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# DMC-ODS Contractor Meeting

## August 14, 2024

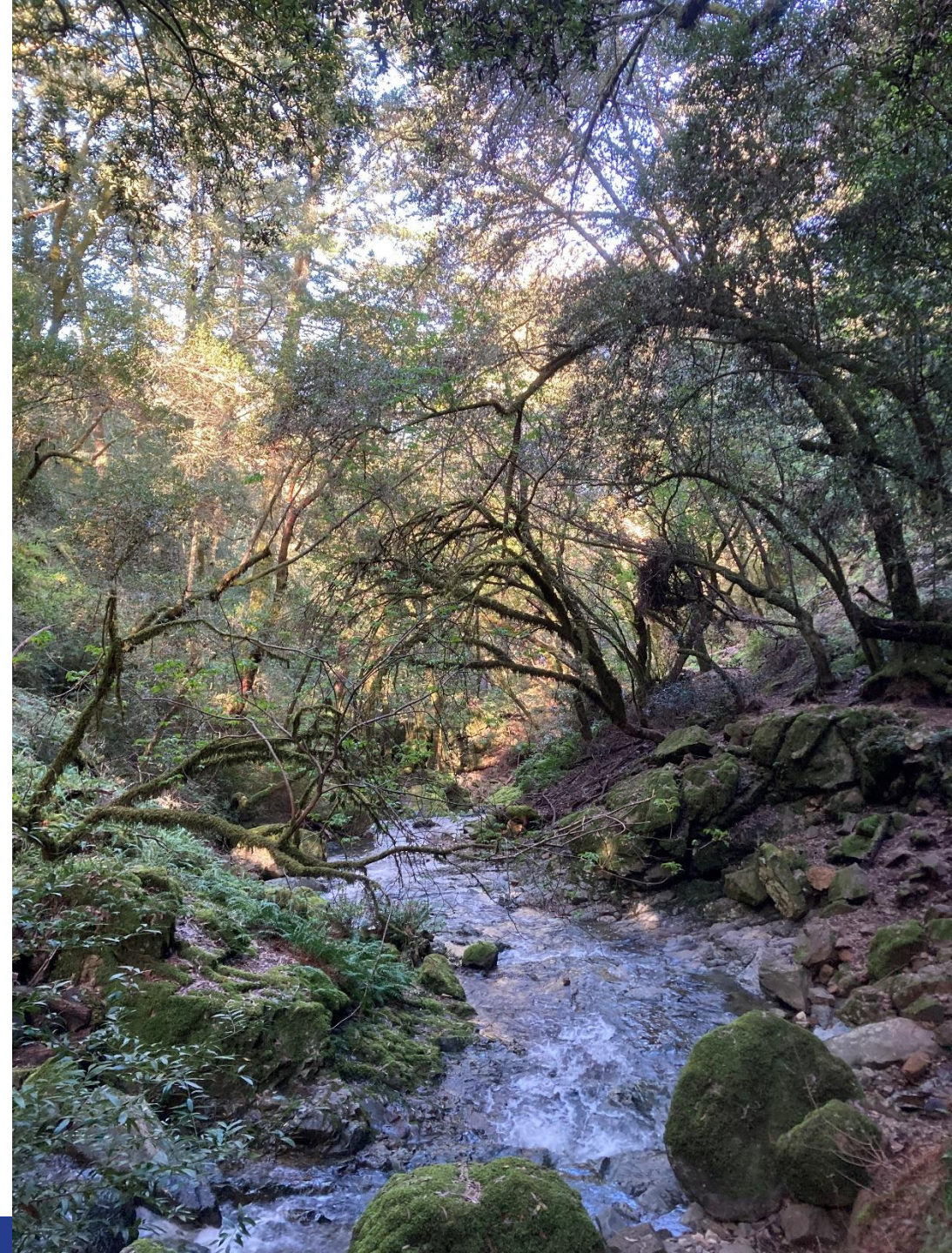


# Agenda

- Welcome and Introductions
- Provider Updates/Announcements
- County Updates/Announcements
  - DHCS, Federal and County Updates
  - MAT Grant Opportunity
- Treatment Perceptions Survey – Review and Discussion
- CalAIM Justice Involved: BH Links – Review and Discussion

# Provider Updates and Announcements

- **Helen Vine Recovery Month Celebration**
  - September 27 | 5-8pm | San Rafael Community Center



# County Updates and Announcements

- **Upcoming Events**

- SmartCare Office Hours: 8/14 @ 1pm ([Zoom](#))
- 42 CFR Part 2 Update Training: ([Register](#)): 9/26/24 @ 1:00pm – 4:45pm
- Seeds of Hope – 9/16 @ 11am – 2pm

- **BHRS Substance Use Moved**

- Road to Recovery – 3270 Kerner Blvd., San Rafael
- SUD Admin – 10 N. San Pedro # 1022 (2<sup>nd</sup> Floor)

- **Timely Access(SmartCare)** – Please Identify Agency Point of Contact(s)

- **Potential Non-Fatal Overdose Email Alerts-** resuming this week



# County Updates – New Grant Opportunity with MHOAC



- **SUD Pilot Project Goal:** Identify and remove barriers and improve access to Medications for Addiction Treatment (MAT) for SUD within a financially sustainable model.
  - Expand MAT in non-medical SUD treatment settings
  - Increase MAT Prescribers (In-Person) – Cost-sharing model
  - Explore new methods of MAT service delivery
  - Learning Collaborative
- **Soliciting Provider Interest – Contact Jordan by 8/30**
  - Cost Sharing to Hire MAT Prescribers in DMC-ODS
  - IMS Certification for SUD Residential Facilities

***MHSOCA MEDICATION ASSISTED  
TREATMENT PROJECT***

Elizabeth Stanley-Salazar, BSN, MPH

[Salazar.stanley@gmail.com](mailto:Salazar.stanley@gmail.com)

# *MHSOCA MAT THREE YEAR PROJECT GOALS*

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## **Expansion of Medication Assisted Treatment (MAT)**

- \*increase the number of certified IMS programs
- \* increase the number of MAT prescribers

## **Develop a business model to advance MAT sustainability**

- \* cost sharing in year one and two
- \* DMC to sustain in perpetuity

## **Expand MAT to all levels of care**

# *MHSOCA MAT PROJECT GOALS*

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## **Training**

- \* new payment reform protocols
- \* tracking medical claims data for reporting purposes

**Training by LA County Public Health in the Telephone Prescriber Model**

**Establish a Learning Collaborative**

**Advance equity considerations using the SAMHSA guidelines on community engagement**



# *CIBHS OVERVIEW OF TA AND TRAINING*

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- Project Leadership Committee
- Listening Sessions and Key Informant Interviews
- Support IMS certification
- Support Medication Assisted Treatment Best Practices
- Assist in Development of a Sustainable Business Model
- Fact Finding, Identification of Barriers and Successes for Providers and Persons Served, Troubleshooting

# County Updates and Announcements

- **Service Entry and Billing Submission**

- Ensure all services in SmartCare have been moved from Scheduled and Show status each month with submission of billing.
- All services should be in Complete, Cancel, No Show or Error ***status***.
- Use the Services (My Office) List page and filter the All Service Statuses dropdown by Scheduled and Show to review outstanding services.
- Services with Warnings or Errors will remain in Show status until the errors are resolved.



