

PROBLEM GAMBLING TREATMENT CONTRACT PROVIDER MANUAL

**NEBRASKA COMMISSION ON PROBLEM GAMBLING
GAMBLERS ASSISTANCE PROGRAM
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INTRODUCTION

This manual describes the requirements adopted by the Nebraska Commission on Problem Gambling that apply to the contracts entered by the Commission with counselors performing treatment services. The contents of this manual become part of those contracts by reference, and therefore are binding on the contractor.

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PART 1: PROVIDER QUALIFICATIONS

All problem gambling treatment services for which payment from the Nebraska Gamblers Assistance Program is sought by the contractor must be provided by individuals who:

- A. Hold a current active certificate as a Certified Disordered Gambling Counselor, issued by the Nebraska Commission on Problem Gambling; or
- B. Have completed the minimum CDGC course work prescribed by the Nebraska Commission on Problem Gambling and hold a Provisional Certificate issued by the Nebraska Commission on Problem Gambling.

All providers shall provide treatment services following generally accepted standards of care applicable to them as they perform disordered or problem gambling counseling therapy and conforming to the standards of ethical practice adopted by the Nebraska Commission on Problem Gambling.

The terms of this manual are deemed a part of the contract with the counselor.

PART 2: THERAPY SERVICE DEFINITIONS & UTILIZATION GUIDELINES

The Gamblers Assistance Program pays Commission-certified counselors to provide services for eligible consumers. To be eligible, a consumer must be a United States citizen or a qualified alien as described in Nebraska law, and be a resident of Nebraska. A consumer admitted to long-term outpatient counseling must have a current diagnosis of gambling disorder based on a clinical assessment including a positive result using the diagnostic criteria in the current Diagnostic and Statistical Manual of the American Psychiatric Association or be a member of the family of a gambler experiencing problems shown by answers to the GAM-ANON 20 questions instrument. Guidelines for short-term urgent care services are specified below.

All services shall be strengths-based, culturally sensitive, trauma informed, recovery oriented, and consumer driven. The counselor shall screen for co-occurring mental or behavioral health issues and comorbidities and make referral to appropriate local services whenever indicated for management.

The following service definitions and utilization guidelines apply to the treatment activities for which a contracted counselor may receive payment from the Nebraska Gamblers Assistance Program. These definitions and guidelines correspond to the categories of rates specified in the current contract document.

Service Definition: Urgent Care This is a professional response to a consumer, either the gambler or member of the gambler's family, who is seeking immediate counseling about problems caused by gambling behavior. This will involve interaction between the certified counselor and one or more persons not yet admitted to long-term outpatient therapy.

Utilization Guideline

This is a brief service intended to respond promptly to a consumer's concerns about gambling. Whenever possible, this service shall be provided in a face-to-face encounter. Telehealth is also an acceptable method of service delivery. The counselor providing this service shall take appropriate steps to minimize risk if there is imminent danger. The counselor shall encourage the consumer to engage in appropriate therapy or take advantage of other community-based support. Screening for suicide should be conducted if applicable, using a valid suicide screening instrument. Severe threats or indications of imminent danger must be reported immediately to appropriate local resources.

Appropriate documentation in clinic records is required. Documentation shall include proof of eligibility; positive result of Brief Biosocial Gambling Screen for a gambler; or

positive response to six GAM-ANON 20 Questions for a family member. A complete assessment, evaluation and treatment plan is not performed as part of this service. This time-limited service shall not be a substitute for appropriate long-term outpatient therapy. The program rate schedule specifies the urgent care hours paid by the Gamblers Assistance Program for a consumer who is not admitted to outpatient therapy.

Service Definition: Assessment/Evaluation This is a professional process resulting in a comprehensive written summary of the consumer's pre-treatment assessment, evaluation and treatment plan recommendations. The assessment process is conducted in person in a face-to-face session with the provider and the consumer. In exceptional circumstances as documented in the record, telehealth may be the means to conduct the assessment. The evaluation must include collection of collateral information and documentation of consumer scores on the diagnostic instruments used to justify the diagnosis.

Utilization Guideline

The assessment, evaluation and development of a treatment plan is performed for each client admitted to outpatient therapy. This process is conducted by a Nebraska-certified disordered gambling counselor. The scoring on DSM-5 or GAM-ANON 20 Questions instruments must be documented in the clinic record at the time of the assessment and evaluation. This is a single episode procedure which is performed at the beginning of the outpatient therapy. The procedure includes preparation of the treatment plan required in Part 3.2.E. of this manual and completion of the intake data form. A provider may develop their own format for clinic records. The final result of this process must be documented in the clinic record, signed and dated by the counselor.

