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# DMC-ODS Contractor Meeting

## June 12, 2024

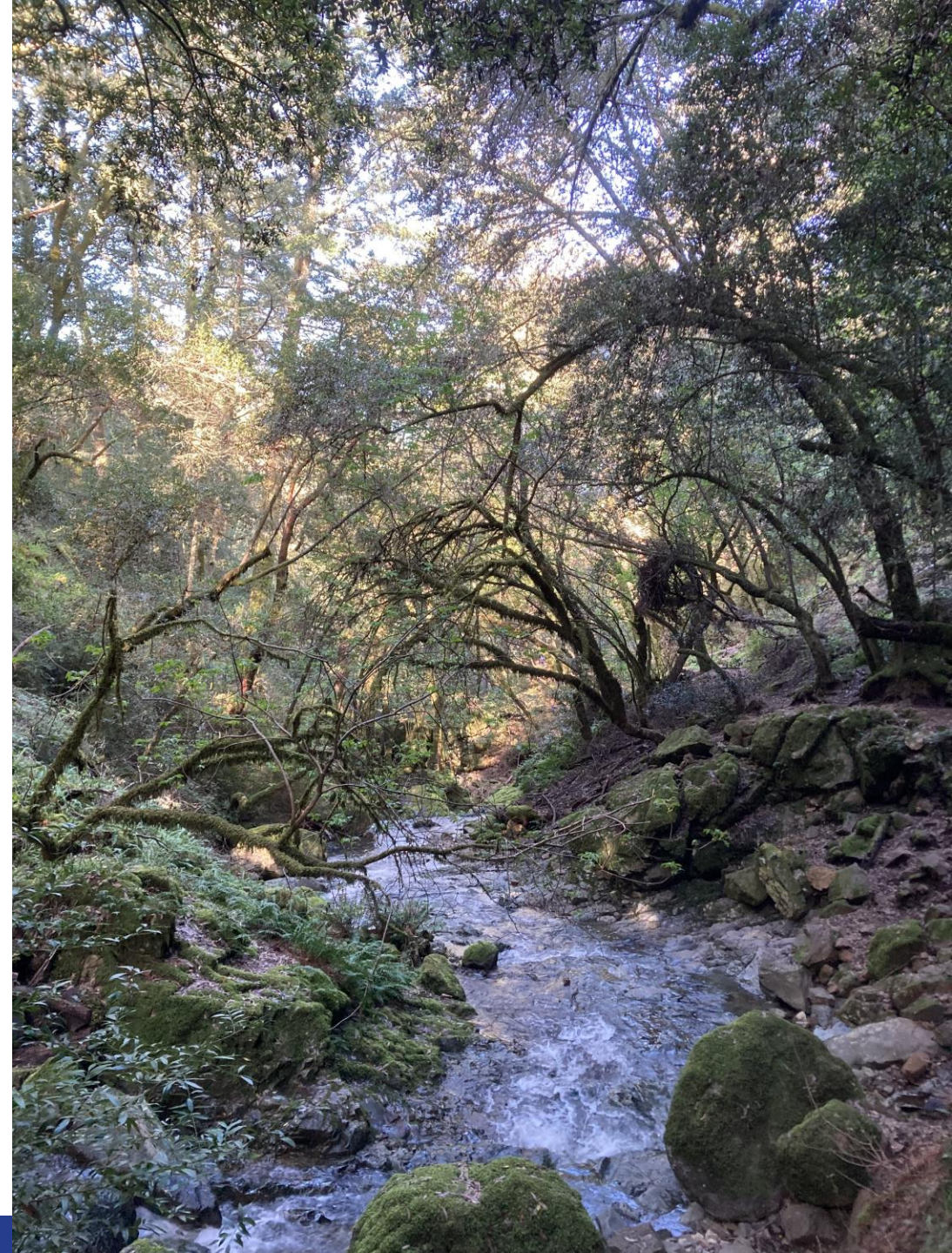


# Agenda

- Welcome and Introductions
- Provider Updates/Announcements
- County Updates/Announcements
  - DHCS, Federal and County Updates
- Discussion – Provider Feedback
  - ASAM – 4<sup>th</sup> Edition
  - Referral Processes - MOUs with Managed Care Plans (MCPs), CalAIM Justice Involved

# Provider Updates and Announcements

- Opioid Settlement Funding Projects



# County Updates and Announcements



**Celebrate  
LGBTQ+ PRIDE 2024**

**June 25, 2024 5:00 pm - 8:30 pm**

Join us for a special PRIDE event with a focused planning session on addressing the mental health & substance use service needs of the Marin LGBTQ+ community.

**Free Community Planning Event Featuring:**

- ♥ Community Planning Session
- ♥ Resources from Community Partners
- ♥ Live Entertainment
- ♥ Food and Raffle Prizes

All are welcome (including providers, community members, service recipients, LGBTQ+ people/families with lived experience, allies, etc.)

Performance Featuring: Margo!

Scan to Register\*

\* Registration Required

College of Marin Academic Center (AC 255) Kentfield Campus  
835 College Ave. Kentfield  
• Parking: Lots 1, 2, and 6

Event Sponsors: DEPARTMENT OF HEALTH AND HUMAN SERVICES, BEHAVIORAL HEALTH AND RECOVERY SERVICES, COLLEGE OF MARIN

For disability accommodations please e-mail BHRSMHSA@MarinCounty.gov at least five business days in advance of the event. The County will do its best to fulfill requests received with less than five business days' notice. Copies of documents are available in alternative formats, upon request.

Health, Well-being & Safety COUNTY OF MARIN

## • Upcoming Events

- June is PRIDE Month!
- SmartCare Office Hours: 6/12, 7/10, 8/14 @ 1pm ([Zoom](#))
- Save the Date: 42 CFR Part 2 Update Training: 9/26/24 @ 1:00pm – 4:45pm
- Save the Date: Seeds of Hope – 9/16 @ 11am – 2pm

# County Updates and Announcements



- **FY 2023-24 Close Out**
  - June Billing: Complete/error-free by 7/10
- **FY 2024-25 Contract Renewal**
- **WITS & SmartCare**
  - Update on Sunsetting WITS
  - Reminder: SmartCare Office Hours: 6/12, 7/10, 8/14 @ 1pm ([Zoom](#))
  - TADT (Timely Access) - **NOTE** system flag to remind you isn't working and was turned off.
    - Opioid Treatment (OTP): <https://2023.calmhsa.org/how-to-complete-the-dmc-opioid-timeliness-record/>
    - Everyone Else: <https://2023.calmhsa.org/how-to-complete-the-dmc-outpatient-timeliness-record/>

# County Updates and Announcements

- **Monthly Attestation – Now Via Jot Form**
  - Link to Jot Form:  
<https://marincounty.jotform.com/241126660437049>
- **274 Expansion – *Richard Dia, BHRS Department Analyst II***
  - What is the 274 Expansion
  - Frequency of the reporting vs prior DMC NACT reporting
  - Key elements tracked and required to update on monthly basis



# Code of Conduct Reminders

Code of Conduct: Provider's Code of Conduct and for registered, certified and licensed staff, a copy of the certifying/licensing body's code of conduct. The written provider code of conduct for employees and volunteers/interns shall be established which addresses at least the following:

- a. Use of drugs and/or alcohol;
- b. Prohibition of social/business relationship with beneficiary's or their family members for personal gain;
- c. Prohibition of sexual contact with beneficiary's;
- d. Conflict of interest;
- e. Providing services beyond scope;
- f. Discrimination against beneficiary's or staff;
- g. Verbally, physically, or sexually harassing, threatening, or abusing beneficiary's, family members or other staff;
- h. Protection of beneficiary confidentiality;
- i. The elements found in the code of conduct(s) for the certifying organization(s) the program's counselors are certified under; and
- j. Cooperate with complaint investigations.