Services (3551)

All Services	Scheduled	Include Do Not Complete	All Programs	Financial Assignment...	Apply Filter
All Locations	All Procedure Codes	All Clinicians	All Service Entry Staff	All Service Areas	
Service Id	Entered From	Entered To	DOS From 07/01/2023	DOS To 06/30/2024	
<input type="checkbox"/> Include Services created from Claims	<input type="checkbox"/> Only include Services with Add On Codes	<input type="checkbox"/> Only show Non-Billable Services	<input checked="" type="checkbox"/> Show Only Active Clients		

# County Updates and Announcements



## Payer Plan Entry and Maintenance

- All services must have an active payer plan on the date-of-service.
  - Non Medi-Cal services also require an additional payer plan that is appropriate for the service.
- All payer plans must have an ID number.
  - For Marin County, SB678, AB109, ADC, etc. add the client's account number.
- All payer plans should have a “Start Date” of the first of the month that services were rendered.

# County Updates and Announcements

- **Payer Plan Entry and Maintenance (cont.)**
  - Enter payer plans only once in the coverage screen
    - If the payer is already present in the “Client Plans” (top) box, use the “start/end dates” and “Service Area” fields to “Add” the payer to the “Plan Time Spans” (bottom) box.

Coverage (4) i

**Client Plans**    Notes

Client Plans

Plan Name	△	Insured Id	Co-Pay	Start Date	End Date	COB	Service Area	
<a href="#">Marin County</a>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	<a href="#">Add</a>
<a href="#">Medi-Cal DMC</a>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	<a href="#">Add</a>
<del><a href="#">Medi-Cal DMC</a></del>				<del><input type="text"/> </del>	<del><input type="text"/> </del>	<del><input type="checkbox"/></del>	<del>DMC </del>	<del><a href="#">Add</a></del>
<a href="#">Medi-Cal MH</a>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	MH	<a href="#">Add</a>