Service Definition: Assessment/Evaluation Addendum This is a professionally directed process to supplement diagnostic impressions, modify a treatment plan, or document other changes to the clinic record of a consumer admitted to outpatient therapy, or to add information following a period of time intervening since prior treatment services. The addendum is a written clinic record that includes an explanation of the circumstances leading to the decision that the addendum process is indicated. The counselor may develop their own format for this record.

Utilization Guideline

This supplemental document is prepared when needed to update an earlier assessment and evaluation, either because of an alteration in the consumer's status or diagnosis, or because of the passage of an interval of six months or more since the last contact. A change of diagnosis must be documented by the score from a Gamblers Assistance

Program approved instrument. The final result of this process must be documented in the clinic record, signed and dated by the provider.

Service Definition: Outpatient Treatment This is professionally performed and directed outpatient problem gambling treatment services for persons admitted to treatment who are experiencing the consequences of the diagnosed gambling disorder, or the gambling behavior of a family member. The admitted consumer may be the gambler or member of a gambler's family. The services shall be provided according to generally accepted standards of care for professional therapy given to persons in these circumstances. Treatments may include individual, family, or group counseling sessions, and may in appropriate circumstances be provided by distance treatment methods that include video and audio communication between the therapist and the admitted client. Treatment is provided based upon the assessment, evaluation and treatment plan that is documented in the clinic record. Consumers admitted to outpatient treatment must have been given a score on the applicable instrument that indicates the need for the treatment.

Utilization Guideline

To be admitted, the consumer must present symptoms of Gambling Disorder based on the diagnostic criteria in DSM-5, or present symptoms of significant life disruption due to a family member's gambling. A gambler's score of 4 or higher on DSM-5 criteria is the usual basis for admitting the gambler client. A DSM-5 score of 3 or lower requires narrative justification for admission to outpatient care. A family member's score of 6 or higher on GAM-ANON 20 Questions is justification for admission of the family member to this service.

The consumer must not present other symptoms that interfere with psychiatric stability and safety. Individuals presenting actual or potential danger to self or others, or requiring a more intensive level of care, structure or supervision, are not admitted. Outpatient treatment is not intended to treat mental, behavioral, or physical health disorders, or financial distress, without a primary diagnosis based on the Gamblers Assistance Program standards applicable to the gambler or family member.

Continued care is provided within the utilization limits specified in the counselor contract rate schedule as long as (A) the presenting disorder exists, (B) the consumer is making progress in therapy or has demonstrated the capacity to progress, and (C) the consumer does not require a level of care that is either more or less intensive. The clinic record must show progress toward meeting treatment goals, and reasonable likelihood of benefit from continued care. Therapeutic progress is demonstrated by objective measures of behavior. The consumer must be making progress and be actively participating in the treatment. Treatment is individualized and evolves as the consumer's presentation evolves during the course of therapy. The clinic record must show active and continuously updated discharge planning, including relapse and crisis prevention plans.

The consumer is discharged from therapy:

1. When no treatment services are provided during a continuous period of ninety days; or
2. When the clinic record shows that the consumer has been unable to achieve the goals of treatment despite amendments to the treatment plan; or
3. When the clinic record shows that the consumer has achieved the maximum possible benefit from the treatment services; or
4. When in the opinion of the counselor the goals and objectives of the treatment plan have been substantially met.

When appropriate upon discharge, there is a documented aftercare plan with identified informal supports and appropriate referrals recommended. If at any time during outpatient therapy the consumer presents symptoms of a mental health or substance abuse disorder for which a more intensive level of care is indicated, or that interferes with problem gambling therapy, the consumer is discharged with a referral to the appropriate service.

Within thirty days after discharge, the database worksheets for the Program discharge report must be completed.

PART 3: CLINIC RECORDS

Clinicians shall create and maintain permanent records that document the clinic services for which payment is requested. The records may be typewritten, legibly hand-written, or in an electronic form. All records shall be dated and signed by the clinician, either in writing on hard copy or electronically. Records shall be as follows:

1. For urgent care consumers, the record must show that the individual meets the eligibility standards of the Gamblers Assistance Program, results of the screening instrument, and include a brief summary of the consumer's need for the service.

2. For each consumer admitted to therapy services, at a minimum, each consumer's record must contain:

A. Documentation showing that the consumer meets the eligibility standards of the Program.

B. Documentation showing that the consumer received a formal orientation to the Program including information concerning consumer rights, confidentiality and privacy.

