

# Progress Notes

## September 26, 2007

### Volume 6, Number 17

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## Psychology Board Staff Scrambles To Process Applications

As a follow-up to the notice in the last issue about paperwork delays at the Board of Psychology, PROGRESS NOTES has followed up with the Board to provide readers with an update and more information.

As this issue of PROGRESS NOTES is completed, sources at the Board report it is still working as efficiently as possible to process licensing and registration applications and acknowledges delays are happening. State rules provide performance-time guidelines for this service. To fully process an application for licensure after the application is complete, the Board has 60 days to complete its work on the application.

The normal complement of Board staff in the licensing unit is 3.5 positions. This staff takes care of all licensure, registration and examination issues, including application processing and related phone calls and e-mails. The licensing unit has been hit hard with unforeseen circumstances. Board sources report that even a single absence over a period of time substantially affects the small staff's ability to carry the overload. Through an admittedly somewhat complex State HR process, the Board has nevertheless recently hired and is in the process of training two half-time employees in an attempt to attenuate the length of time currently being taken to process a fully completed application. The Board is unable to provide an estimate of when the delays will no longer be occurring. PROGRESS NOTES has been assured that dealing with the delays is one of the Board's highest priorities.

Recommendation: After reviewing the information made available to PROGRESS NOTES, we are recommending that the best way to cope with the problem is to use a preventive strategy. That is, whenever possible submit applications to the Board of Psychology very early or as early as possible so that the administrative delays are less likely to affect the applicant. For the time

being, contacting the Board in an attempt to speed the processing of an application will probably have the opposite effect. The same staff that is processing applications must respond to those communications and that subtracts time from the application processing. Reports to PROGRESS NOTES reveal that the current situation has been difficult for both applicants and the Board. As more information becomes available, we will keep PROGRESS NOTES' readers updated with any new information.

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## Licensed Psychologists Must Have Address of Record

Your editor has recently received expressions of concern about how to balance safety and privacy concerns with requirements to provide an address of record. Below is the information that the California Board of psychology provides which addresses that issue.

Question: Does the public have access to a licensed psychologist's personal information such as a home address?

Answer: The Board of Psychology is required to provide an address of record for all licensed psychologists. If the psychologist has chosen to use his or her home address as their their address of record, this is the address that will be given to anyone who calls to verify their license. Therefore, if you do not want your home address disclosed, you may obtain and use an alternate address such as a business address or a post office box as your address of record.

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## Child Custody Evaluators and Complaints To Licensing Board

*Below is an explanation from the Board of Psychology about its management of complaints that involve psychologists who are performing child custody evaluations.*

The Board of Psychology is required to review and to make a determination on every consumer complaint received regardless of the subject matter of the complaint. Child custody cases in the Family Court can be very contentious and volatile. Frequently, at least one of the parties involved in such cases is displeased about the outcome of the court's decision regarding custody of children.

Rule of Court 1257 requires each county in California to establish a grievance process to resolve complaints from involved parties in Family Court cases. Compliance with this rule is not uniform among the courts. This being the case, the dissatisfied parent in a Family Court case often resorts to filing a complaint with the Board of Psychology against the evaluating psychologist. The board has each such complaint reviewed by at least one licensed psychologist who has expertise in Family Court issues.

Keep in mind that the Board of Psychology has no authority to change the findings and decision of a Family Court judge regarding custody of children. What the board can do is to have each complaint against a psychologist who has provided an evaluation in a child custody case reviewed by an expert to determine whether the evaluation was conducted pursuant to the Code of Conduct and Ethical Principles and to the Guidelines for Child Custody Evaluations in Divorce Proceedings established by the American Psychological Association (APA). These guidelines

establish the standard of care for the practice of psychology. Pursuant to section 2936 of the Business and Professions Code, the board must apply APA standards as the accepted standard of care in all enforcement policies and disciplinary case evaluations. Therefore, if a child custody evaluation is determined to have been conducted within this accepted standard of care, the Board of Psychology cannot take administrative action against the psychologist performing the evaluation. If it is determined that an evaluation was performed outside of this standard of care, then the board has the authority to continue with appropriate administrative action. Such action may include an intense educational review with the evaluating psychologist or formal administrative discipline against the psychologist's license depending on how extreme the departure from the standard of care was and on the amount of consumer harm that may have occurred as a result of the departure.

The board's action will have no effect on the findings and decision of the Family Court judge regarding the custody of the children involved in the case.

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The Centers for Medicare & Medicaid Services (CMS) has made a decision to delay the use of the new Coordination of Benefits Agreement (COBA) Medigap claim-based identifiers on incoming Part B claims or claims for durable medical equipment, prosthetics, orthotics, and medical supplies (DMEPOS) until October 1, 2007. This represents a change from previous CMS direction issued in accordance with Transmittal 283, Change Request (CR) 5662, and the accompanying MLN Matters Article.

Because of the CMS delay, physicians and other suppliers shall inform their billing vendors not to include any newly assigned 5-byte COBA Medigap claim-based identifiers, on incoming Medicare claims before October 1, 2007, as referenced at:

<http://www.cms.hhs.gov/COBAgreement/Downloads/Medigap%20Claim-based%20COBA%20IDs%20for%20Billing%20Purpose.pdf>

If participating providers or suppliers include the newly assigned COBA Medigap claim-based ID on incoming claims before October 1, 2007, Medicare will not cross the claims over to the Medigap insurer.

Providers that use PC-Ace or other free billing Medicare software need to ensure this product is updated to reflect the newly assigned 5-byte COBA Medigap claim-based IDs but must ensure that the new identifiers will not be applied on incoming Medicare claims before October 1, 2007.

Effective with October 1, 2007, and as specified in Transmittal 283, CR 5662, physicians and other suppliers that bill using paper forms, i.e., those granted an exception for billing electronically under the Administrative Simplification Compliance Act (ASCA), shall include the newly assigned 5-byte identifier (number will fall in the range 55000 through 59999) within item 9-D of incoming paper CMS-1500 claim forms. These providers should complete items 9A through 9D, in accordance with previous procedures, to ensure they will successfully trigger a Medigap claim-based crossover. Providers that are required to bill Medicare electronically using the Health Insurance Portability and Accountability Act (HIPAA) American National Standards Institute (ANSI) X12-N 837 professional claim shall include the newly assigned 5-byte only COBA Medigap claim-based ID (range=55000 to 59999) in field NM109 of the NM1 segment within the 2330B loop. Retail pharmacies that bill National Council for Prescription Drug Programs (NCPDP) batch claims to Medicare shall include the newly assigned Medigap identifier within field 301-C1 of the T04 segment of their incoming NCPDP claims.

JSM/TDL-07535

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