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DMC-ODS and MHP Contractor Meeting

November 8, 2023



Agenda

- Welcome and Introductions
- Presentation/Meet & Greet
 - Danielle Niemi, Marin HHS – Social Services
 - Peter Funk, Marin HHS – Social Services
- Provider Updates/Announcements
- County Updates/Announcements
 - DHCS BHINs
 - SmartCare Implementation
 - Other
- Feedback: Future Joint DMC-ODS/MHP Agenda Items



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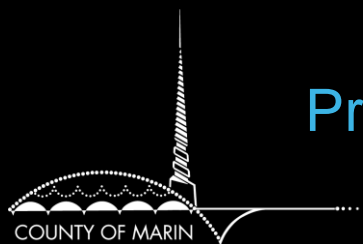
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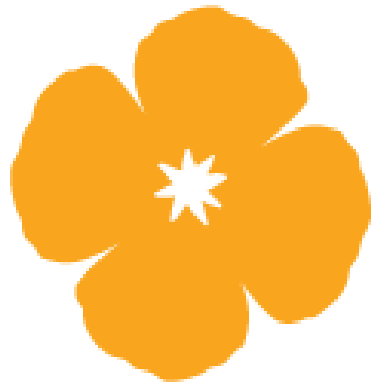
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Medi-Cal Changes and Policy Clarifications

BHRS Substance Use Provider Meeting



Presenters: Danielle Niemi and Peter Funk
November 8, 2023



Medi-Cal

Topics Discussed

- Introduction: Peter Funk – Public Assistance point of contact
- Scope of Coverage & Related-Policy Changes
- SSN requirements for Medi-Cal
- How to Apply for Medi-Cal

PETER FUNK

ELIGIBILITY WORKER II – MARIN COUNTY HEALTH AND HUMAN SERVICES –
PUBLIC ASSISTANCE

PA LIAISON TO SUBSTANCE USE AND WHOLE PERSON CARE



Requests for disability accommodations may be made by phoning **(415) 473-3730** (Voice), CA Relay 711 or by e-mail at dniemi@marincounty.org

MARIN COUNTY EXPERIENCE

Over the last 7 years I have worked in Health and Human services Social Services Public Assistance division:

- Worked in both intake and continuing divisions
- Worked in the West Marin out station
- Worked on the minor consent Medi-Cal community outreach team
- For the last year I have worked extensively with the Binford Rd RV encampment and the ongoing efforts to bring it to an equitable and fair conclusion, doing monthly outreach and supporting the newly funded case managers
- Created the Whole Person Care caseload position

HOW I CAN HELP

My goal is to be both a tool and a resource that aspires towards a seamless integration between public assistance programs and you and your clients.

1

Status of Medi-Cal. Active coverage?

2

Completing Medi-Cal redeterminations for your clients as necessary.

3

Advising on potential eligibility for all PA programs. Scheduling and possibly completing intakes for available programs.

HOW I CAN HELP

4

Initiating inter-county transfers and making the ICT process as transparent as possible for both you and your client

5

Finding crossover between substance use and Whole Person Care to leverage everyone working with a particular client.

6

Providing and advising you on authorized representative paperwork and setting up A/Rs as necessary to allow for ease of communication.

WINSTON WOLF



CONTACT

Generally, email is best but always feel free to text or call directly. I'm on the phone a lot so always leave me a voicemail. I'll get back to you ASAP.

