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DMC-ODS Contractor Meeting January 8, 2025



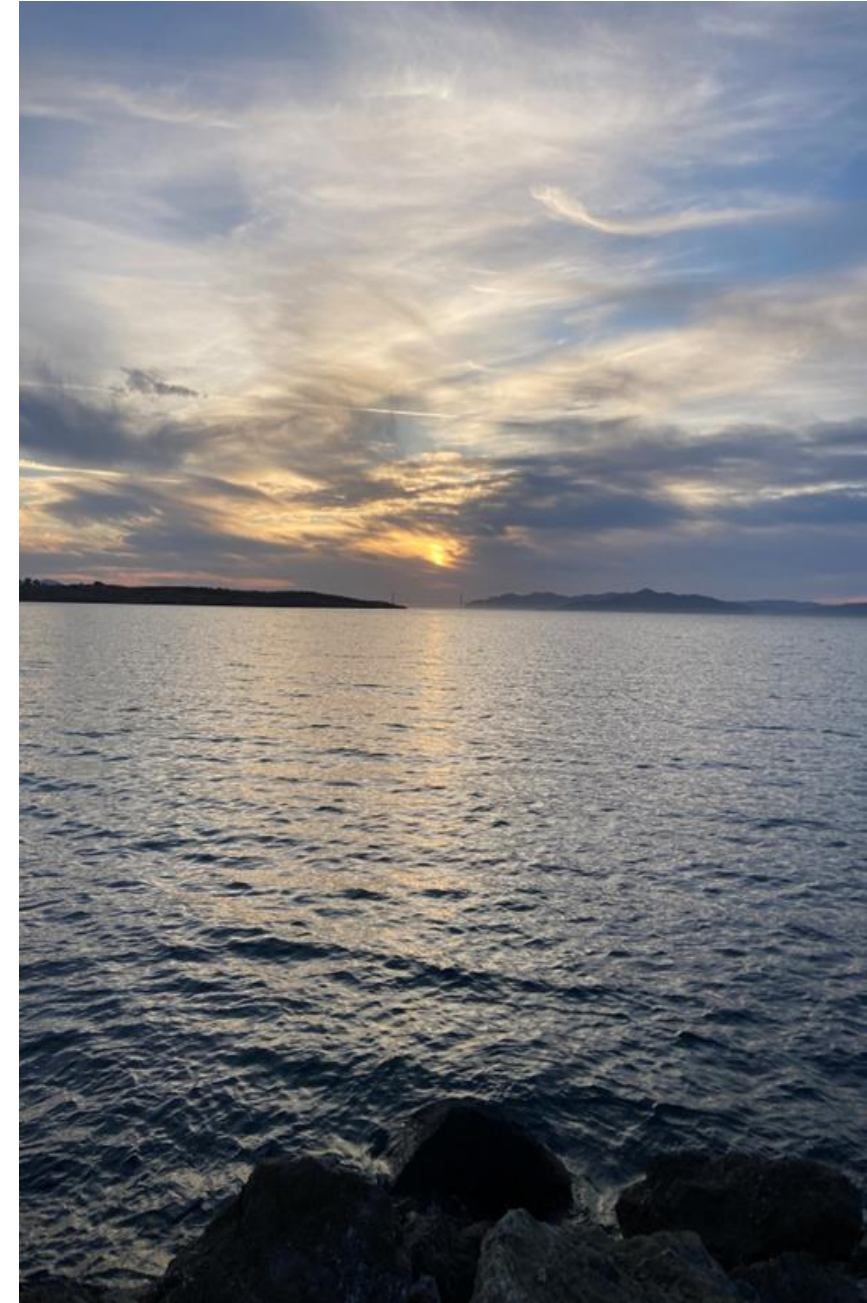
Agenda

- Welcome and Introductions
- Provider Updates/Announcements
- County Updates/Announcements
- Opioid Settlement Funding Review and Feedback
- Provider feedback

County Updates and Announcements

Resource Reminders:

- New Integrated Member Handbook:
www.marinbhrs.org/clients-caregivers/member-handbook
- [Link to Annual DMC-ODS and SUBG Training Recording](#) |
Passcode: E#CK751Y
- [DHCS Behavioral Health Information Notices \(BHINs\)](#)
- **AB 2081 - Disclosure Requirements for SUD Programs:**
Beginning 1/1/25, licensed/certified SUD Programs must disclose licensing/certification status on websites and admission forms, including a link to the [DHCS webpage](#) listing facilities on probation or with revoked/suspended licenses



County Updates and Announcements



- **Living Wage Ordinance:** \$18.70/hour (or \$17.20/hour if benefits provided) – Effective 1/1/25
- **Provider Site Visits – Changes from FY 23-24**
 - New DHCS/Marin BHP Integrated Contract– DHCS requiring review of CAPs and evidence (for contracts with Medi-Cal)
 - Providers can submit any additional documentation within five (5) business days after the Site Visit prior to report being finalized
 - Feedback on increasing focus on quality – how might we measure and address quality?

