

# CPMS<sup>1</sup> Messenger

a timely newsletter for those completing the CPMS forms

Prepared by Ben Kahn & the CPMS Data Team, AMH

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# Questions? Give us a call

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# **CPMS Trainings!**

Good news! We have finalized our 2007 CPMS training calendar and will be traveling across this great state beginning in May. We look forward to meeting all of you. These



trainings give us an opportunity to not only provide instruction, but also to receive feedback and get ideas <u>from you</u>. We have scheduled **16** trainings (see attached flyer). Please note the **"Type"** of training, as some are just for alcohol and drug treatment providers, and others are for mental health providers.

The CPMS trainings will focus on the paper forms in the morning and then move to electronic forms (E-Form) in the afternoon. Attendance at the training is <u>free</u> and up to 8 hours of Continuing Education Units (CEU) are awarded to attendees. To attend the afternoon (E-Form) session, you must also attend the morning session.



It is imperative that each treatment provider send a representative, especially the addictions treatment providers. The Alcohol and Drug CPMS forms have changed. We will be distributing the new A&D CPMS forms and accompanying Manuals at the trainings. This is also an opportunity for all to learn the correct

way to send us information on the clients they serve.

We are fortunate to be able to use money from a Federal Data Infrastructure Grant to fund these trainings. And as much as we'd like to, we are unable to provide refreshments at the trainings. Please bring your own coffee, soda pop, cookies, etc. Questions? Please give Ben or Janelle a call.

<sup>&</sup>lt;sup>1</sup> Client Process Monitoring System (data system for mental health and chemical dependency treatment services).

# **☺ Janelle's Joy ☺**

"The CPMS data team would like to contact providers in the most efficient manner possible. Using email seems to work best. If you prefer this method, please email me your name and provider."

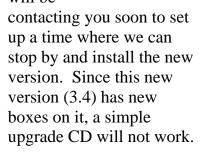
Janelle and her staff key lots of CPMS forms each month. Anything you can do to make their job easier is appreciated.

## Attention A&D Eform Users

THANK YOU for using the Eform. You save us, (and yourselves!) a lot of time.

The A&D CPMS forms are changing. We are adding a couple new boxes, and simplifying the codes. We will also begin collecting the client's full name.

The A&D Eform application will change, as well. We will be



We look forward to meeting you and helping you upgrade to the new version.

# **B-HIP Update**

The Behavioral Health Integration Project (B-HIP) continues to move forward at a fast pace. The funding for B-HIP is part of a Governor Recommend Policy Option Package (POP104) that sits before the Oregon Legislature. Once the legislature approves the funding package, we can then



release an RFP to purchase a commercial-off-the-shelf (COTS) software package. In the mean time we are documenting business processes and refining our requirements.

Last month we held a B-HIP Stakeholders' Meeting with close to 50 participants in attendance. The meeting was a big success. Thank you to all those who participated. In the meeting we discussed the progress on the project to date. We also reviewed the high-level functional requirements and asked if we were missing anything. We got a lot of good ideas and will be sure to incorporate those items in our requirements document. A complete summary of the B-HIP Stakeholder's Meeting will be available on our website.

We are also currently working on some Educational Awareness activities and coordinating Vendor Fair. At the vendor fair, participants can learn more about the various behavioral health software vendors and what their products have to offer. Information about the B-HIP project can be found at:

egov.Oregon.gov/DHS/addiction/resource\_center.shtml

# "When is the Next CPMS Training?"

May 8 in Klamath Falls!

See the enclosed CPMS Training Calendar for more information.

Remember to send in your CPMS forms <u>right away</u>. Send them to:

**CPMS OASIS** 

500 Summer Street NE E86 Salem, OR 97301-1118.

FAX 503.945.6199



## Don't forget me!

Box 47 - <u>Payor Code</u> is the box that is <u>most</u> <u>frequently</u> left blank.



Please review your termination form to make sure

that Payor Code is filled out *before* you send us the form. Also, be sure to only use valid codes in this box. A list of <u>valid</u> codes is found on the back of the Termination Form.

## **Mailing Labels**

We are always looking at ways to save money. One way is to streamline the mailings of Monthly Management Reports (MMR). If you are receiving reports from our office, and they are coming in two or more separate envelopes, please let us know.

We would like to send all your reports in the same large manila envelope. The best way to let us know would be to return the label to us with the corrections marked in red. You can also call or email Janelle.



Addictions and Mental Health Division

## **Mental Health Crisis Services**

How to report Crisis services

The Red Cornered Form is called the Mental Health Evaluation Services Enrollment and Termination Form (Form No: MHD-ADMS-0379) and is used for Preadmission Screening And Resident Review (PASRR) and crisis services. This article will focus on Crisis Services.

A person may be enrolled in CPMS for Crisis Services only if the person meets <u>all</u> of the following criteria:

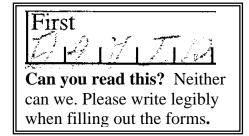
- 1. Has been screened and is believed to have a mental disorder as defined in the latest edition of the Diagnostic and Statistical Manual for Mental Disorders:
- 2. Is likely to experience a severe negative consequence if **immediate intervention** is not provided; and
- 3. Has been formally evaluated as specified in OAR 309-32-525 to 309-32-605<sup>2</sup> resulting in a written plan of action and case record.

Remember: <u>Immediate intervention</u> means that the person must be evaluated within a few hours and cannot wait until the next day for an appointment.

To fill out this form, please follow these instructions: At the beginning of the episode, complete the enrollment portion, and place the form in the client's file. When the client's episode has ended, complete the termination portion, and send the yellow copy to AMH within 7 days of the last face-to-face treatment contact.

This form is only used for Crisis and PASRR services





Thank you for taking the time to read through this newsletter. If you have ideas or questions you want addressed in future newsletters, please let me know. -- Ben Kahn, Research Facilitator, AMH, 503-945-6196 or <a href="mailto:ben.kahn@state.or.us">ben.kahn@state.or.us</a>

See http://arcweb.sos.state.or.us/rules/OARs 300/OAR 309/309 032.html

<sup>&</sup>lt;sup>2</sup> Oregon Administrative Rules: