HSMO)
- Associate Progress Notes to the Invoice
  - To associate more than one Progress Note, select Associate Multiple in the Progress Note Section. Note: The pick list shows only validated Progress Notes.
• This will open a list of Progress Notes that fall within the Invoice date range and have not been associated to another Invoice
• This dialog shows in the description the date range it used to find unassigned Progress Notes

You have the ability to deselect individual Progress Notes if necessary
• Once all Progress Notes are selected, click the Add Checked to Invoice button; this will close the form, refresh the page and update the Invoice with the selected Progress Notes

• Enter the required fields, save the form, then click Submit the Invoice
• You will receive a confirmation that the Invoice was sent for validation

Note. The submitted Invoice will become read-only. If the Invoice is rejected, it will become editable. It is possible to see submitted and rejected Invoices and view all associated Progress Notes.

CAMHD Fiscal Office will now review the Invoice and process payment if accepted, via the standard process for provider billing of unit-cost or fee-for-service contracts.

5.3 **EDIT COST REIMBURSEMENT CONTRACT INVOICE**

**Personnel Cost** and **Expenditure Details** will only be available on cost reimbursement invoices

• Leave Invoice Amount blank (this will be calculated by CAMHD HSMO)
• Associate Progress Notes to the Invoice
• To associate more than one Progress Note, select **Associate Multiple** in the Progress Note Section

![Progress Notes](image)

• This will open a list of **Progress Notes** that fall within the **Invoice date range** and have **not been** associated to another Invoice

• This dialog shows in the description the date range it used to find unassigned **Progress Notes**

![Progress Notes](image)

• You have the ability to deselect individual Progress Notes if necessary

• Once all Progress Notes are selected, click the **Add Checked to Invoice** button; this will close the form, refresh the page and update the Invoice with the selected Progress Notes
- Add/create **Expenditure details** and **Personnel Costs** by clicking **+Create** in the respective section.
• Create Expenditure Details

You will have the ability to edit these items after creation before submitting the Invoice
• To create a Personnel Cost, click +Create
- After **Personnel Cost Report** has been created, you Edit and/or add additional Personnel Expense Details

![Personnel Cost Report](image)

- Add new **Personnel Expense Details** by selecting **Create**

![Create Personnel Expense Details](image)
Enter the required fields, save the form, then click Submit the Invoice.
You will receive a confirmation that the Invoice was sent for validation.

Note. The submitted Invoice will become read-only. If the Invoice is rejected, it will become editable. It is possible to see submitted and rejected Invoices and view all associated Progress Notes.

CAMHD Fiscal Office will now review the Invoice and process payment if accepted, via the standard process for provider billing of unit-cost or fee-for-service contracts.

5.4 View Progress Note & Associated Invoice Status

To view a list of Invoices, go to Invoices -> Invoices for the main navigation bar.
To find a view of Progress Notes with associated Invoices, go to Invoices -> Progress Notes with Invoices from the main navigation bar.

From the Progress Notes with Invoices page, you can view all the Progress Notes in the system for your Provider Agency and view their Associated Invoice Status.

If the Status Reason listed has an exclamation point icon next to it, that means there is any information about Status Reason available. To access the additional detail, click the icon.

**Note:** You have the ability to download the full report in Excel format to work with it off-site.
6 Extras

6.1 Viewing Customers

- Navigate to Customers in the green navigation bar at the top of the page, then select Customers from the dropdown list.

- You can change the list view by clicking on a column heading to sort ascending / descending.
- To view the Customer record, click on the Customer name.

Note: By default, the Customers page only displays the Customers with an Approved MHTP (Billing MHTP).

- On the Customer record, you will find general Customer information (address, contacts) as well as links to Assessments and Service Authorizations.
• If you find Customer information that is incorrect or out-of-date, click [Create Change Request] and complete the form to notify the Care Coordinator
### Treatment Target Options

<table>
<thead>
<tr>
<th>Externalizing Behaviors</th>
<th>Internalizing Behaviors</th>
<th>Positive Behaviors</th>
<th>Other Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggression</td>
<td>Anxiety</td>
<td>Academic Achievement</td>
<td>Adjustment to Life Transition</td>
</tr>
<tr>
<td>Anger</td>
<td>Avoidance</td>
<td>Activity Involvement</td>
<td>Attending to Basic Needs</td>
</tr>
<tr>
<td>Attention Problems</td>
<td>Depressed Mood</td>
<td>Assertiveness</td>
<td>Cognitive Functioning</td>
</tr>
<tr>
<td>Fire-setting</td>
<td>Grief</td>
<td>Community Involvement</td>
<td>Eating / Feeding Problems</td>
</tr>
<tr>
<td>Hyperactivity</td>
<td>Phobia or Fears</td>
<td>Contentment / Happiness</td>
<td>Enuresis / Encopresis</td>
</tr>
<tr>
<td>Opposition / Non-Compliance</td>
<td>School Refusal / Truancy</td>
<td>Empathy</td>
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<td>Positive Peer Interaction</td>
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<td>Traumatic Stress</td>
<td>Positive Thinking / Attitude</td>
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<td>Treatment Engagement</td>
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### Practice Element Options

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<thead>
<tr>
<th>Behavior Management</th>
<th>Coping/Self-Control</th>
<th>Core Practices</th>
<th>Other Practices</th>
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<tbody>
<tr>
<td>Attending</td>
<td>Activity Scheduling</td>
<td>Accessibility Promotion</td>
<td>Anger Management</td>
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<td>Behavioral Contracting</td>
<td>Assertiveness Training</td>
<td>Cognitive Coping</td>
<td>Care Coordination</td>
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<td>Commands or Limit Setting</td>
<td>Biofeedback / Neurofeedback</td>
<td>Family Engagement</td>
<td>Catharsis</td>
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<td>Cultural Training</td>
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<td>Hypnosis</td>
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<td>Maintenance &amp; Relapse Prevention</td>
<td>Supportive Listening</td>
<td>Free Association</td>
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<td>Parent / Teacher Monitoring</td>
<td>Mindfulness</td>
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<td>Personal Safety Skills</td>
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<td>Physical Exercise</td>
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<td>Twelve Step Program</td>
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</tbody>
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### Progress Ratings

1. Deterioration <0%
2. No Significant Changes 0% - 10%
3. Minimal Improvement 11% - 30%
4. Some Improvement 31% - 50%
5. Moderate Improvement 51% - 70%
6. Significant Improvement 71% - 90%
7. Complete Improvement 91% - 100%