PFUNK@MARINCOUNTY.ORG

(415) 302-3137 cell or (415) 473- 3574 office



Scope of Coverage



Understanding Medi-Cal Scope of Coverage

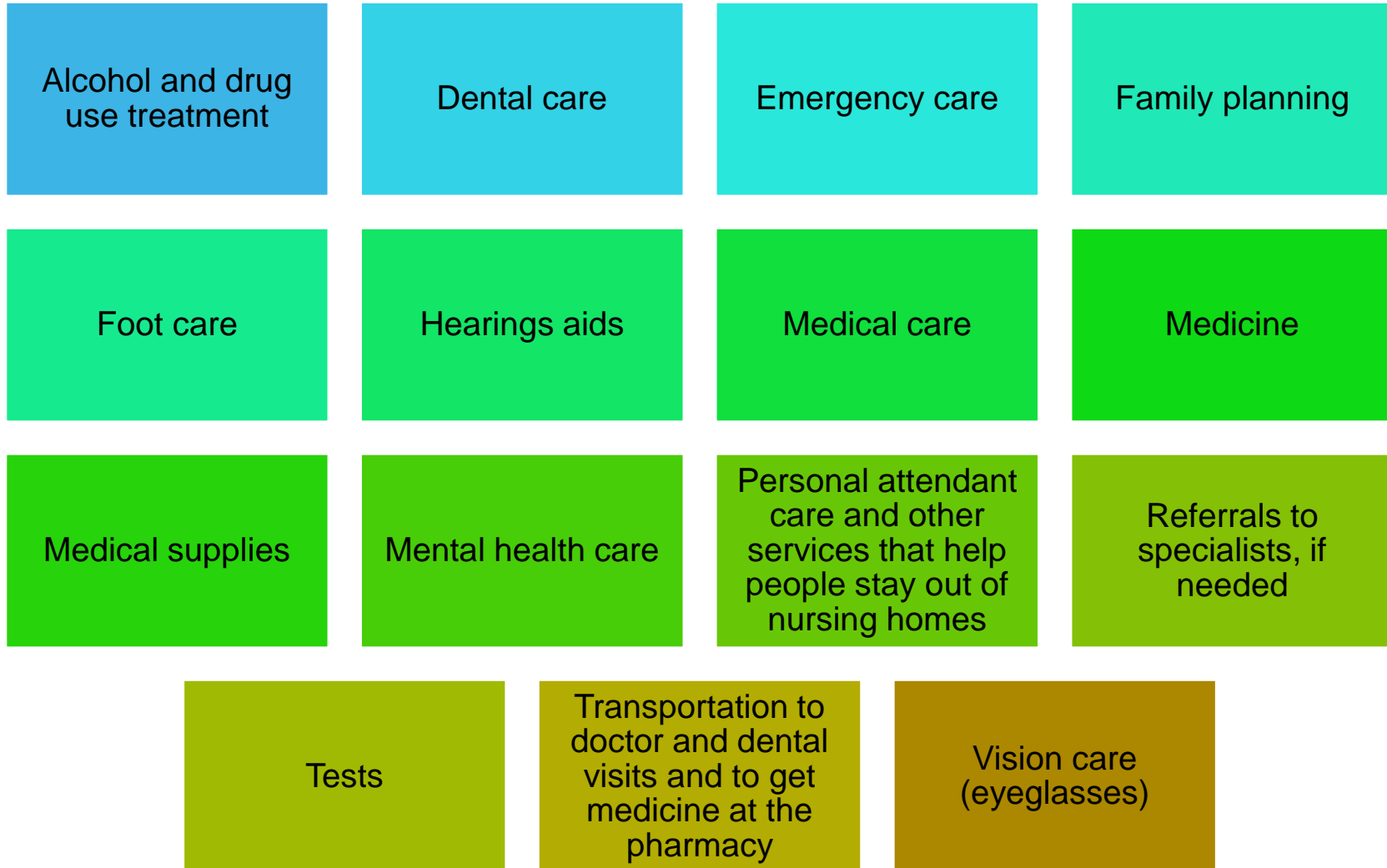
Restricted Scope Medi-Cal

- Often called emergency Medi-Cal
- Covers limited services: emergency, pregnancy related, and long term care

Full Scope Medi-Cal

- Provides the full range of benefits available to Medi-Cal beneficiaries (next slide)

Full Scope Benefits





History of Scope of Coverage for Medi-Cal

The following policies expanded full scope to certain age groups regardless of immigration status:

1. SB 75: Full Scope Medi-Cal for All Children – provided full scope for kids ages 0 – 18
2. SB 104: Young Adult Expansion – provided full scope for young adults ages 19 – 26
3. AB 133: Older Adult Expansion - provided full scope for adults ages 50 and over

History of Scope of Coverage Data

If you are a person with a disability and need this information in an accessible format (example: Braille, Large Print, Audiotope, C format by calling: (415) 473-4167 (Voice), Email: marincounty.org

Name	Effective Date	# of folks impacted as of Feb 2023
Full Scope Medi-Cal for All Children	May 1, 2016	1,926
Young Adult Expansion	January 1, 2020	1,746
Older Adult Expansion	May 1, 2022	1,551



Adult Expansion Policy Change

Effective no later than January 1, 2024, all Medi-Cal enrolled adults between the ages of 26 – 49 will be eligible for full scope Medi-Cal coverage based on the Adult Expansion (SB 184) policy change.

Preliminary estimates suggest 5,169 current beneficiaries will be impacted by this policy change.



