



# The Harris Center for Mental Health and Intellectual and Developmental Disabilities

## A Texas Medicaid and CHIP Provider

## Results in Brief

### Why OIG Conducted This Audit

The Texas Health and Human Services (HHS) Office of Inspector General (OIG) Audit and Inspections Division (OIG Audit) initiated this audit due to the increased risk associated with teleservices claims for behavioral health and occupational, physical, and speech therapies caused by the increase in teleservices provided during the COVID-19 public health emergency. Diagnoses among patients receiving teleservices include physical and speech disorders, early childhood developmental delays as well as mental, behavioral, and neurodevelopmental disorders.

Harris Center, a mental health and IDD facility, delivers behavioral health and therapy services through clinics in Harris County, Texas. During the audit scope, Harris Center provided services to patients enrolled with 11 managed care organizations.

### Summary of Review

The audit objective was to determine whether Harris Center (a) billed teleservices accurately and in accordance with applicable requirements and (b) designed and implemented related internal controls over teleservices.

The audit scope included Texas Medicaid and Children's Health Insurance Program (CHIP) teleservices claims paid to Harris Center for the period from September 1, 2020, through August 31, 2022.

### Conclusion

The Harris Center for Mental Health and Intellectual and Developmental Disabilities (IDD) (Harris Center) (a) incorrectly billed for services, (b) did not always maintain complete medical records, and (c) did not provide documentation that its employees were always supervised. As a result, Harris Center was overpaid. Harris Center should repay the state of Texas \$3,736.08.

### Key Results

Harris Center's health professionals provided therapeutic services, skills training, and case management services through a teleservices model. For most sample items tested, Harris Center retained medical records to support that it provided a behavioral health or therapy service to the patient. Additionally, Harris Center ensured providers conducting treatment sessions were licensed or credentialed as required.

However:

- Harris Center billed for (a) 8 (3 percent) services, totaling \$3,056.41, without meeting minimum time requirements, (b) 7 (3 percent) services, totaling \$679.59, using the incorrect procedure codes, and (c) 5 (2 percent) services, totaling \$490.14, without documentation to support whether the patient was seen.
- Harris Center did not provide evidence to support that it provided 137 video-based teleservices as billed. Specifically, of the 144 visits conducted as video teleservices, (a) 128 (89 percent), totaling \$13,892.60, had no teleservice log available to support time spent delivering services, and (b) 9 (6 percent), totaling \$1,121.17, had a teleservice log that recorded less time spent with the patient than the amount of time required for the units billed.

## Background

The COVID-19 public health emergency prompted an increased use of teleservices to connect providers with their patients. Between state fiscal years 2019 and 2021, the number of Texas Medicaid teleservices increased from 1.1 million in 2019 to 7.2 million in 2021. The state of Texas adopted waivers and changes to ease technology restrictions and expand the number of Medicaid services available through teleservices in response to the public health emergency.

Telehealth services are health care services that are (a) delivered by a health care professional certified, or otherwise eligible to practice in Texas, (b) provided to a patient at a different physical location than the health care professional, and (c) provided using telecommunications or information technology.

## Management Response

OIG Audit presented preliminary audit results, issues, and recommendations to Harris Center in a draft report dated August 15, 2024. Harris Center agreed with the audit recommendations and indicated corrective actions would be implemented by November 2024. Harris Center's management responses are included in the report following each recommendation.

- While 99 percent of the tested records had a service plan, for 3 of the 246 (1 percent) services tested, medical records did not include required individualized family service plans applicable to the dates of service.
- For 7 of 15 (46.7 percent) employees tested, Harris Center did not maintain documentation supporting that a designated medical professional supervised the employee when services were provided as required.

## Recommendations

Harris Center should:

- Return \$3,736.08 to the state of Texas.
- Implement processes to (a) bill using the appropriate procedure code, (b) use the actual length of services provided as the basis for claims for time-based procedure codes, and (c) align its billing processes with Texas Medicaid requirements.
- Utilize existing software capabilities to maintain records that support the duration of service provided.
- Maintain complete medical records that meet applicable Texas Medicaid Provider Procedure Manual requirements.
- Implement a process to have designated health care professionals conduct and document supervision of applicable staff.

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