Billing Reminders

See Resource Slides for Additional Information

- All services must have an **active payer plan** on the date-of-service.
- **Service Entry & Billing Submission:** complete by the 10th to be included in monthly invoice
 - Ensure all SmartCare services have been moved from Scheduled and Show status. All services should be in *Complete, Cancel, No Show* or **Error status**.
 - To identify most resolvable issues that prevent payment:
 - Use the Services (My Office) List page and filter the “All Service Statuses” dropdown with *Scheduled* and *Show*. Services with Warnings or Errors will remain in *Show* status until the errors are resolved.
 - Use the Program Coverage report to see missing insurance, address, etc.
- Contact your contract manager with questions

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		



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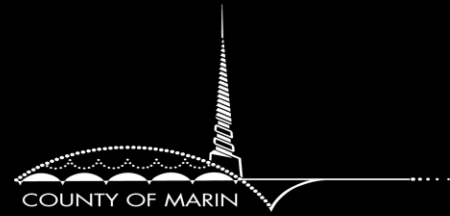
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Marin County Opioid Settlement Funding Community Presentation

An Overview & Invitation for Input



Presentation Overview

- Overview of Opioid Settlement Funding (OSF)
- How OSF can be used
- What OSF is funding in Marin now
- Allocating upcoming funding
- Proposed priorities for upcoming OSF
- Inviting your input & feedback (Survey Link)
- Next steps & resources

Overview of Opioid Settlement Funding (OSF)

- Pharmaceutical industry (manufacturers, distributors, pharmacies, consultant and strategists) is responsible for some portion of the opioid crisis
- Various lawsuits underway, some settled, some still in litigation
- States and local government that opted into the lawsuits will receive funds to address harms caused by opioid epidemic
- Funds must be used to “abate” i.e. lessen the impact of/reverse the opioid crisis
- Funds must be used in pre-approved ways i.e. “allowable uses”

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How OSF Can Be Used

“Opioid Remediation”

Defined in: National Opioid Settlement

The “care, treatment, and other programs and expenditures designed to (1) address the misuse and abuse of opioid products, (2) treat or mitigate opioid use or related disorders, or (3) mitigate other alleged effects of, including on those injured as a result of, the opioid crisis.

Funds may also be used to support reasonable related administrative expenses for opioid remediation activities

“High Impact Abatement Activities”

According to Department of Health Care Services (DHCS)

Table 1: High Impact Abatement Activities (HIAA)

No.	Activity
1	Provision of matching funds or operating costs for substance use disorder (SUD) facilities within the Behavioral Health Continuum Infrastructure Program (BHCIP)
2	Creating new or expanded SUD treatment infrastructure ²
3	Addressing the needs of communities of color and vulnerable populations (including sheltered and unsheltered homeless populations) that are disproportionately impacted by SUD
4	Diversion of people with SUD from the justice system into treatment, including by providing training and resources to first and early responders (sworn and non-sworn) and implementing best practices for outreach, diversion and deflection, employability, restorative justice, and harm reduction
5	Interventions to prevent drug addiction in vulnerable youth
6	The purchase of naloxone for local entities including for distribution and efforts to expand access to naloxone for opioid overdose reversals.

How OSF Can Be Used (in California)

“Core Strategies” – Exhibit E

Schedule A: Approved Uses

(sample – *not exhaustive nor verbatim*)

- A. Naloxone Use
 - 1. Expand trainings
 - 2. Increase distribution
- B. Medication Assisted Treatment (MAT)
 - 1. Increase distribution
 - 2. Provide education
- C. Pregnant and Postpartum Women
 - A. Expand screening
 - B. Expand services
- D. Expand Treatment for Neonatal Abstinence Syndrome (NAS)
 - A. Expand support for babies
 - B. Expand Continuum of care infants
- E. Warm Hand-Off & Recovery Services
 - 1. Begin MAT in hospital Emergency Departments (EDs)
 - 2. Provide wrap-around services
- F. Treatment for Incarcerated Population
 - 1. Provide treatment within jails
 - 2. Provide recovery support
- G. Prevention Programs
 - 1. Fund media campaigns
 - 2. Fund school programs
- H. Syringe Services
 - 1. Expand programs & services
- I. Data Collection & Research
 - 1. Analyze effectiveness of programs

Source: [OSF Allowable Expenditures](#)

How OSF Can Be Used (in California)