How you can help:

- 1) Help folks apply for coverage who don't have Medi-Cal
- 2) If folks are worried about Public Charge, refer them to Canal Alliance Legal Support for guidance
 - <https://canalalliance.org/services/get-legal-support/>
 - Immigration@canalalliance.org
 - Call (415) 306-0437



SSN Requirements for Medi-Cal

Mythbusters – Medi-Cal Edition

Myth: People who don't have social security numbers (SSN) can't get Medi-Cal

Truth: People who do not qualify for a SSN can still get Medi-Cal.



SSN Rules for Medi-Cal

Who is required to provide a SSN:

- **Person is requesting or already has Medi-Cal benefits, and**
- **They declare they are a citizen or national of the United States, or that they have satisfactory immigration status**
- **Deemed infants after they turn 1 year of age**

SSN Rules for Medi-Cal

Who is not required to provide a SSN:

- Person has not declared that they are a citizen or national of the United States, or
 - They have not declared that they have satisfactory immigration status
- Person is claiming PRUCOL category 16 immigration status

How to Apply for Medi-Cal with the County

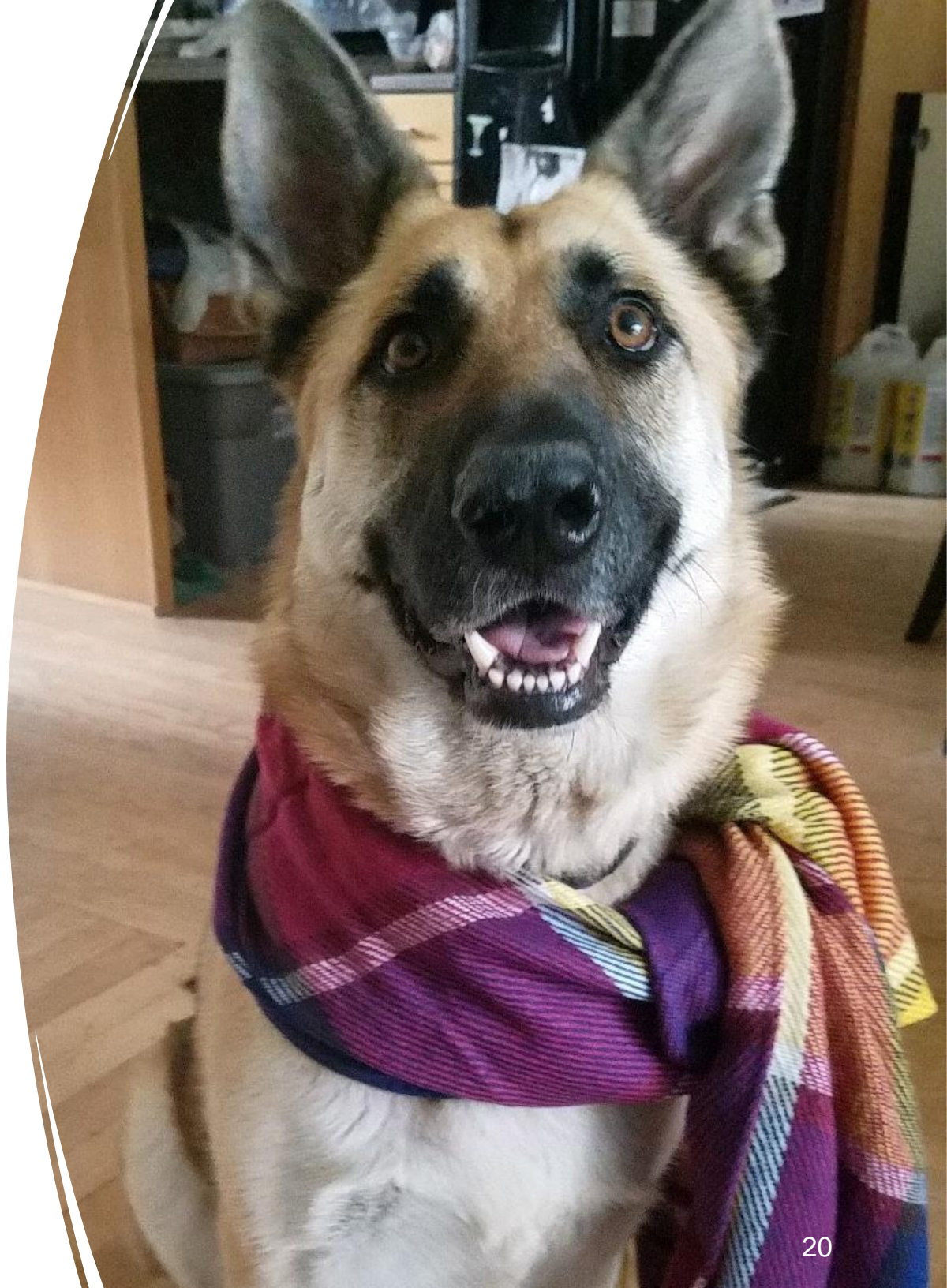


- **Online:**
 - www.benefitscal.com
 - www.coveredca.com
- **Phone:**
 - (877) 410-8817
- **In person:**
 - 120 N. Redwood Drive. San Rafael, CA
 - 3240 Kerner Blvd., San Rafael, CA
 - 1 – 6th St. Point Reyes Station, CA
- **By Fax:**
 - (415) 473-3554
- **By Mail:**
 - P.O. Box 4160, San Rafael, CA 94913

Questions?

Danielle Niemi
dniemi@marincounty.org
(415) 473-3730

Peter Funk
pfunk@marincounty.org
(415) 473-3574





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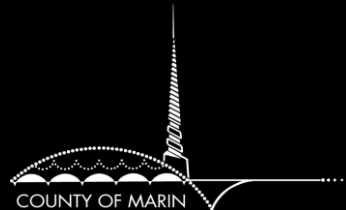
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DMC-ODS and MHP Contractor Meeting

November 8, 2023



Updates and Announcements

Provider Updates/Announcements

County Updates/Announcements

- Treatment Perceptions Survey – Thank You!
- EQRO Save the Date: November 29-30, 2023
- DHCS Information Notices
 - BHIN 23-048: MHP and DMC-ODS Beneficiary Handbook
 - BHIN 23-058: Certification of AOD Programs – Interim Standards
 - Draft BHIN 23-XXX: Mandatory Certification of AOD Programs
- *Reminder: Resource slides at the end of the slide deck. Please share with Staff. The slide deck will also be posted here: [BHRS SUD Contractor Meetings](#)*

SmartCare Electronic Health Record Updates and Tips

- How to Run Real Time Eligibility (270/271) Screen - 2023 CalMHSA

- Tip: If the client is not showing, you can either do an Inquiry or go back to the previous method used to check Medi-Cal eligibility.
- Reminder: Ensure you click “Update Coverage”
- Reminder: The End Date is the date of eligibility being searched for (e.g. first day of month)
- Reminder: Please verify that you are double checking the Plan Time Span start date. We are seeing more MCAL start dates of 2032 or 2024. Ideally, most clients should have their MCAL start date be 7/1/23.
 - If you notice an incorrect start date, changing the end date of eligibility to 7/1/23 will solve
- Reminder: If client’s insured ID is blank, use the SSN for that field to run eligibility

The screenshot displays the 'Coverage' section in SmartCare. It features two main panels: 'Client Plans' and 'Plan Time Spans'. The 'Client Plans' panel shows a table with columns for Plan Name, Insured Id, Co-Pay, Start Date, End Date, COB, and Service Area. Three plans are listed: Marin County, Medi-Cal DMC, and Medi-Cal MH. The 'Plan Time Spans' panel shows a table with columns for Plan Name, Start Date, End Date, and a 'Set End Date' button. Three plans are listed: Medi-Cal DMC, SABG, and Marin County. A blue arrow points from the text in the list to the 'Plan Time Spans' section.

Plan Name	Insured Id	Co-Pay	Start Date	End Date	COB	Service Area	
Marin County						DMC	Add
Medi-Cal DMC	[REDACTED]					DMC	Add
Medi-Cal MH	[REDACTED]					MH	Add
SABG						DMC	Add

Plan Name	Start Date	End Date	Set End Date
Medi-Cal DMC			Set End Date
SABG			Set End Date
Marin County			Set End Date

**The plan for SUD is Medi-Cal DMC. Please ensure that is at the bottom - the top will have both Medi-Cal DMC and Medi-Cal MH*

SmartCare Electronic Health Record Updates and Tips

- For Marin County Payor Plans (Non-Medi-Cal): Please make sure the Plan is at the top and bottom (this will happen automatically for Medi-Cal when clicking “Update Coverage”)
 - *Note: The “Marin County Plan” should only be added to the DMC service area.*
- Reminder: Coverage plans are not specific to the program – they are specific to the client. As such, if they are Medi-Cal eligible, DMC should be listed as a payor, even if the service is not Medi-Cal eligible, as the client may access DMC-eligible services elsewhere.
- Tip: If the County of Responsibility is not Marin, though the eligibility shows County of Residence is Marin, then the Medi-Cal Plan will need to be added every month. Note: You can use the 270/271 for this.