# ASAM – 4<sup>th</sup> Edition

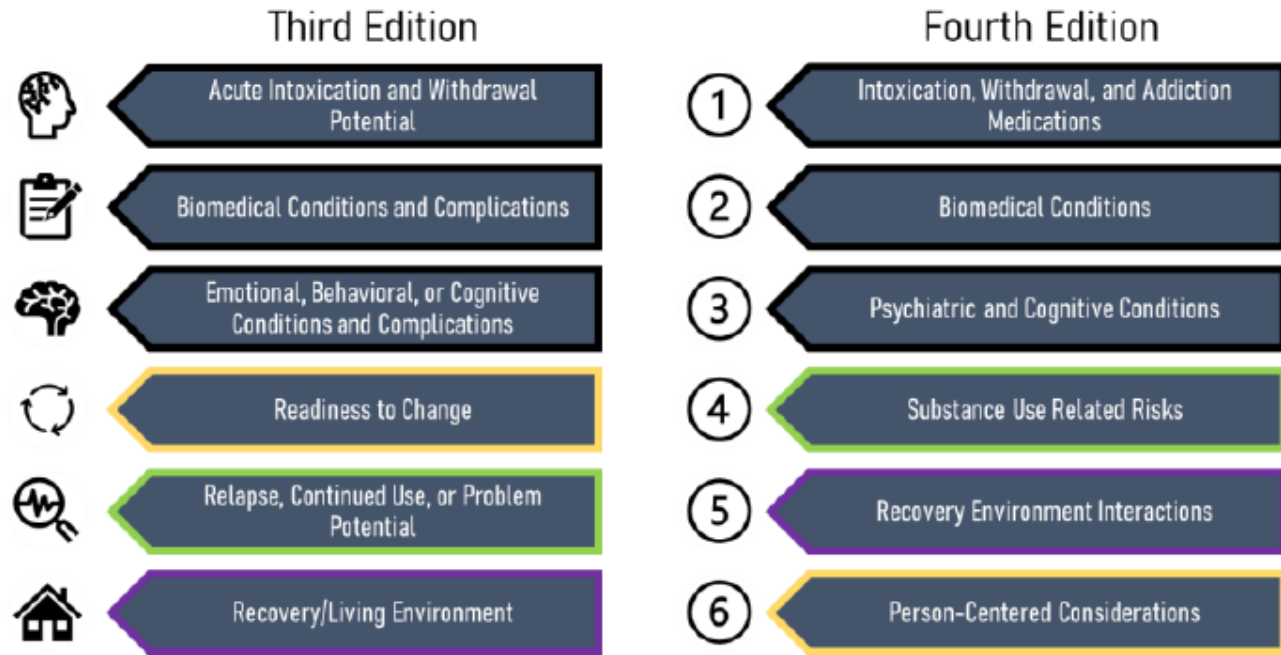




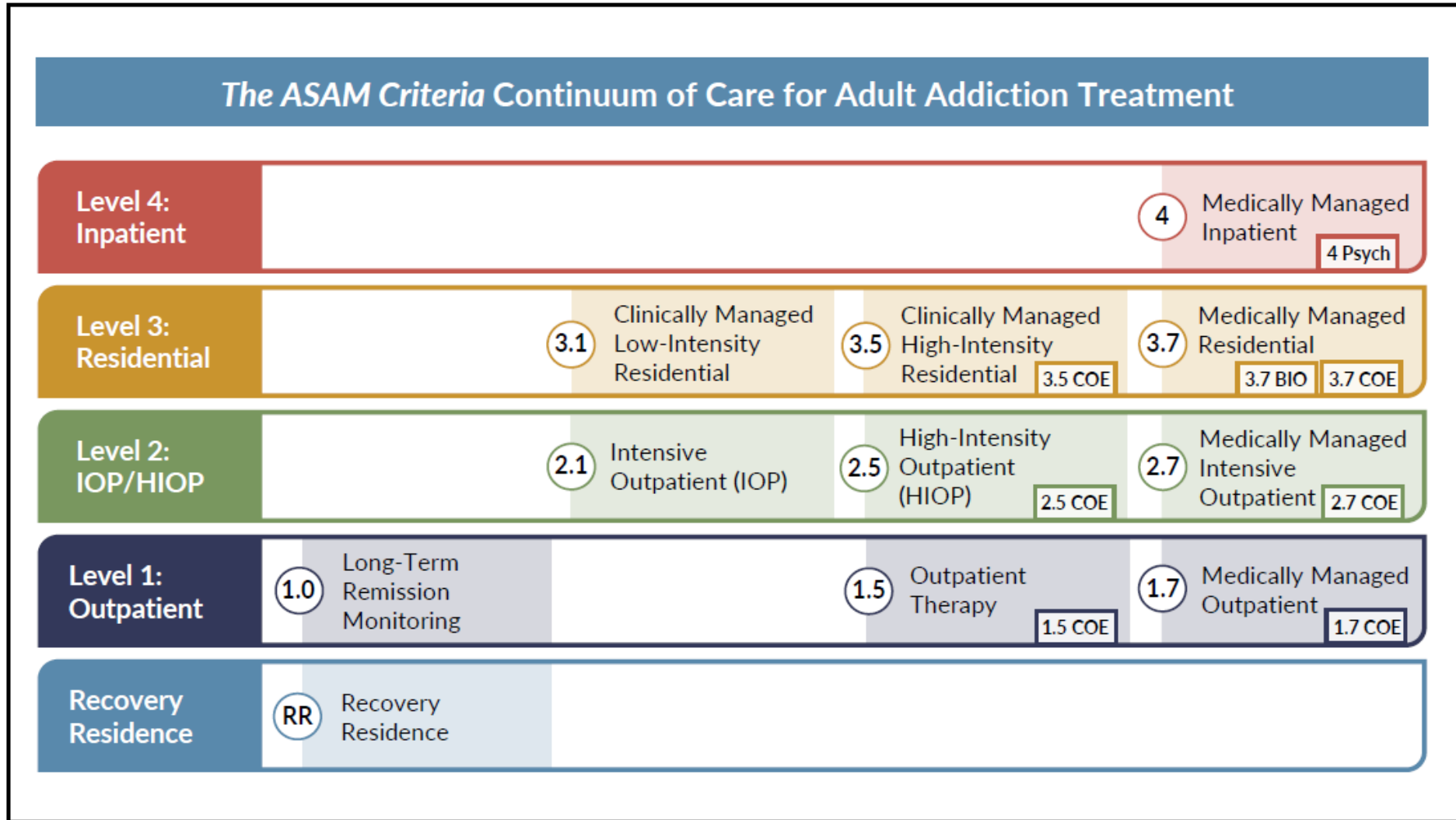
# ASAM 4<sup>th</sup> Edition – Slides from Brian Hurley, MD

## Reordering the dimensions

- Since readiness to change does not independently contribute to initial treatment recommendations the dimensions will be adjusted
- Readiness considered across all dimensions.
- New Dimension 6 focuses on patient preferences, barriers to care, and need for motivational enhancement



# ASAM 4<sup>th</sup> Edition – Slides from Brian Hurley, MD



# ASAM 4<sup>th</sup> Edition – Slides from Brian Hurley, MD

## Notable Level of Care changes



Removing Level 0.5. Early intervention and prevention are addressed in a new chapter.



Removing Level 3.3. Reflecting that cognitive deficits should be addressed in all levels of care.



Level 3.2 WM services integrated into Level 3.5.



Recovery support service expectations at each level of care.



Expectation that all levels of care be co-occurring capable at minimum.



Adding harm reduction as a component of individualized care.



# ASAM 4<sup>th</sup> Edition – Feedback/Discussion

- **DHCS Policy guidance/implementation – Projected January 2025**
- **Examples of Issues/Considerations to Raise to DHCS**
  - 3.2-WM: Concerns with Residential Authorization requirements when incorporated into 3.5
  - Need for higher rates for Residential to support changes – notably in 3.5 and 3.7
  - Changes in licensing and certification with new LOCs
  - New Assessment Tool – Staff Training and Updated Templates in SmartCare Needed
  - Other



# Discussion: MOUs with Managed Care Plans

*(MCPs = Kaiser and Partnership HealthPlan (e.g. primary care through FQHCs, such as Ritter, MCC, MCHW)*



## MOU Requirement:

- Process to accept referrals from MCP staff/providers/self-referral for assessment and a mechanism for communicating acceptance to the MCP staff/provider/self-referred member

## Questions/Considerations

- Are you aware of receiving referrals from the FQHCs? If so, how happy are you with how it is working?
- Do you let the referring party know the outcome of the referral?
- If you had a magic wand, how would you like to receive referrals from MCPs and how would acceptance be communicated back?