# Treatment Perceptions Survey

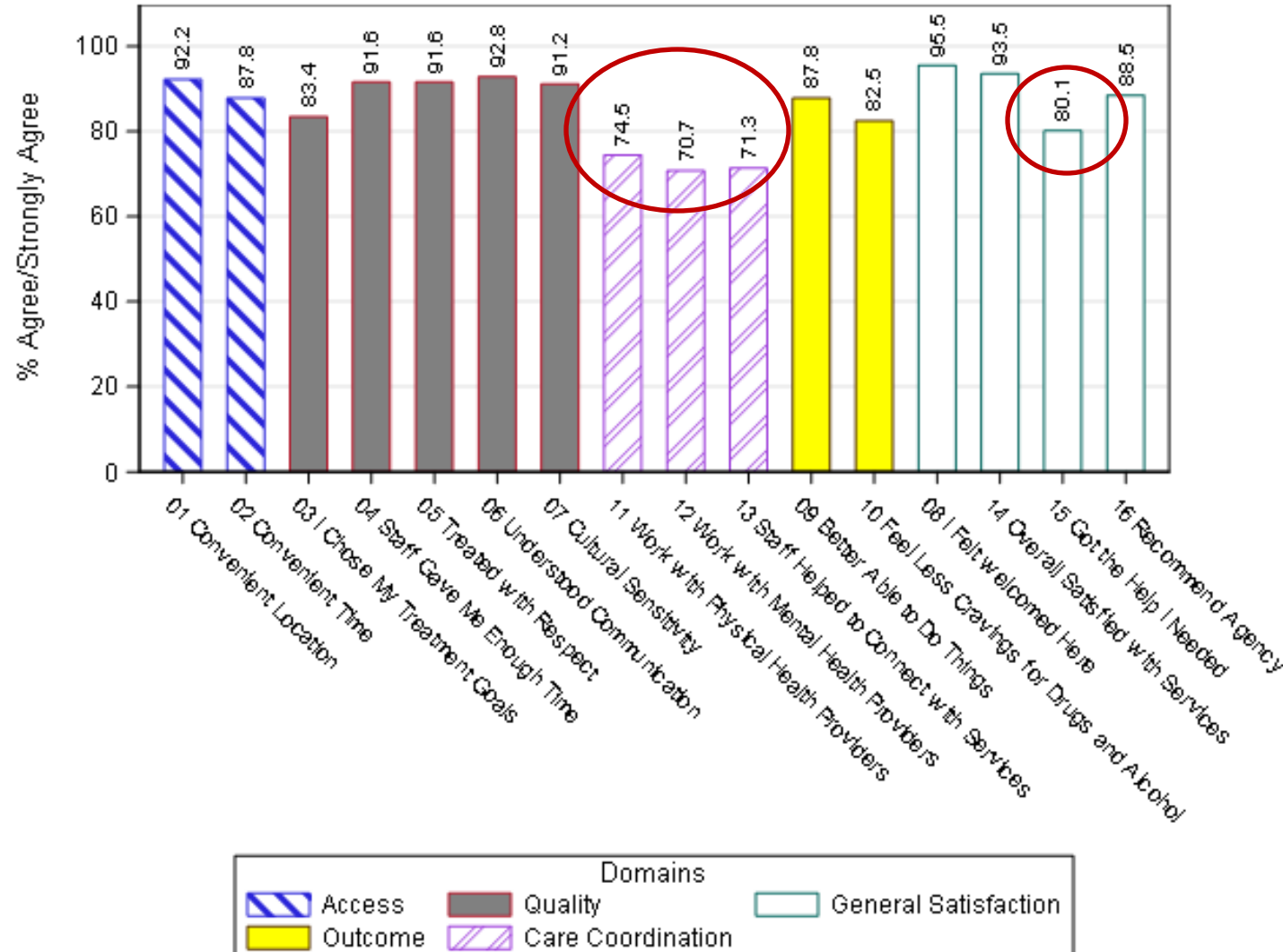


# Treatment Perceptions Survey Data

2023 Results: Lowest % - Care coordination & getting needed help

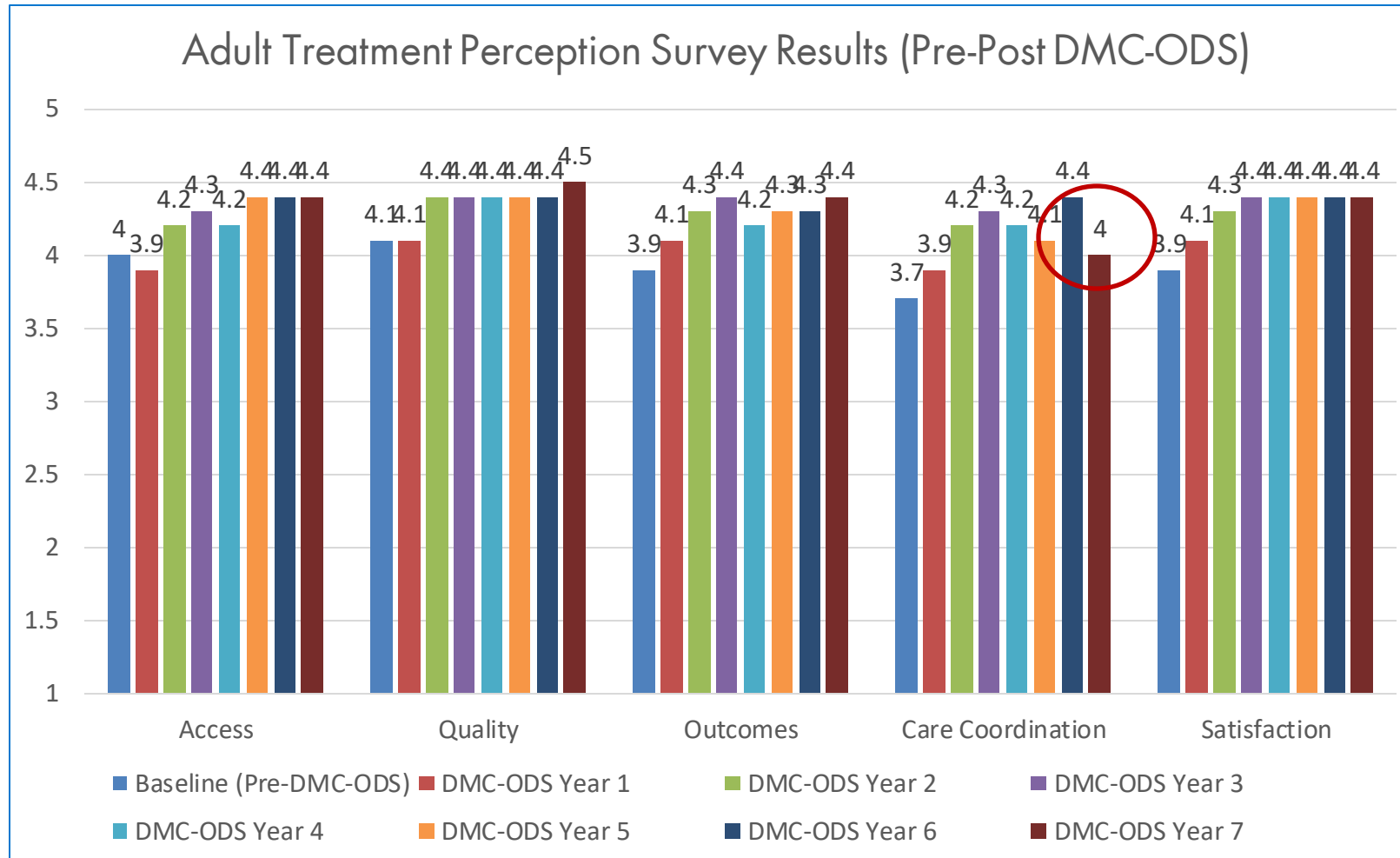
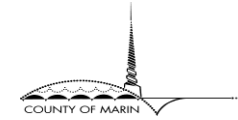


Figure 1. Percent of survey respondents in agreement by survey questions and five domains



# Treatment Perceptions Survey Data

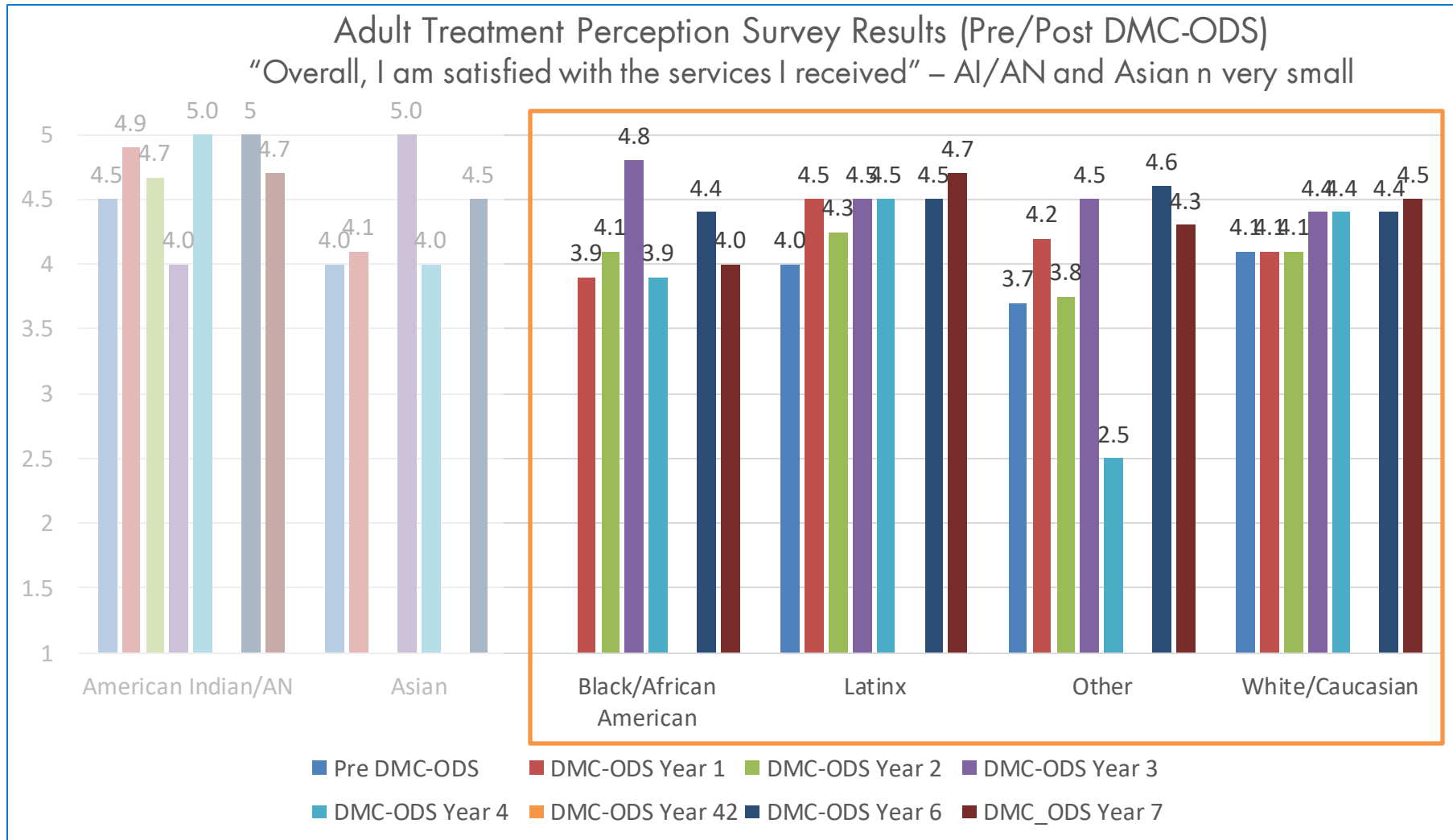
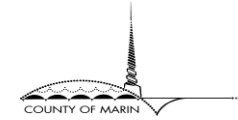
Results: Access, Quality, Outcomes, Coordination and Satisfaction