SmartCare Electronic Health Record Updates and Tips

- Reminder: **Timeliness Data (SUD Providers)** - Data is required for reporting to DHCS and important to evaluate timely access to services
 - Search for SUD Timeliness on the Search screen (magnifying glass)
- Reminder: **Interpreter Services (All Providers)**
 - If needed, click the box – AND – complete the Custom Fields
- **New:** The **CA ASAM** will now pull any responses from a CA ASAM completed for the same client in the last 180 days (EXCEPT for the LoC and Risk choices for each dimension)

The screenshot displays the SmartCare Electronic Health Record interface, divided into several sections:

- Service Detail:** Includes fields for Documentation Time (Days), Evidence Based Practices (dropdown), and Transportation Service (No/Yes dropdown).
- Authorization(s):** Contains checkboxes for Override Charge Amount, Override Errors, and Interpreter Services Needed, along with overridden by fields.
- Warnings / Errors:** A table with columns for Date, Error Type, Error Message, and Next Step. The table is currently empty, displaying "No data to display".
- Custom Fields:** A section for additional information, including Interpreter Service details.
- Interpreter Service:** Includes radio buttons for "Interpreter has been scheduled" (Yes/No) and a dropdown for "Language".
- Interpreter Agency Scheduled:** A text input field.

Joint DMC-ODS and MHP Meetings

- Feedback: Future Meetings



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RESOURCE SLIDES

Please share with applicable staff

SmartCare - Seeking Help

CalMHSA:

[Live Chat is available and preferred - 2023 CalMHSA Site](#)

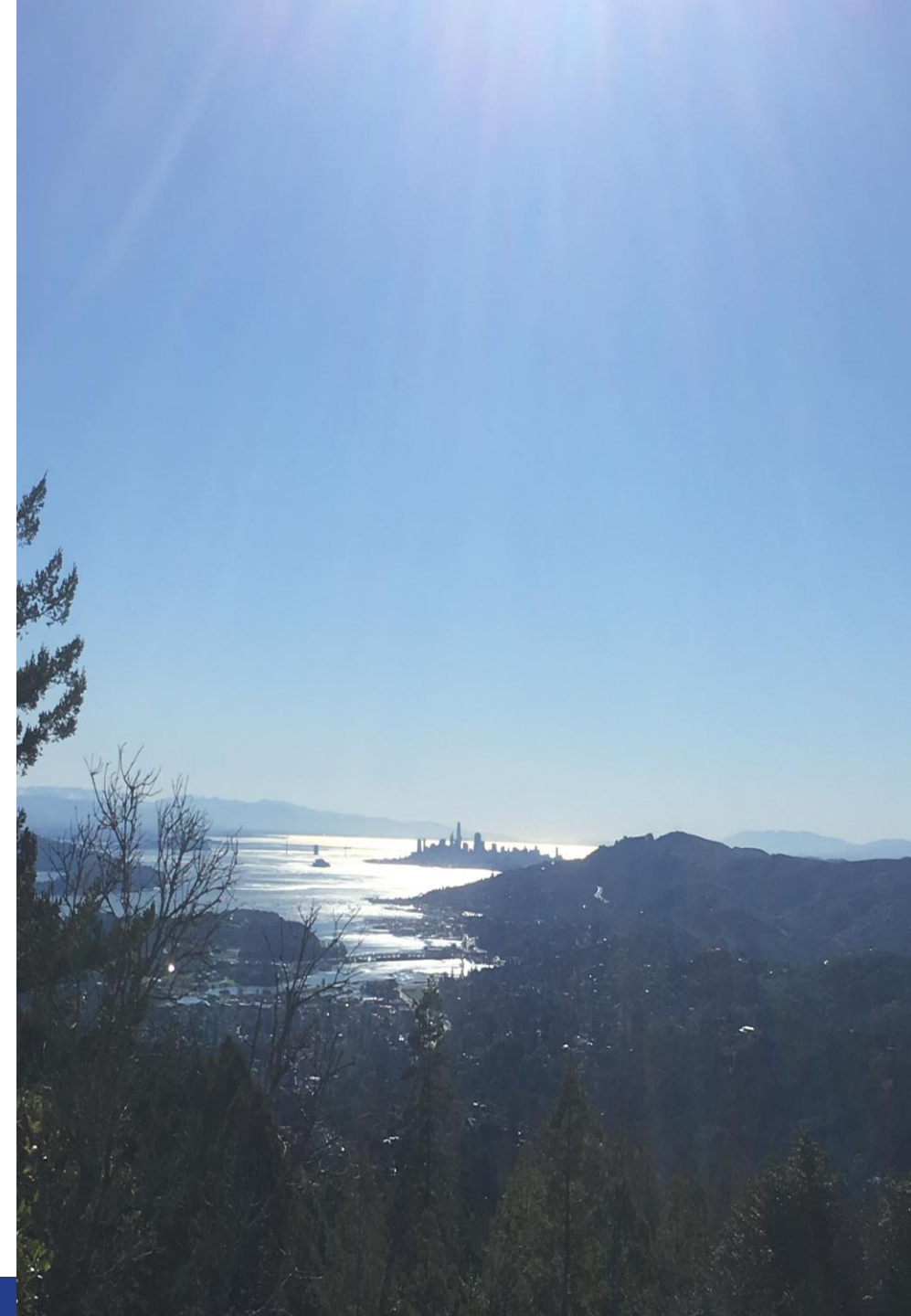
** This help is available from 7am – 7pm PST*