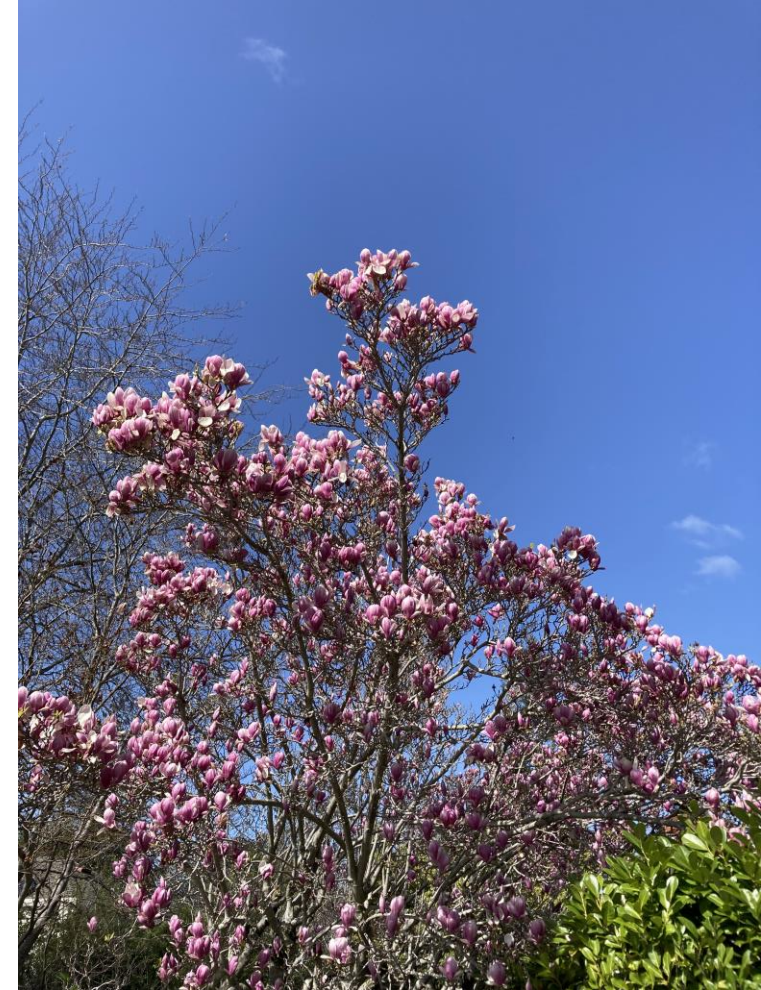
# Discussion: Referrals and Pre/Post Release Coordination

## BH Links CalAIM Justice Requirement:

- Participate in Professional-to-Professional Clinical Handoff 14 days prior to release
- Note: BHRS Links Clinician (LPHA) will perform in-custody ASAM to identify appropriate level of care and prospective referral(s)

## Questions/Considerations

- Process and criteria to accept direct referrals and assessments from BHRS Links Clinician





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# RESOURCE SLIDES

*Please share with applicable staff*

# Resource Reminder: Medi-Cal Eligibility Re-determinations

## Who:

- Public Assistance (PA) Contact for SUD Providers: **Peter Funk** ([pfunk@marincounty.org](mailto: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 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 204. 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 the SmartCare system. It is divided into two main panels: 'Client Plans' and 'Plan Time Spans'.

**Client Plans Panel:** This panel contains a table with the following columns: Plan Name, Insured Id, Co-Pay, Start Date, End Date, COB, and Service Area. There are four rows of plans listed:

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

Below the table, there are filters for 'Show Current Plans Only' (checked) and 'DMC' (selected). A 'Maximize Time Spans' button is also present.

**Plan Time Spans Panel:** This panel shows a list of active plans for the date 07/01/2023. It includes a 'Change COB Order...' button and a 'Set End Date' button for each plan.

Plan Name	Address	Set End Date
Medi-Cal DMC	1500 Capitol Avenue MS 2704 Sacramento, CA 95899-...	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: **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, specifically the 'Service Detail' tab. The interface is divided into several sections:

- Service Detail:** This section contains fields for 'Documentation Time' (with a 'Days' label), 'Evidence Based Practices' (a dropdown menu), and 'Transportation Service' (a dropdown menu currently set to 'No'). To the right, there are three checkboxes: 'Override Charge Amount', 'Override Errors', and 'Interpreter Services Needed'. Further right, there are two 'Overridden By' fields, each with an associated input box.
- Warnings / Errors:** This section features a table with the following columns: 'Date', 'Error Type', 'Error Message', and 'Next Step'. The table currently displays 'No data to display'.
- Custom Fields:** This section is titled 'Interpreter Service' and includes two rows of input fields:
  - 'Interpreter has been scheduled' with radio buttons for 'Yes' and 'No', and a 'Language' dropdown menu.
  - 'Interpreter Agency Scheduled' with an input box.

# Reminder: DMC Timely Access to Services

- Links to Instructions:
  - **For Non-OTP:** <https://2023.calmhsa.org/how-to-complete-the-dmc-outpatient-timeliness-record/>
  - **For OTP:** <https://2023.calmhsa.org/how-to-complete-the-dmc-opioid-timeliness-record/>
- This is required for State Reporting and important for assessing access to care and for continuous quality improvement
- There is a “flag” set-up in SmartCare to prompt staff to complete this form at enrollment
- **Implementation:**
  - For Outpatient and OTP LOCs: Use for all new admissions for January 1, 2024 forward (no change from guidance issued on 1/10/2024)
  - For Residential and Residential WM: Use for all new admissions for January 22, 2024 forward (updated guidance issued 1/18/2024)
  - You do not need to enter data retroactively from the above noted timeframes at this point

## 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 Updates & Tips

- **Health Questionnaire**
  - FYI: CalMHSA added a scanned document type for this document
- **SmartCare – Addresses**
  - If the beneficiary does not have an address, enter “20 North San Pedro Road, San Rafael, CA 94903”
  - No address will trigger a DMC denial (even if services shows as Completed)
- **New Users and Staff Updates** (e.g. role change, updated certification/ licensure dates, etc.)
  - Link to: [Staff User Access Form](#) (can be found at [www.marinbhhs.org/providers](http://www.marinbhhs.org/providers))

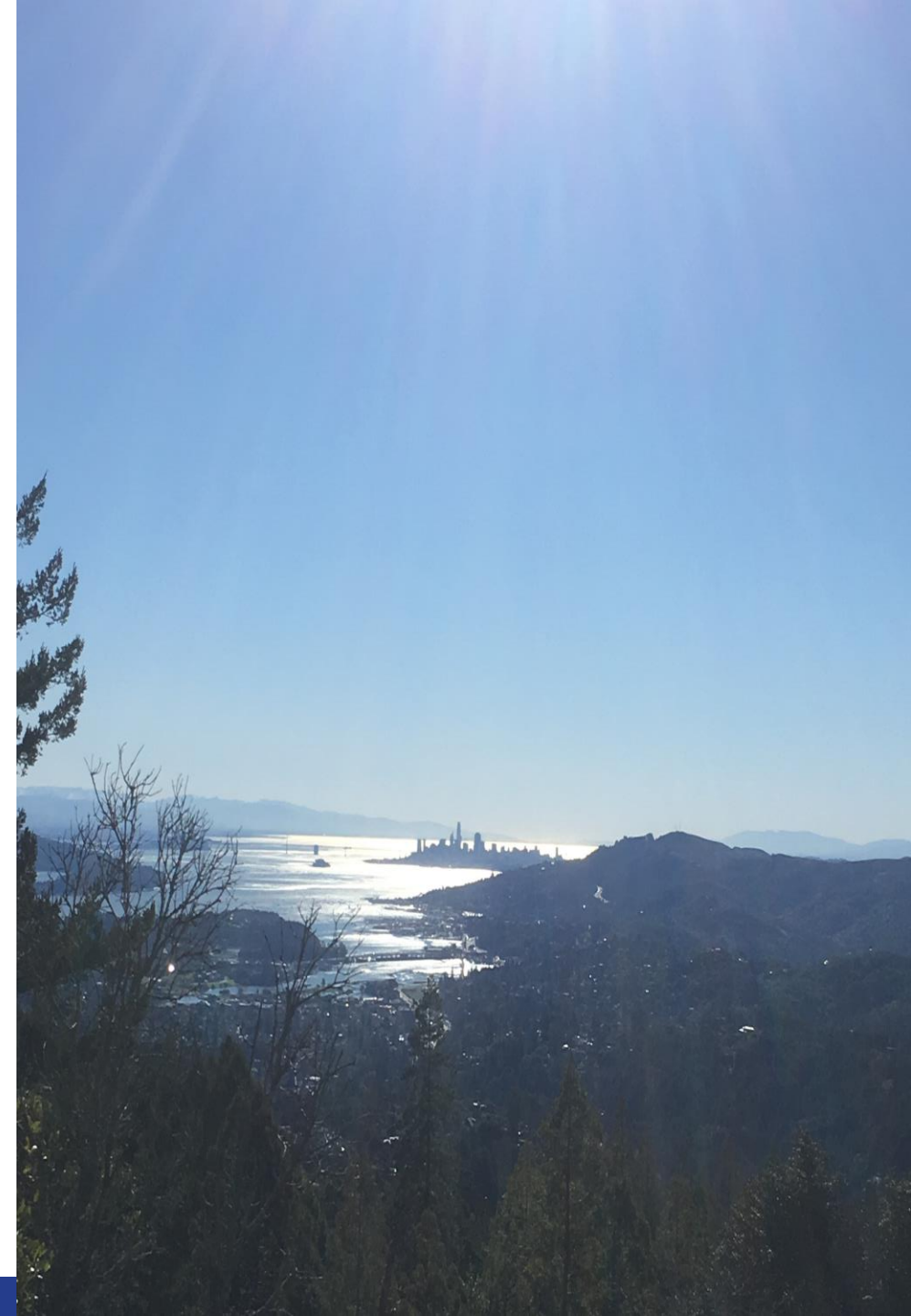
## SmartCare - Seeking Help

### CalMHSA Support:

- Navigating the EHR (Procedures & Workflows)
  - Use the “**Walk Me**” function by clicking the question mark icons  in the upper and lower right corners wherever you see it displayed.
  - Review Training Videos & Guides on the CalMHSA website: <https://2023.calmhsa.org/>

### For additional support

- [Live Chat is available and preferred - 2023 CalMHSA Site](#)
- [EHR@calmhsa.org](mailto:EHR@calmhsa.org) or by phone at (833) 686-6801
  - \* *This help is available from 7am – 7pm PST*
  - Additional help with procedures and workflows
  - Troubleshoot system related errors
  - Report system issues (glitches, bugs, etc.)



## SmartCare - Seeking Help

### Marin County BHRS EHR Support Team:

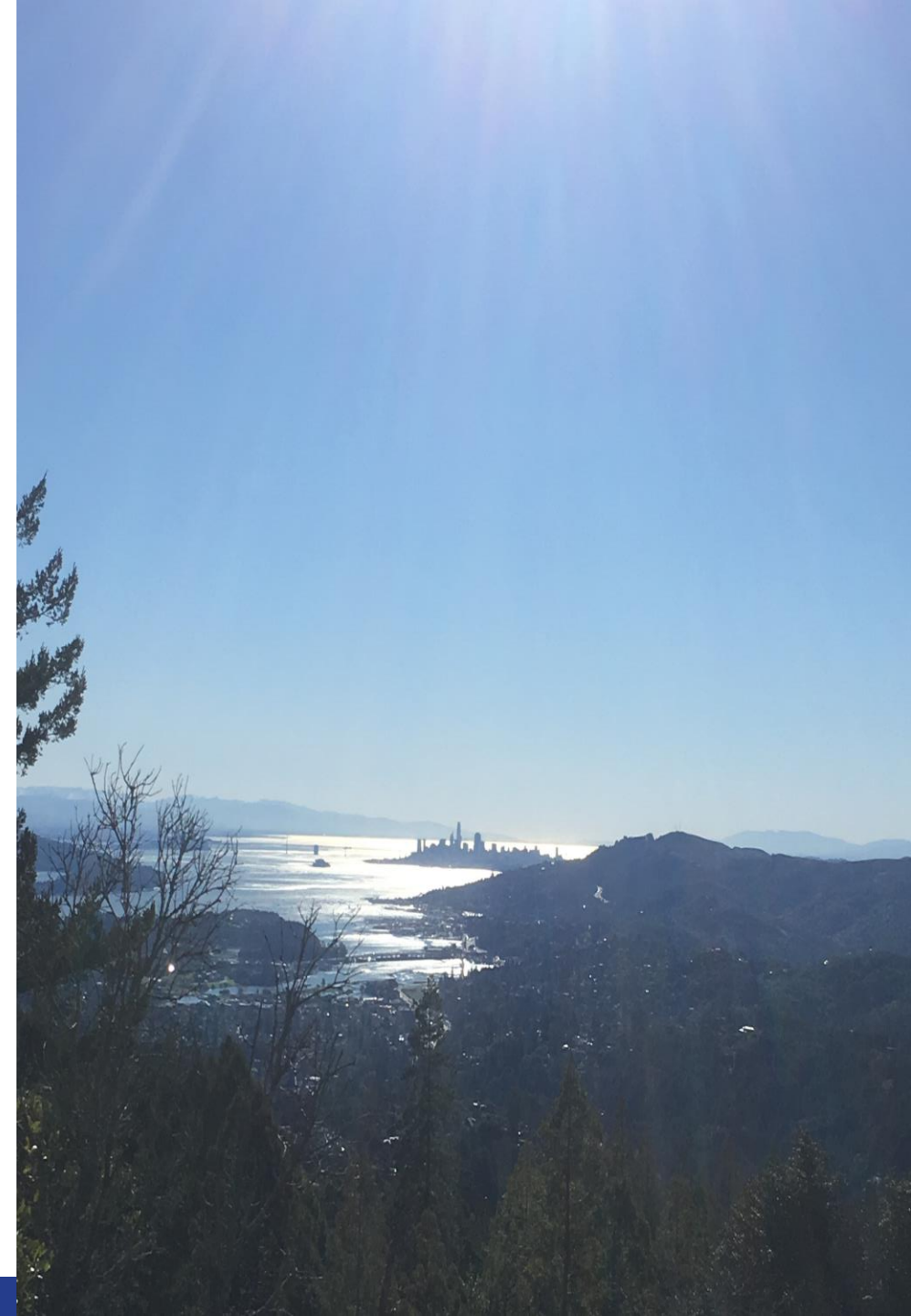
Use the [Marin BHRS EHR Support Request](#) /ticketing system to submit all new inquiries. The BHRS EHR support email should be used to respond to additional EHR requests to previously submitted tickets.

*Response time in/up to 3 days*

- Can't log in/locked out of account.
- There are missing programs, procedure codes or other options from drop downs.
- Can't add a problem to the problem list.
- Error messages that have to do with permissions.

### 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.
- If the inquiry is client related, please provide the client account number, DOS or other service-related info to research and recreate the issue.
- Examples:
  - *Please add the following services/programs for the providers below: Provider First/Last, Comprehensive Community Support or add counseling to program A*
  - *Services have rate errors: Client ID #555xxxx for DOS 7/1/2023 has a rate error*





## SmartCare - Seeking Help

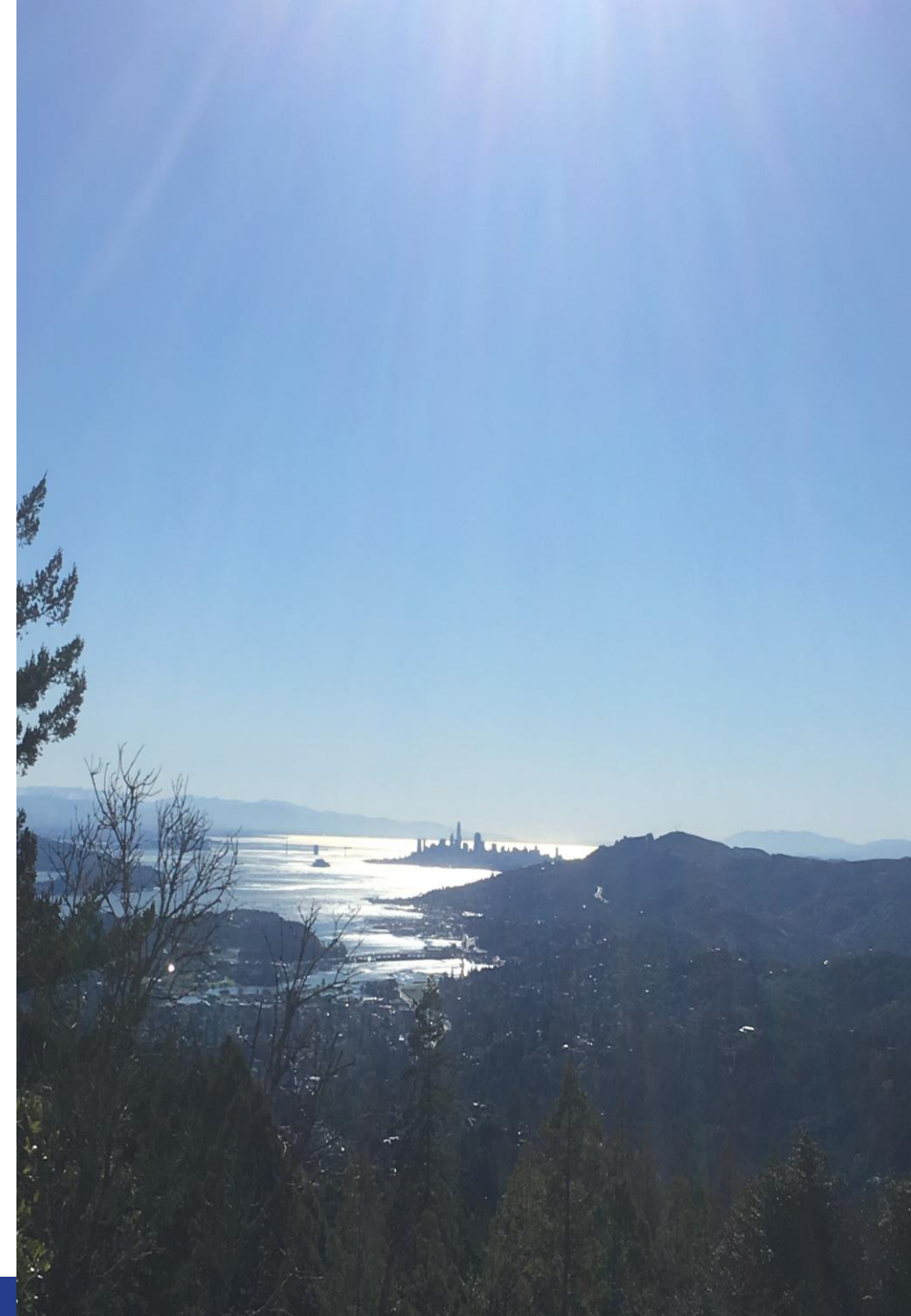
### Ongoing Clinical Support:

[BHRSQM@MarinCounty.org](mailto:BHRSQM@MarinCounty.org)

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

### Contract Manager Support:

- 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.