C. Documentation of the assessment including the elements required by the service definition and utilization guideline.

D. Copy of the completed Gamblers Assistance Program "data at intake" form.

E. A treatment plan based on the assessment and evaluation, completed at the start of services. The treatment plan is a consumer oriented document developed by the clinician in partnership with the consumer and includes at a minimum:

(i) An assessment of the consumer's strengths.

(ii) Goals of the treatment with corresponding measurable objectives.

(iii) Documentation that the consumer participated in the development of the treatment goals and objectives.

(iv) Type and frequency of services to be received and identity of the clinician primarily responsible.

(v) Anticipated criteria for discharge readiness and projected time to discharge.

(vi) Documentation of treatment plan review with the consumer at least every sixty days. The treatment plan review shall include an assessment of the consumer's progress in therapy and revisions of the plan agreed to by the

counselor and consumer in order to maintain progress toward the goals of therapy.

F. Progress notes on the counselor's preferred format that describe the service provided, duration, and assess progress toward meeting the goals of the treatment plan. Progress notes must be dated and signed by the responsible clinician and should be written promptly after the therapy session. If the clinician is under supervision, the progress notes must reflect regular review by the Gamblers Assistance Program approved supervising clinician.

G. Documentation of efforts to involve the consumer's family in the treatment and recovery process, and reasons for lack of involvement if applicable.

H. Progress reports using the Program report form. A progress report shall be completed and sent to the Program office at the end of 90 days after starting counseling; during the month of July each year for all clients enrolled and receiving counseling during the previous June unless discharged; and during the month of January each year for all clients enrolled and receiving counseling during the previous December unless discharged.

I. A discharge summary completed within thirty days of discharge that includes:

(i) Intake and discharge dates.

(ii) Initial diagnosis, and any changes in the diagnosis during therapy.

(iii) A narrative summary of services provided and the consumer's progress toward achieving the goals of the treatment plan.

(iv) Recommendations and referrals given upon discharge that support recovery and the continued after-care plan.

(v) Copy of the completed data at discharge form.

3. For all consumers receiving services paid for by the Gamblers Assistance Program, the Citizenship attestation required by Nebraska Revised Statutes Sections 4-106 to 4-114. The hard-copy original of the attestation form, signed and dated by the consumer, shall be kept in the clinic record.

4. For all consumers receiving services paid for by the Gamblers Assistance Program, evidence that the consumer has been advised of the opportunity to register to vote, and supplied with a voter registration application or informed of the means to obtain one through the Nebraska Secretary of State.

PART 4: AUDIT

General Information

The Nebraska Commission on Problem Gambling has adopted audit procedures to assure that services paid for by the Program were delivered as required by the contracts, Commission policies, and Nebraska state law.

Audits cover two general subject areas: verification of services purchased, and verification of compliance with general standards adopted by the Commission. Each audit will include steps covering both subject areas.

An audit is a test of a selected number of records. Each contractor will be audited at a date and time selected by Gamblers Assistance Program staff. The date of the audit will usually be determined in advance, although audits may be conducted without advance notice.

It is a condition of the contract with each vendor that clinical records pertaining to the services and items for which payment has been made by the Gamblers Assistance Program must be available for examination by the auditor.

Basic Conditions of the Audit

All client information obtained by the auditor will be kept confidential and will not be revealed without prior written informed consent given by the therapy client.

The auditor will determine the sample size for selection of vendor records for examination. Compliance will be scored based on a simple Yes/No scoring method.

The auditor will exercise independent judgment about expansion of the audit sample based on the scoring of records in the initial sample, field interview with the vendor, and the other information that the auditor believes is applicable.

The audit of services purchased will include examination of the records of the vendor that support the monthly invoices submitted to the Gamblers Assistance Program. Records that will be examined will include clinical records, progress notes, financial records of the vendor's professional practice, invoices from suppliers for which reimbursement was requested, and other records of the vendor that the auditor requests that contain information about the items on the selected invoices. The purpose of this part of the audit is to determine whether there is

appropriate documentation to support the items for which payment was made by the Gamblers Assistance Program.

The audit of compliance with general standards adopted by the Commission will include examination of the vendor's records to verify that the vendor has complied with the requirements of this manual, the professional certification standards adopted by the Commission, the general terms of the vendor's contract, and applicable Nebraska laws.