EHR@calmhsa.org

(833) 686-6801

Generally quick response time

- System issues
 - When you click on a button, and nothing happens, or it doesn't seem to be working the way it should.
 - Can't find groups that have already been created.
- Navigating the EHR
- Training Videos & Guides



SmartCare - Seeking Help

Marin County BHRS EHR Support Team:

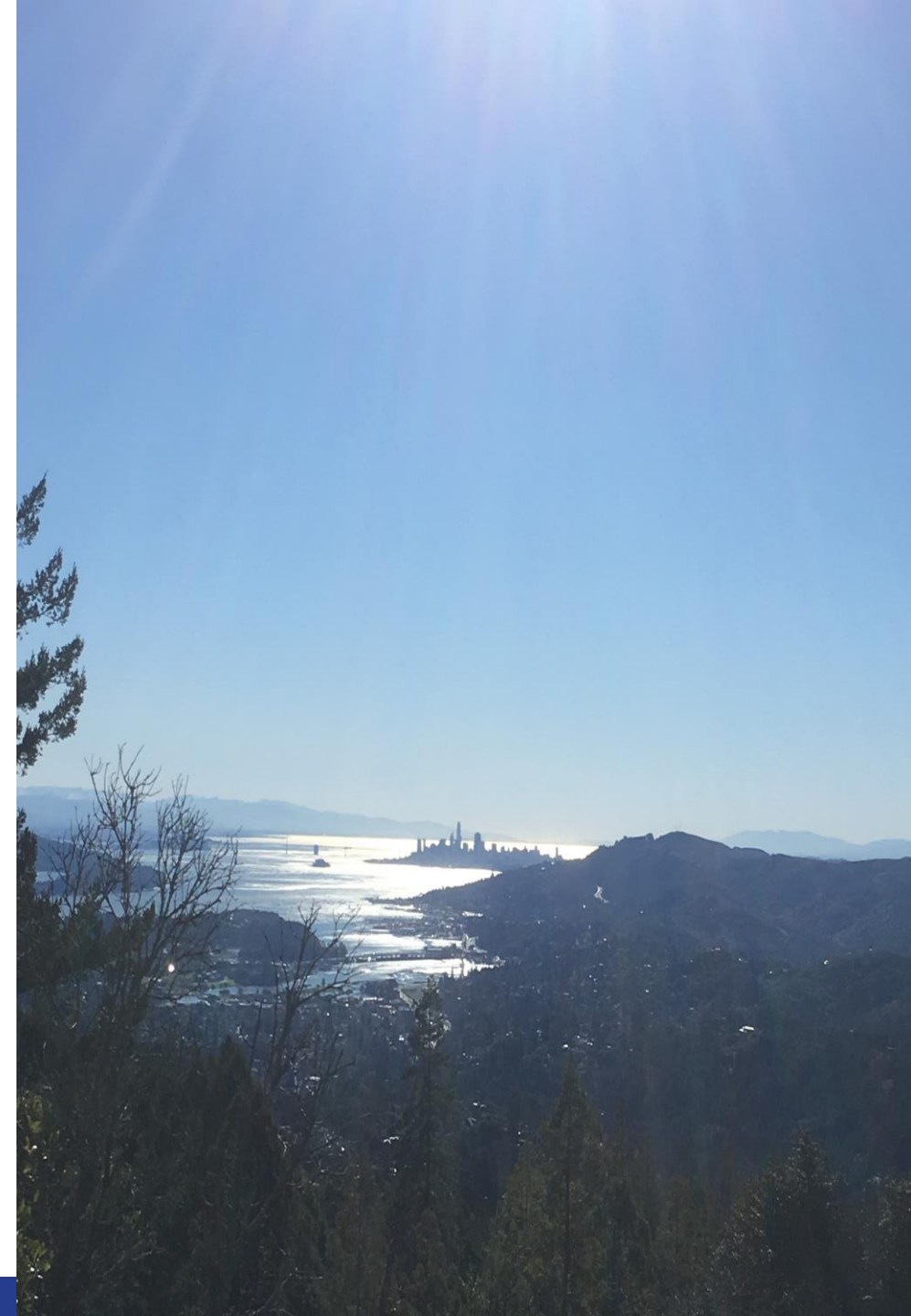
Use this form to put in a support request: [Marin BHRS EHR Support Request](#)