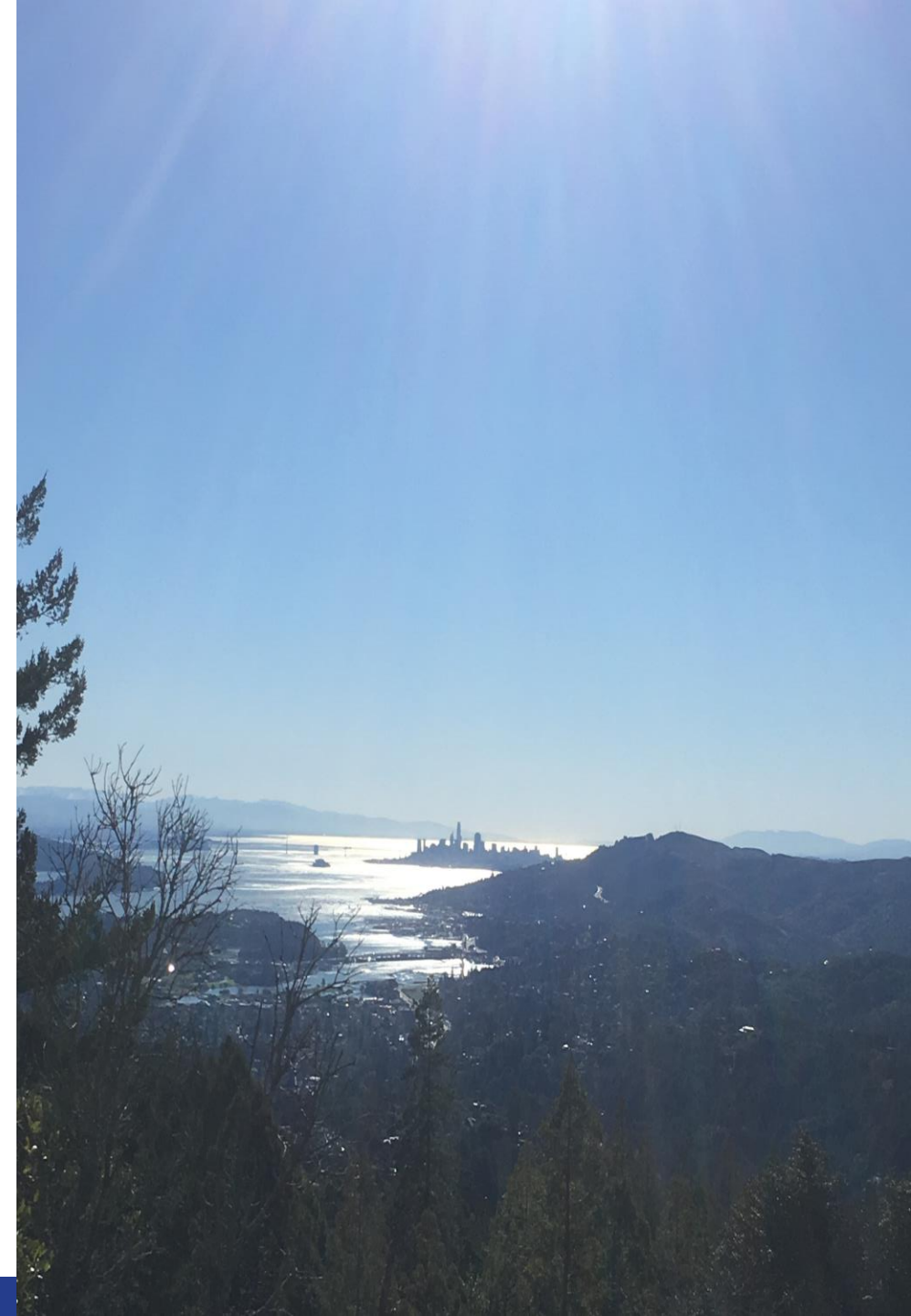
## SmartCare - Seeking Help

### EHR Support Resources:

- Please route inquiries to the resources provided on previous slides
- If you are unsure where to route your inquiry and are unable to find the answer to your question on the CalMHSA website/chat, please submit a ticket to BHRS EHR Support and they will coordinate with your Contract Manager and others as needed.
  - *Example: I know how to enter this service, but for this client and DOS, I am receiving this error that I haven't seen before and don't know how to resolve.*

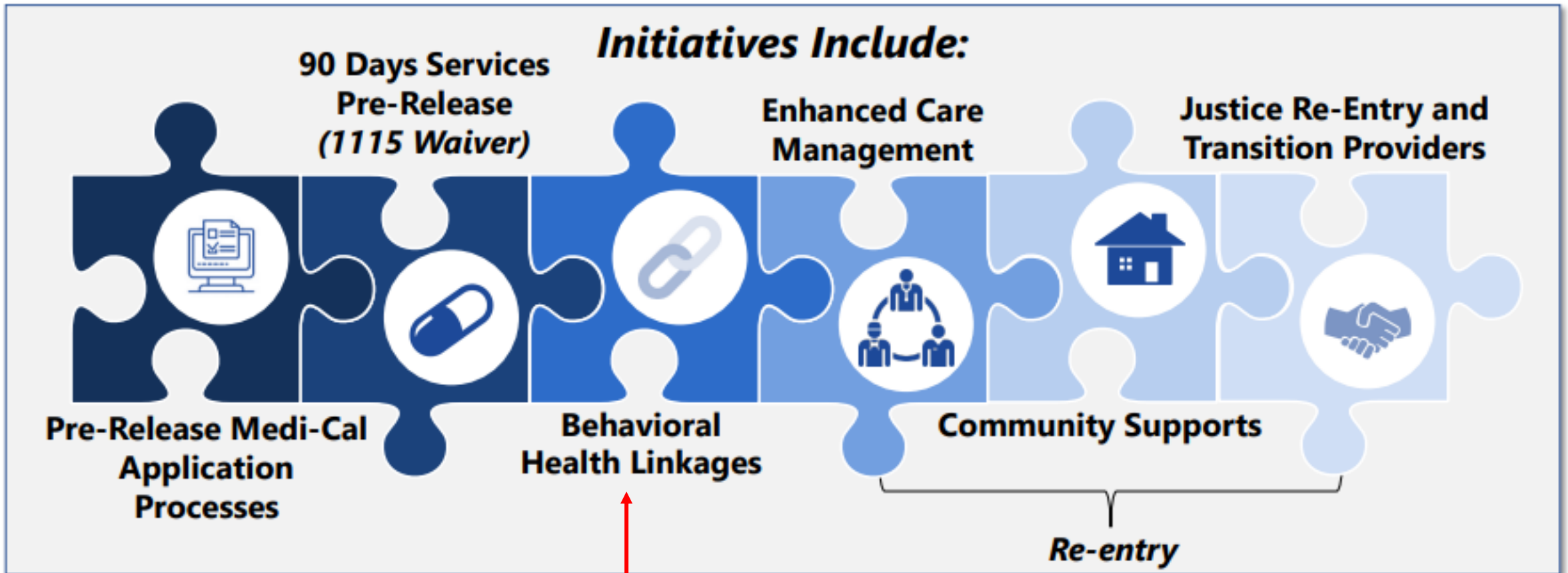
### SUD Office Hours:

- We have resumed [SUD Office Hours](#) on the 2<sup>nd</sup> Wednesday of the month from 1:00-2:00 pm
- Please be prepared to share examples including screenshots, background information and specific clients, services or other details to assist in resolution during Office Hours.



# What is CalAIM Justice Involved?

CalAIM justice-involved initiatives support justice-involved individuals by providing key services pre-release, enrolling them in Medi-Cal coverage, and connecting them with behavioral health, social services, and other providers that can support their re-entry.



# BHRS Responsibilities for Behavioral Health Links Pre & Post-Release

- Data Sharing With Managed Care Plans (Kaiser and Partnership HealthPlan) & Correctional Facilities (CFs)
- Participating in Re-entry Planning & Warm Handoff with ECM if requested
- Participating in Professional-to-Professional Clinical Handoff 14 days prior to release
- Follow-up services Post-Release
- Behavioral Health Links Go Live: 10/1/2024
- Resources: CalAIM Justice Involved (JI) [Fact Sheet](#); CalAIM JI [Policy and Operations Guide](#)



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