The Conduct of the Audit

An audit will be conducted as follows:

1. The audit appointment is established, usually three days in advance.
2. Two days before the field visit, the auditor notifies the vendor of the records that will be examined.
3. The vendor provides the records on the date of the field visit.
4. The vendor is available to answer questions posed by the auditor at the time of the field visit, and at any time thereafter until the date of the final audit report.

An audit field visit will include the following:

1. Verification that the records selected for audit are available at the time of the appointment.
2. Examination of the requested records.
3. Interview with the vendor and vendor's staff on subjects determined by the auditor.
4. Comparison of vendor records with Gamblers Assistance Program records for the items selected for audit.
5. If the auditor concludes that the audit sample is to be expanded, the vendor provides the added records upon request.
6. The auditor and the vendor sign and date documents on forms issued by the auditor confirming the conduct of the audit and listing the records that were examined.

7. If, in the judgment of the auditor, a return field visit is necessary, the appointment will be established within a reasonable time at the request of the auditor.

The Results of the Audit

The auditor completes the examination and issues a report to the vendor promptly after the field visit. The vendor is allowed a reasonable time to respond to auditor comments and criticisms, and the response will be included in the final audit report.

If the audit reveals material discrepancies or violations of Gamblers Assistance Program standards or state law, the Gamblers Assistance Program may, in its discretion, require the vendor to submit a corrective action plan. Such a plan must include specific steps that the vendor will take to promptly correct the issues described by the auditor.

If the audit reveals evidence of a violation of a penal law applicable to contracts made with the State of Nebraska, the auditor shall forward the evidence to the appropriate authority.

If the audit reveals that documentation does not exist to support payment for items, the Nebraska Commission on Problem Gambling may, in its discretion, terminate the vendor's contract, and seek repayment of amounts paid, and take any other action that the Commission deems appropriate.

PART 5: BILLING AND REPORTING PROCEDURES

General Information

The counselor will assign a unique identification code to each client, beginning with the first record. The code will be used on all data reporting and billing forms. No client names, Social Security numbers, addresses, telephone numbers or other individual identifying information will be entered onto data and billing forms submitted to the Program office.

Monthly invoices are submitted using the Gamblers Assistance Program specified forms:

GAP-1 Claim Voucher summarizes the items claimed in the service categories.

GAP-3 provides detail of urgent care session claims.

GAP Data at Intake verifies an assessment for which payment is requested.

GAP-4 provides detail explaining the decision to draft an addendum to the assessment

TAD lists clients for whom services were provided.

Supporting documentation is supplied as required in the services contract.

By completing, signing and submitting the invoice, the provider certifies to the Gamblers Assistance Program and to the State of Nebraska that the services were provided as itemized on these forms.

Invoices will be processed for payment promptly upon receipt at the office of the Program.

Invoices and supporting forms shall be submitted electronically in a live digital format. All GAP data forms, including intake, progress and discharge, shall be legibly filled out, signed and dated by the counselor, in compliance with the requirements in the counselor contract.

GAP-1 Claim Voucher

The categories of service for which payment may be requested are specified on the current version of the GAP-1 claim voucher. The GAP-1 claim voucher is an Excel spreadsheet document that computes the sub-totals when the items are correctly entered into the form. Contractors should keep their own record of amounts submitted as claims to assure that the record agrees with the Gamblers Assistance Program office and the Nebraska Department of Administrative

Services accounting records. This assures budget control and monitoring the financial condition of the program and enables the contractor to manage their practice.

GAP-3 Urgent Care Session Detail

This form provides documentation to support a claim for urgent care session services provided to persons who are not at the time of the service admitted to outpatient therapy. A limited service may be provided by telephone or telehealth audio-visual communication, but this service is generally expected to be provided in a face-to-face, in person environment.

GAP-4 Addendum Detail

This form provides documentation to support a claim for drafting an addendum to the client's assessment, including a narrative justification for the claim.

Turn-Around-Document (TAD)

This is a master database document maintained by the contractor and the Program office. The counselor shall submit this form to the GAP program office in Excel digital format with all blanks completed for each client. This is a continuous listing of clients admitted to therapy services, and is to be maintained up-to-date by the contractor at all times. The columns for units of service must support the amounts claimed for the categories of outpatient therapy that are paid by hourly rates. A client is removed from this list upon discharge from therapy.

This manual was adopted by the Nebraska Commission on Problem Gambling at its meeting this 11 day of February 2022.

/s/ Susan Lutz

Susan Lutz, Chair of the Commission

/s/ Todd Zohner

Todd Zohner, Secretary