Scores Range from 1.0 - 5.0, with higher scores indicating greater satisfaction

# Treatment Perceptions Survey Data

Results: Overall Satisfaction Stratified by Race/Ethnicity

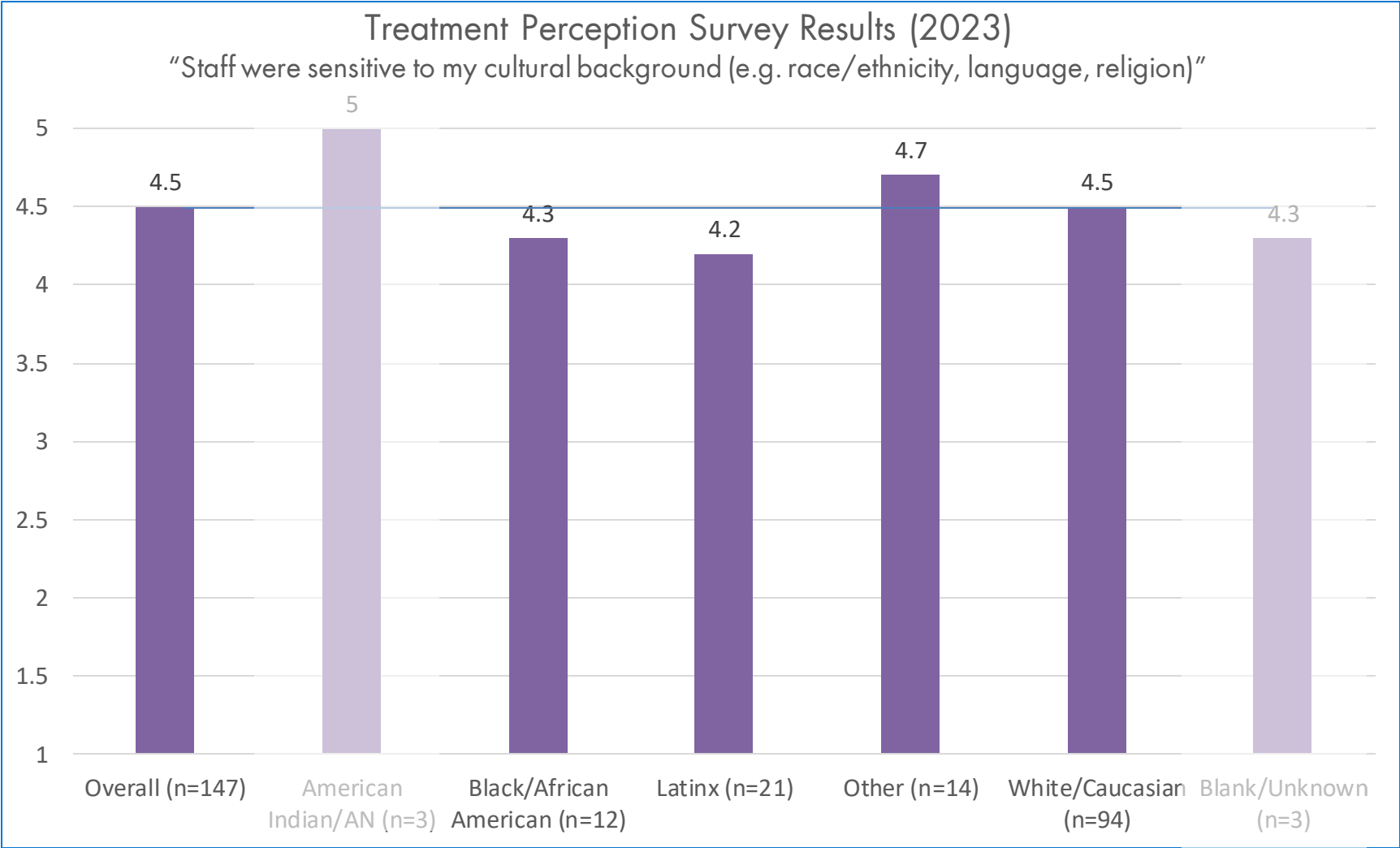
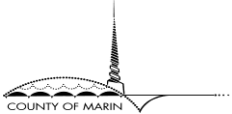


Scores Range from 1.0 - 5.0, with higher scores indicating greater satisfaction



# Treatment Perceptions Survey Data

## Results: Cultural Sensitivity Stratified by Race/Ethnicity



Scores Range from 1.0 - 5.0, with higher scores indicating greater satisfaction  
Note: There were some responses to multiple categories, so the n exceeds the total

# Treatment Perceptions Survey Data

## Results: Getting needed help vs. overall satisfaction

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Deep dive into questions #14 and #15

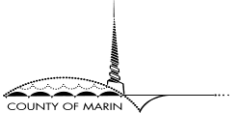
Exact question wording:

#14: Overall, I am satisfied with the services I received.

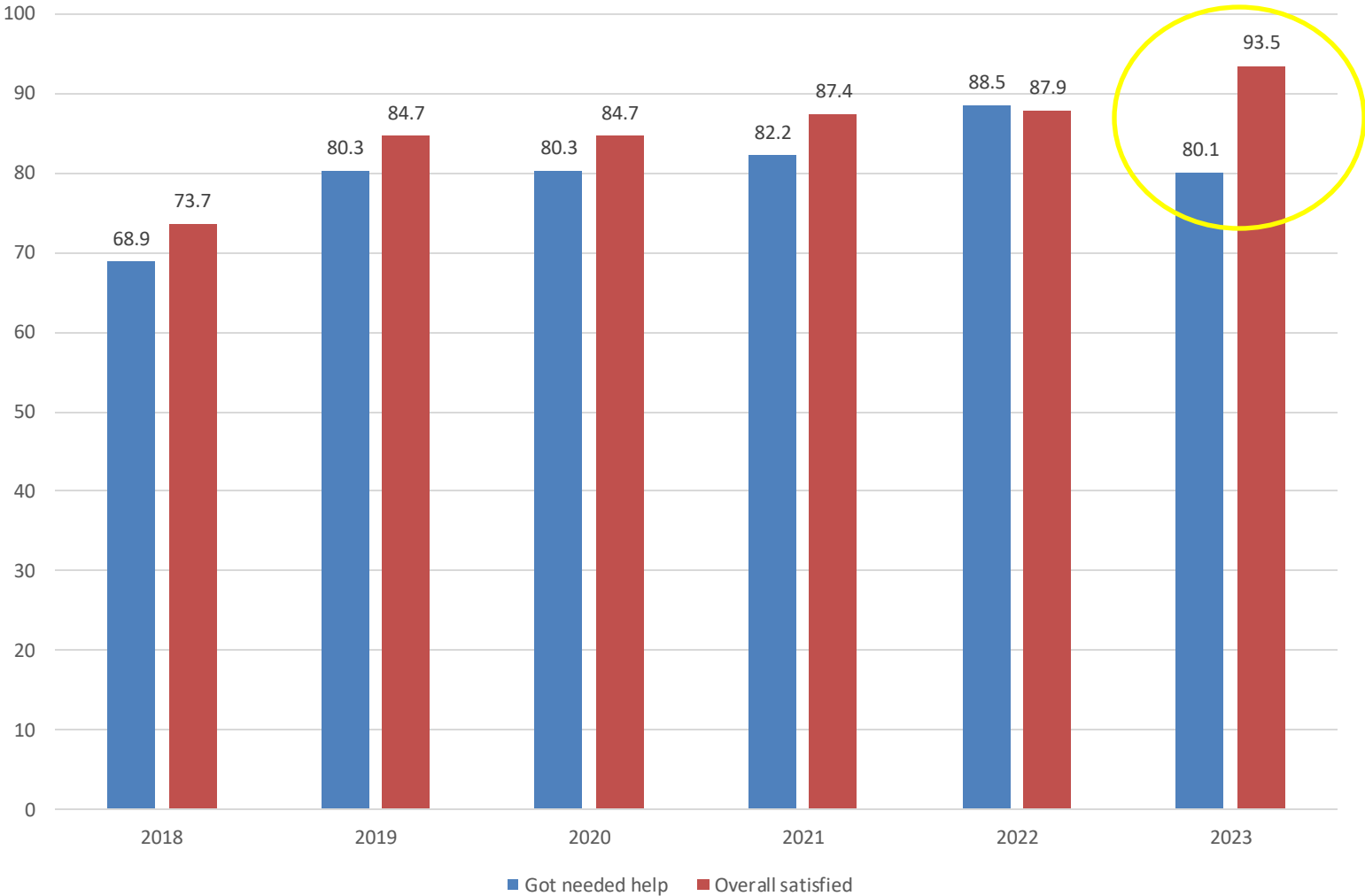
#15: I was able to get all the help/services that I needed.