Response time in/up to 3 days

- Can't log in/locked out of account.
- There are no programs to select from the program drop down.
- There are no procedure codes to select from the procedure drop down.
- Codes are missing from the procedure drop down.
- Can't add a problem to the problem list.
- Error messages that have to do with permissions.
 - Include the exact wording of the error message.

Submitting a Support Request:

- Please provide the specific screens that you were on and the buttons that you clicked that led to the error and the exact error message so the EHR team can troubleshoot.
- Examples:
 - Please add the following services for the providers below: Provider First/Last: Comprehensive Community Support, etc.
 - Please add the following programs for the providers below: Provider First/Last: Name of missing programs she should have access to



SmartCare - Seeking Help

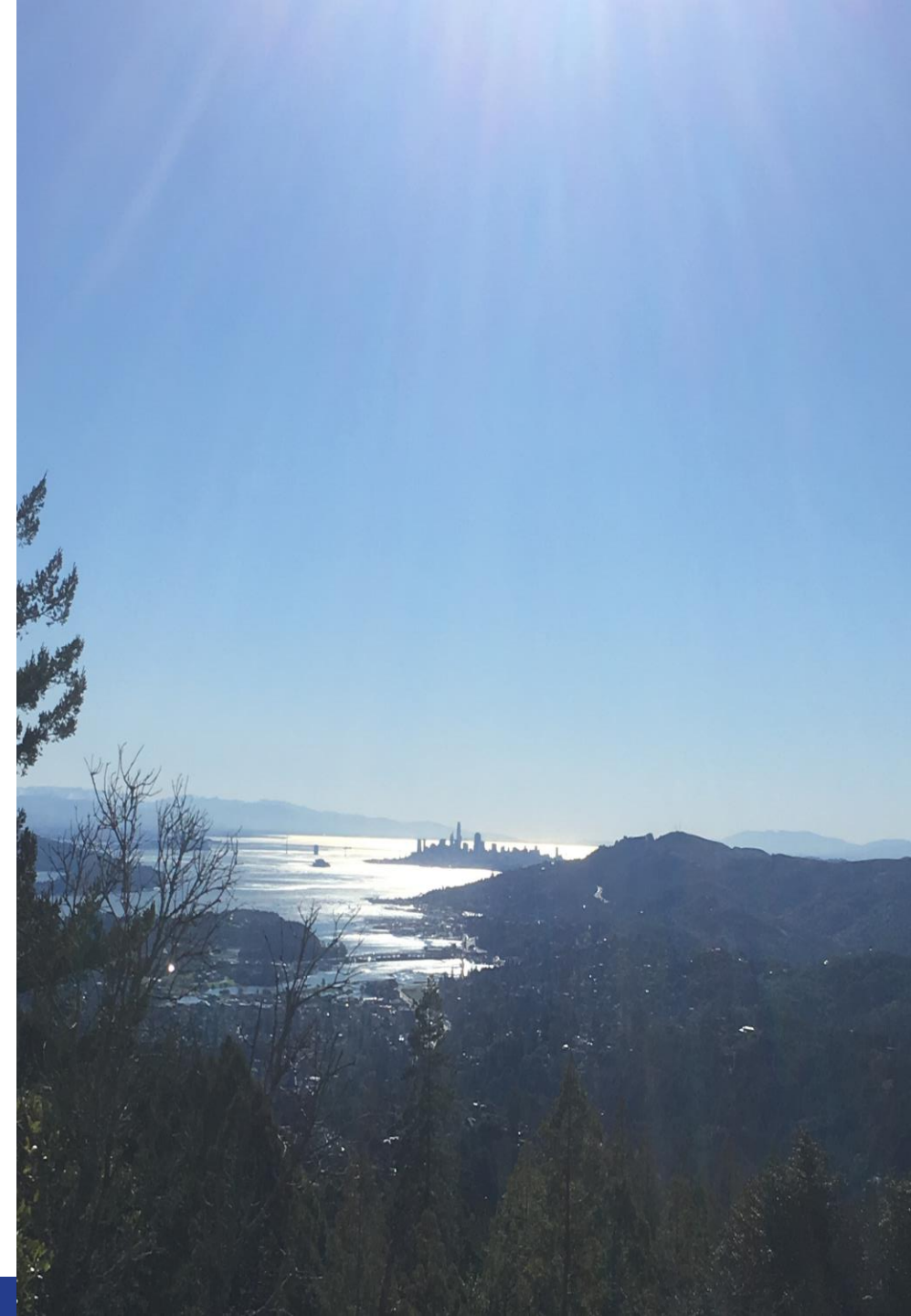
Ongoing Clinical Support:

BHRMQM@MarinCounty.org

- BHRM Quality Management provides clinical support for services and required documents, etc.

Contract Manager:

- Policy questions
 - CPT codes in contract
 - Which procedure codes to pick
- Billing questions
 - *Note: currently we do not have billing functionality and we anticipate possibly 3-6 months for submission. In the interim, we have plans for how to pay contractors and payment will not be delayed.*
- Barrier to time sensitive work (contact Contract Manager in addition to above resources)
- Notify them of reoccurring issues to keep them in the loop so they can provide support.



Resource Reminder: Medi-Cal Eligibility Re-determinations

Who:

- Public Assistance (PA) Contact for SUD Providers: **Peter Funk** (pfunk@marincounty.org)

What:

To assist with continuous Medi-Cal coverage given return to regular Medi-Cal rules, this pilot was developed to provide a direct point of contact in PA for SUD Providers to inquire about Medi-Cal, including:

- Ascertaining eligibility status (active, denied, discontinued, pending)
- Troubleshooting Intercounty Transfer issues
- Troubleshooting Managed Care and access to care issues
- Receiving change reports for Medi-Cal eligibility, including but not limited to redetermination paperwork
- Navigating and remedying discontinuances and Medi-Cal restorations

How:

- For PA and SUD to discuss, the client will need to **complete the *Authorization for Release of Protected Health Information to Third Parties (DHCS 6247)* and return it to the Peter.** It can be emailed, mailed, dropped off, faxed, or completed by phone by the client with Peter.
- *Note: Peter aims to respond within 48 hours and please encrypt emails.*

SmartCare - CalOMS

- Issue: The FSN number is required to ensure that the CalOMS Discharge information is accurately transcribed to State reporting. The FSN numbers did not get transferred during the initial client data conversions – and only started to populate in SmartCare around 8/10/23. This is a known issue with CalMHSA.
- Action: If an FSN number does NOT auto populate on the CalOMS Discharge Data:
 - Step #1: Complete the CalOMS Discharge Data as thoroughly as possible and save as draft.
 - Step #2: Submit a BHRS EHR Support Ticket with the name of the client, program and type of update (e.g. Discharge, Annual Update) and they will look up and enter it in SmartCare.

SmartCare – Timely Access Data

- Data is **required for reporting to DHCS** and important to evaluate timely access
- Search for SUD Timeliness on the Search screen (magnifying glass)

The screenshot shows a web application interface for 'SmartCare'. At the top, there is a navigation bar with a 'Medical' dropdown menu, a 'Status' dropdown set to 'New', and an 'Author' dropdown set to 'Steffy, Leigh'. Below this is an 'Instructions' box with the text: 'This data is used to capture the timeliness of service provision from time of request for service to assessment and subsequent receipt of services. Dates must correspond to the appropriate date of contact, offered appointment or provided service.'

The main form area contains a grid of input fields:

Request Date	<input type="text"/>	Referral Source	<input type="text"/>
First Offered Assessment Appointment Date	<input type="text"/>	Second Offered Assessment Appointment Date	<input type="text"/>
Third Offered Assessment Appointment Date	<input type="text"/>	Accepted Assessment Appointment Date	<input type="text"/>
Assessment Start Date	<input type="text"/>	Assessment End Date	<input type="text"/>
First Offered Treatment Appointment Date	<input type="text"/>	Second Offered Treatment Appointment Date	<input type="text"/>
Third Offered Treatment Appointment Date	<input type="text"/>	Accepted Treatment Appointment Date	<input type="text"/>
Treatment Start Date	<input type="text"/>	Closure Reason	<input type="text"/>
Closed Out Date	<input type="text"/>	Referred To	<input type="text"/>



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