

VCR, PLLC Transition & Matrix Health Systems Exit FAQs

Due date for charts to be completed/ready to archive with Matrix is currently ~ September 30th, 2025 .

- If you know that you will need an extension on this timeline, please reach out to Kris to let her know.

When we exit Matrix, we will need to leave FULL original charts for each of our clients.

See the attached Exit form to know what to expect in this process.

You will alphabetize your records into filing boxes

- Charts will be labeled “Last name, first name” on the outside tab
 - The name needs to match the insurance billed/legal name of the client during the service.
 - For exit purposes, Blueprint and VCR private practice charts are all considered the same and get alphabetized all together per each clinician.
 - The file boxes will get labeled 1 of 4, 2 of 4 etc per clinician
 - The shred/destroy date will be 10 years after your last date of service billing under Matrix
 - OR 10 years after your youngest minor client turns 18 years old
 - If you see minors, you can prep by finding your youngest client’s DOB and seeing what 10 years after their 18th birthday would be.

When we start billing under VCR, PLLC’s NPI 2 number (we will be very clear with folx on what that date is!) we will:

- Be starting NEW VCR, PLLC charts for all clients
- With your clients permission, you can make COPIES of relevant clinical documentation for continuity of care
 - being sure to leave the originals in your Matrix charts
- Relevant documents to copy likely include: the initial assessment and most recent treatment plan
 - It is not necessary to bring copies of progress notes!
 - Making a copy of the discharge summary may be resourceful to have the total # of session you had previously completed with the client during your time at Matrix Health Systems
 - Since your new VCR, PLLC charts will start over at session 1.
 - Alternatively, you could make a note for yourself on the first DOS, last DOS, total # of sessions at Matrix to have for your reference.

FAQs:

Do I bill a 90791 (INTAKE/initial assessment appointment) for all my clients once we are new VCR?

- If you have onboarded/started working with a client within the last year:
 - No.

- We can do an initial assessment annually (1x/year)
 - The initial assessment from matrix should be copied over.
 - “The Golden Thread” should be clear (meaning we need to show how the initial assessment from Matrix Health System now connects to your VCR, PLLC chart)
 - You could do this in the first progress note with a statement like:
“clinician started working with this client for psychotherapy on xx date under Matrix Health Systems (see initial assessment in chart). Clinician has now moved to new practice VCR, PLLC and client is continuing with this written for continuity of care”.
 - You can make/bring a copy of the Treatment Plan for reference, but will create a new plan for your VCR, PLLC work to have the effective date be current/match the new practice
 - It can be the same goals/plan if they are still relevant.
 - You have the client complete updated informed consents for VCR, PLLC.
- **If you have worked with the client for 1 year +**
 - Yes!
 - You could/would bill a 90791 initial assessment/intake appointment.
 - We are eligible to bill a 90791 annually, even for existing clients, to get updated biopsychosocial assessments
 - and it is best practice to get an updated assessment at this time.
 - You can still make a copy of the initial assessment from your time at Matrix and for sections that are the same you could say “see original initial assessment dated XX with this writer/Matrix health systems in the chart” and would make sure to fill out updated information and current symptoms etc in the assessment.
 - You can make/bring a copy of the Treatment Plan for reference, but will create a new plan for your VCR, PLLC work to have the effective date be current/match the new practice.
 - It can be the same goals/plan if they are still relevant.
 - You have the client complete updated informed consents for VCR, PLLC.

Note: please consult with your supervisor or leadership team member for individual cases and if you have any questions.