# Treatment Perceptions Survey Data

Results: Getting needed help vs. overall satisfaction – by year



% Agree/Strongly Agree - usually fewer agree they got needed help than overall satisfaction



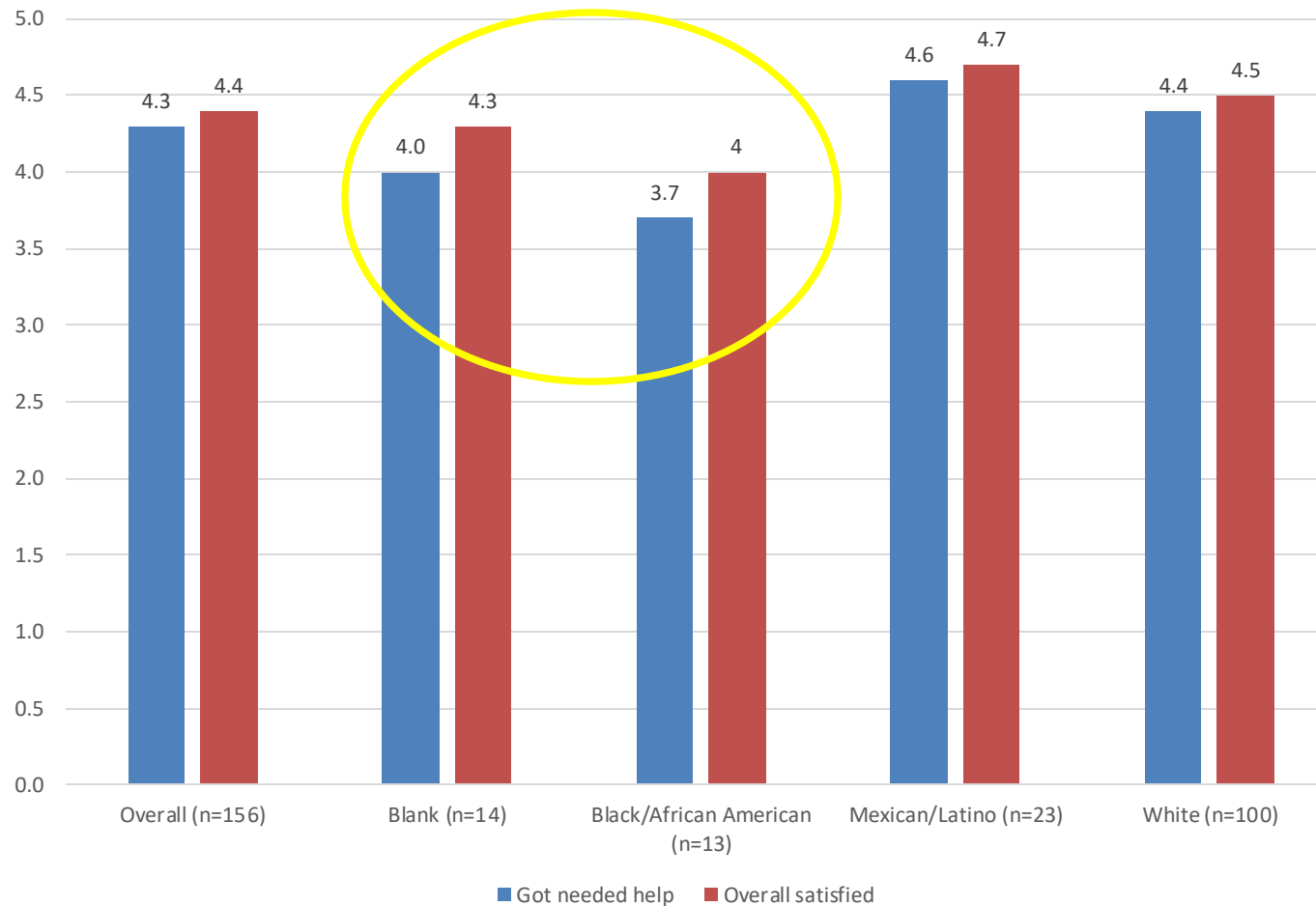
Scores Range from 1.0 - 5.0, with higher scores indicating greater satisfaction

# Treatment Perceptions Survey Data

Results: Getting needed help vs. overall satisfaction race/ethnicity



Satisfied may not mean you felt you got needed help  
(2023 - groups with 10+ responses only)



Scores Range from 1.0 - 5.0, with higher scores indicating greater satisfaction

# CalAIM Justice-Involved Initiative Overview

<b>Medi-Cal Screening</b>	<b>Physical &amp; BH Screening</b>	<b>Pre-release Services</b>	<b>Supportive Re-entry Services</b>
<p>Screen all incarcerated individuals for Medi-Cal eligibility &amp; enroll in coverage</p>	<p>Screen for physical &amp; behavioral health needs. Complete in-depth needs assessment*</p> <p>*BQUIP and ASAM Assessments for SUD services</p>	<p>Develop treatment plan and provide physical &amp; behavioral health care services to individual during incarceration</p>	<p>Connect individuals receiving pre-release services to community care post-release:</p> <ul style="list-style-type: none"><li>• Physical health care to ECM*</li><li>• Behavioral health care to Behavioral Health Links providers</li></ul> <p>*Enhanced Care Management provider</p>

# Types of Behavioral Health Links

## **Drug Medi-Cal Organized Delivery System:**

- Meets eligibility criteria for service
- County SUD services including contractors will provide community care

## **Specialty Mental Health Services:**

- Meets eligibility criteria for service
- County programs will provide community care

## **Mild-to-Moderate Mental Health:**

- Doesn't meet eligibility criteria for SMHS service but received mental health pre-release services
- Managed Care plan (Partnership or Kaiser) will provide community care

# Professional-to-Professional Clinical Hand-off Requirements

Participate in clinical handoff, scheduled within 14 days of expected release (within 7 days post-release, if release was unexpected)

Schedule post-release follow-up appointment (within 1 business day for urgent need, within 1-week for non-urgent need)

Provide individual with date/time/location

Work with pre-release care manager &/or ECM provider to ensure client has transportation to follow-up appointment

# Post-Release Follow-up Requirements

Continue to schedule follow-up appointments ongoing

Ensure client has transportation to scheduled follow-up appointments  
(coordinate with ECM provider if needed)

Follow-up with the individual if they miss an appointment  
(coordinate with ECM provider if needed)



# Marin Status

## MARIN COUNTY JAIL

- Estimated 'go live' date for pre-release services in late 2025
- Must complete a Readiness Assessment 6 months prior to 'go live'

## BEHAVIORAL HEALTH LINKS

- 'Go live' date October 1, 2024
- Marin BH link Readiness Assessment has been submitted to the state & approved
- BHRS must be ready to receive BH link referrals from other county jails that are planning to 'go live' with pre-release services on October 1st

# 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 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 contains a table with columns for Plan Name, Insured Id, Co-Pay, Start Date, End Date, COB, and Service Area. The 'Plan Time Spans' panel shows a list of plans with 'Set End Date' buttons and a 'Change COB Order...' button. A blue arrow points from the text in the first list item to the 'Set End Date' buttons in 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 Time Spans					
07/01/2023 - No End Date	Change COB Order...				
X Medi-Cal DMC	[REDACTED]	1500 Capitol Avenue MS 2704 Sacramento, CA 95899-...		Set End Date	[Icon]
X SABG				Set End Date	[Icon]
X Marin County				Set End Date	[Icon]

*\*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:** Includes fields for 'Documentation Time' (with a 'Days' label), 'Evidence Based Practices' (a dropdown menu), and 'Transportation Service' (a dropdown menu currently set to 'No').
- Authorization(s):** Contains three checkboxes: 'Override Charge Amount', 'Override Errors', and 'Interpreter Services Needed'. To the right, there are two 'Overridden By' fields, each with a text input box.
- 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 titled 'Interpreter Service' containing 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 a text input field.

# 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))

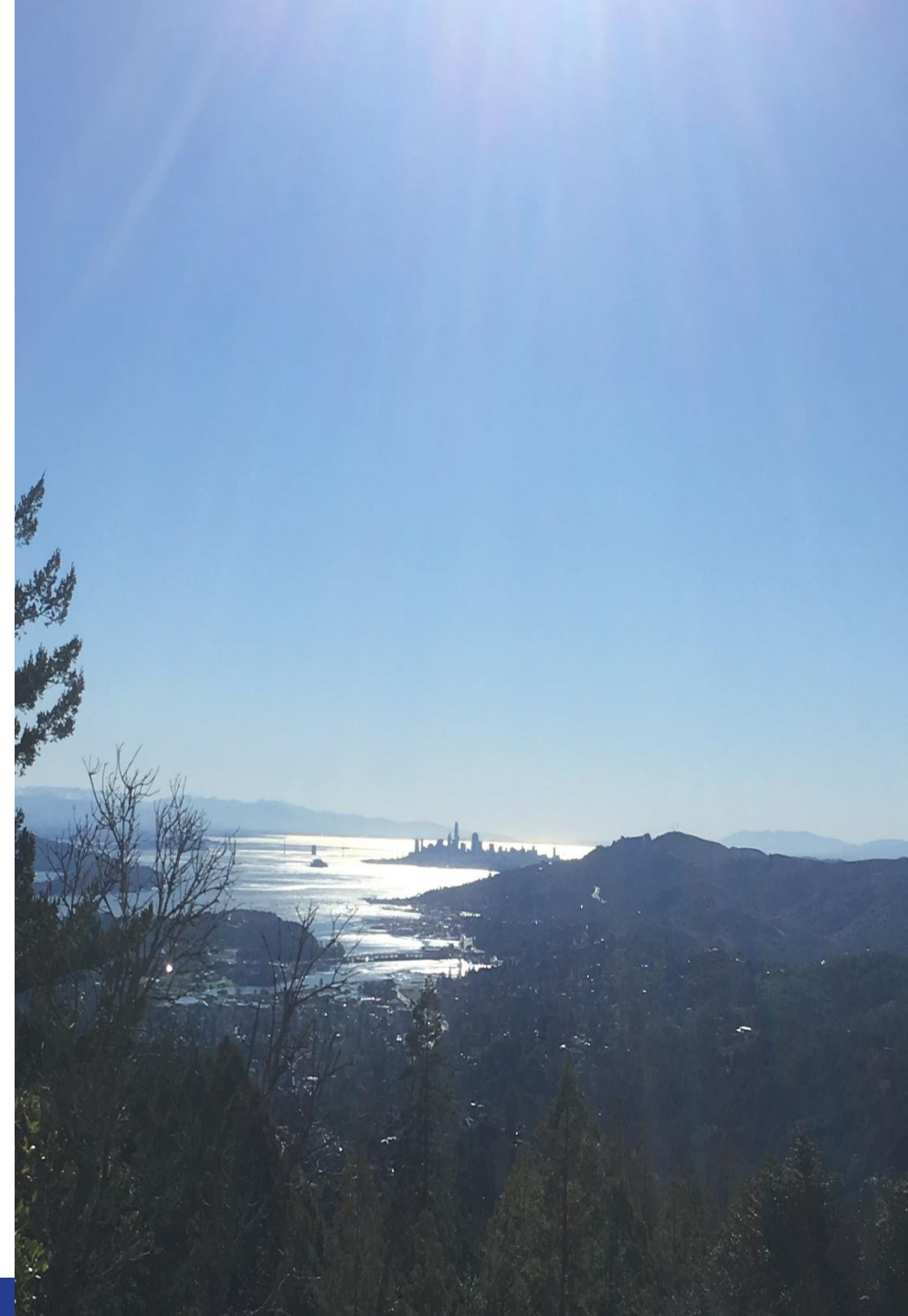
## SmartCare - Seeking Help

### 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:

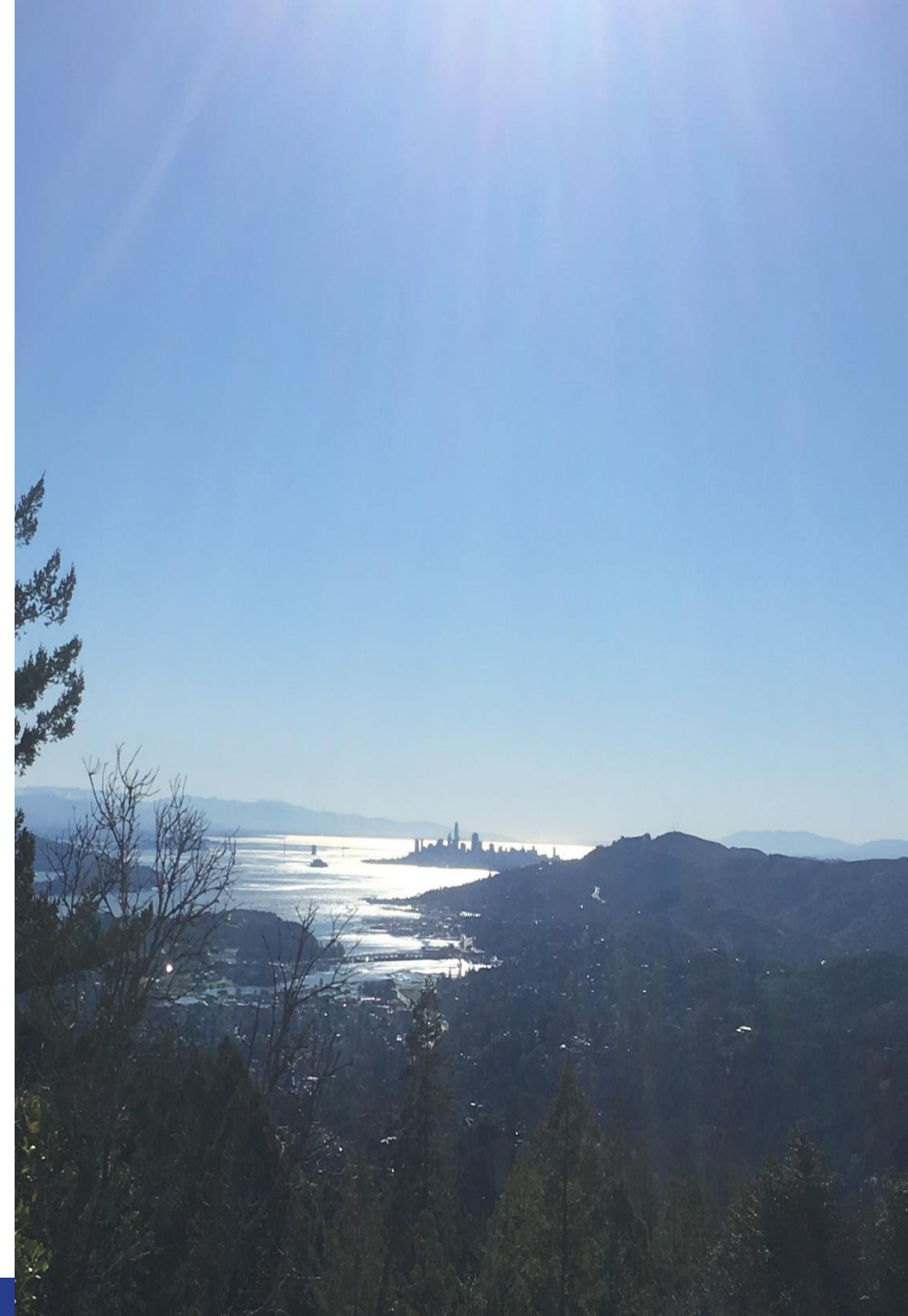
Use the [Marin BHRS EHR Support Request](#) /ticketing system to submit all new inquiries. The BHRS EHR support email should be used to respond to additional EHR requests to previously submitted tickets.

*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

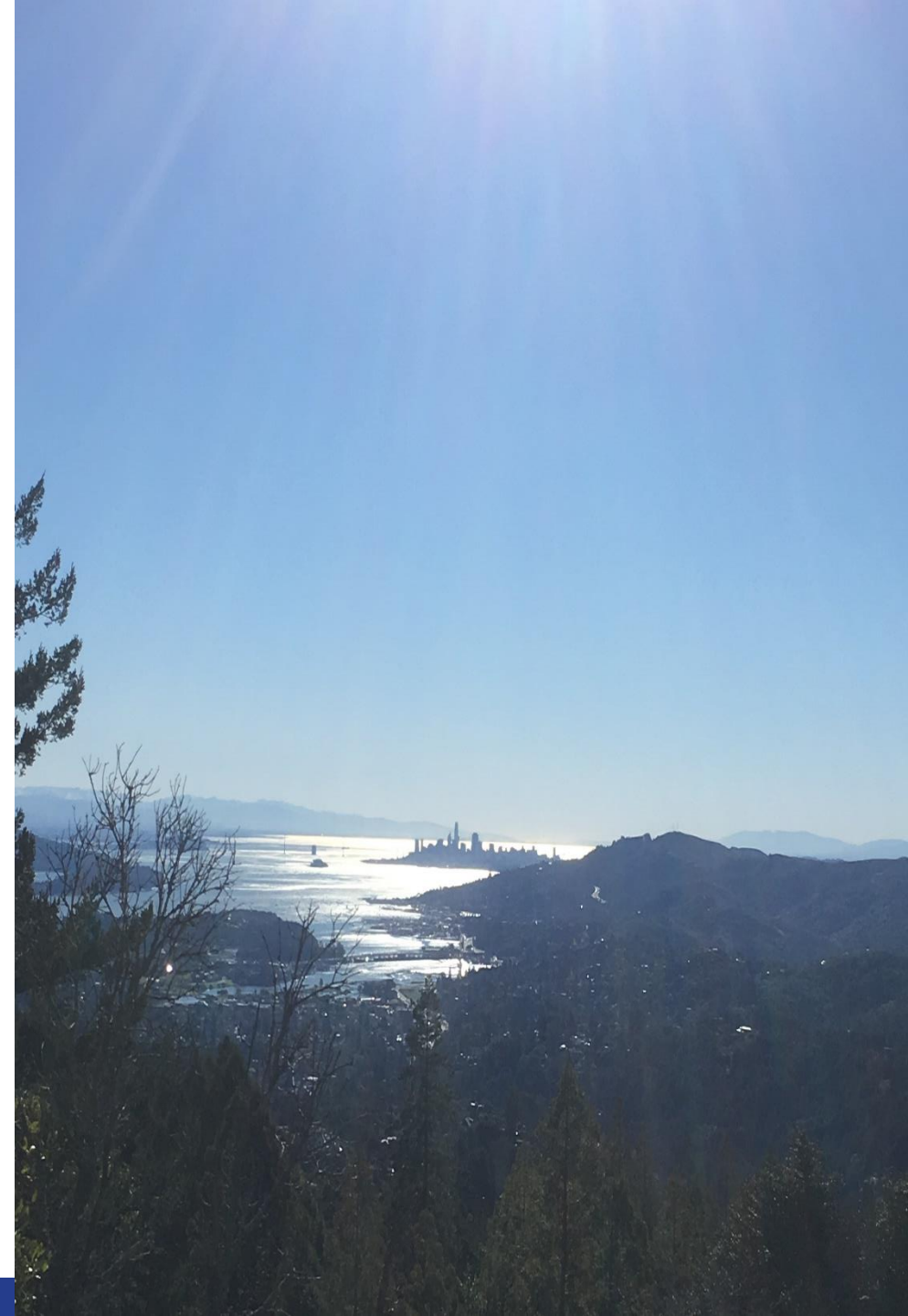
### Ongoing Clinical Support:

[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.



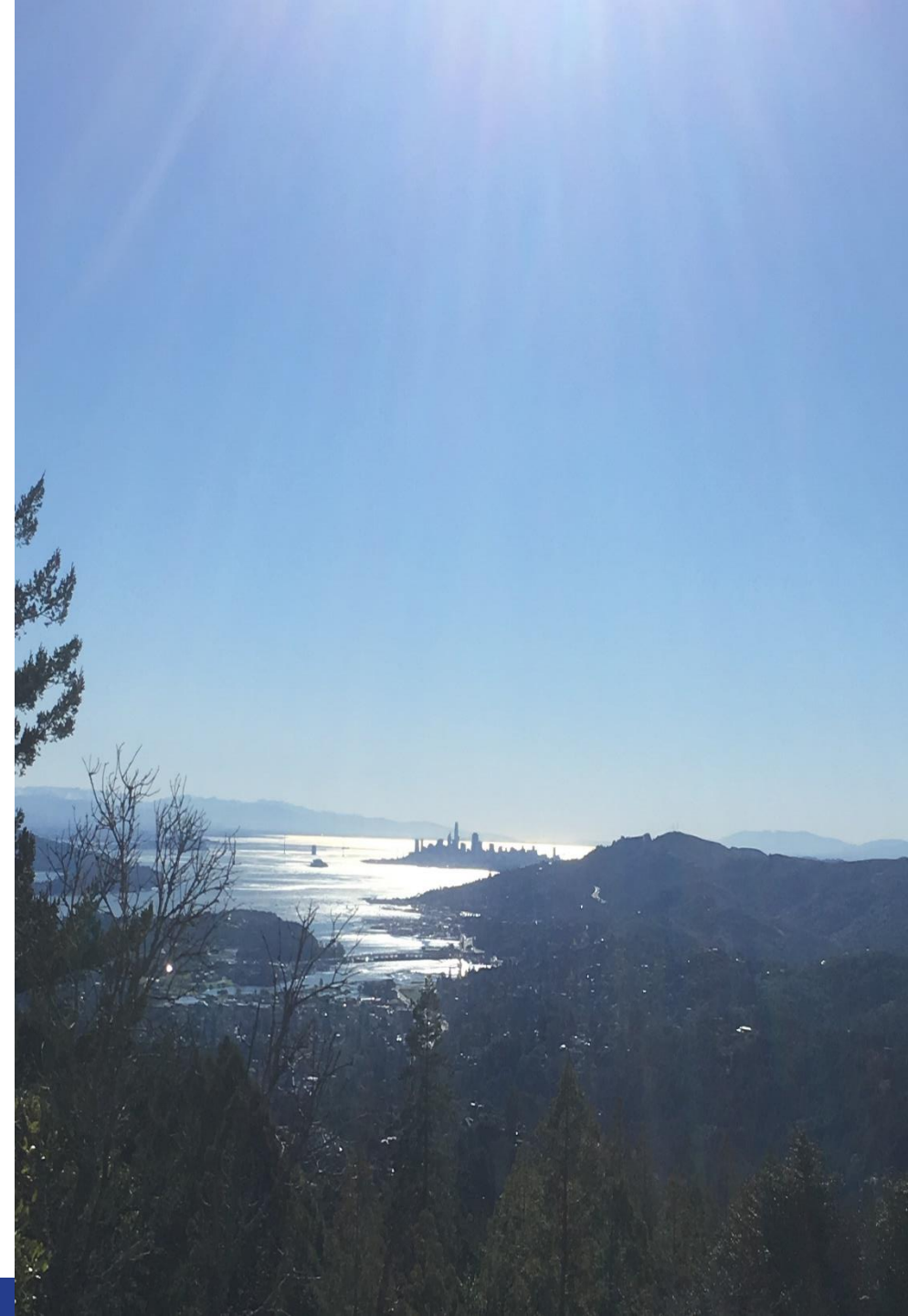
## SmartCare - Seeking Help

### 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.*

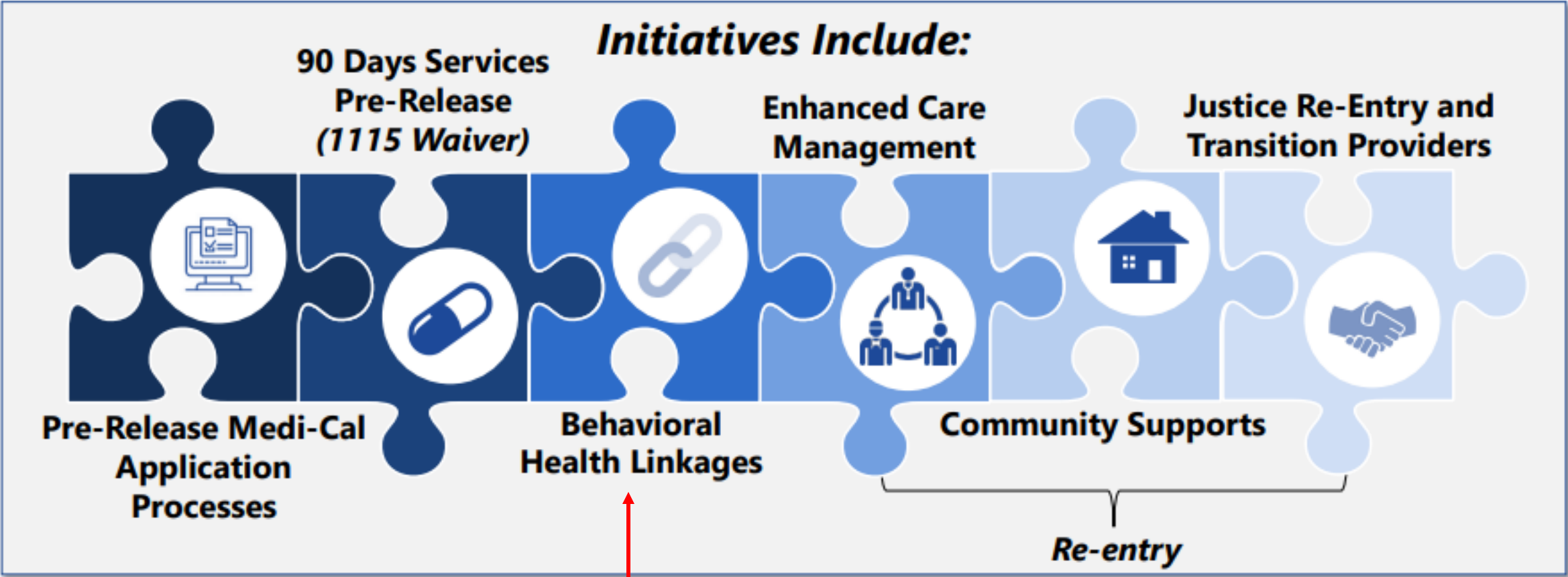
### SUD Office Hours:

- 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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