“Other Strategies” – Exhibit E

Schedule B: Approved Uses

(sample – *not exhaustive nor verbatim*)

Part I: Treatment

- A. Treat Opioid Use Disorder (OUD)
(14 examples)
- B. Support People in Recovery
(15 examples)
- C. Connections to Care
(16 examples)
- D. Needs of Criminal Justice Involved
(7 examples)
- E. Needs of Pregnant Women
(10 examples)

Part II: Prevention

- F. Prevent Over Prescribing
(8 examples)
- G. Prevent Misuse of Opioids
(12 examples)
- H. Prevent Overdoses (ODs) & Other Harms
(13 examples)

Part III: Other Strategies

- I. First Responders – Education & Support
(2 examples)
- J. Leadership, Planning & Coordination
(4 examples)
- K. Training – Staff, Programs, Infrastructure
(2 examples)
- L. Research – Surveillance, Data Collection
(6 examples)

Source: [OSF Allowable Expenditures](#)

What OSF is Funding in Marin Now: Initiatives

Examples:

- **Recovery Coaching** - expansion of navigation services & recovery support for people with Substance Use Disorders (SUDs)
- **Trauma Treatment** - new services for people with OUD
- **Prevention Education** - new middle and high school curricula
- **Naloxone Distribution & Training** - expansion across county
- **Toxicology Screening** – expanded for coroner to detect substance involved deaths
- **Wastewater Surveillance** - exploration of insights for community overdose prevention alerts
- **Naloxone Vending Machines** – added across the county & interactive map offered on website to locate free resources, access training, learn more

Visit: ODFreeMarin.org/OSF to learn more about allocation of settlement funding

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What OSF is Funding in Marin Now: Partners

Through RFP and contracting, *opioid remediation* work in Marin County, using OSF, is being led by community partners (>70% of OSF) & County programs (<30% OSF)

Examples:

- **Marin Treatment Center** – Implement new trauma treatment services for individuals with OUD
- **Ritter Center**, in partnership with Marin Community Clinics – Hire two Recovery Coaches to provide substance use care navigation and support
- **Marin City Health & Wellness** – Provide training to clinicians in evidence-based trauma treatment (Eye Movement Desensitization and Reprocessing - EMDR) for individuals with OUD
- **Marin County Office of Education (MCOE)** – Teacher training of Safety First curriculum and follow up regarding applications and lessons learned
- **Marin County Coroners Office** – Expanded toxicology testing
- **Waste Water Treatment Plants** in Marin – Testing wastewater to identify use trend and new or emerging threats
- **OD Free Marin** - website tools, online trainings, coalition coordination

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Allocating Upcoming Funding

Marin anticipates approximately \$9.7M, spread over 6-15 years

- Pharmacy Settlement
 - Projected Allocation
 - Years 1 – 5: \$988K/annually
 - Years 6 – 15: \$483K/annually

Visit: <https://odfreemarin.org/osf> to learn more about the Pharmacy Settlement

Proposed Priorities for Upcoming & Future OSF

Based on recommendations from:

- Executive Leadership of HHS Public Health
- Executive Leadership of HHS Behavioral Health & Recovery Services
- OD Free Steering Committee
 - Ad Hoc OSF committee

All priorities identified align with *Allowable Uses & Core Strategies for Opioid Remediation Activities* and are guided by the priorities from the California Department of Public Health

Proposed Priorities for Upcoming OSF

Expand Marin HHS capacity to support the following:

- SUDs–Related Crisis Response Services
- Naloxone Distribution and Harm Reduction Services
- Youth Prevention, Engagement Coordination, and Education
- Conducting Overdose & Suicide Prevention Fatality Review process
- Reaching & Supporting those most-at-risk for Overdose, including overdose survivors

This is a partial list of high-priorities
as of December 2024

Inviting Your Input & Feedback

- Marin HHS seeks to engage the broader community in prioritizing strategies. In addition, your input is being requested to identify *additional priorities to which a portion of the OSF will be allocated* based on community ideas and feedback.
 - Please take our survey to prioritize proposed strategies and provide your ideas and feedback about community needs related to opioid remediation.

Inviting Your Input & Feedback

Please complete the survey:

- Access the survey here: [Opioid Settlement Fund survey](#)
or by visiting the OSF webpage: <https://odfreemarin.org/OSF>

For questions or additional feedback, e-mail
OD Free Marin at: info@ODFreeMarin.org



Next Steps

Next Steps	Timeframe
1. Gather Community Feedback: Stakeholder Meetings, Communications & Survey	Late 2024-Early 2025
2. Provide Updates on Community Engagement: Survey Results with Identified Priorities	ODFreeMarin.org/OSF
3. Propose to Board of Supervisors: Spending Plan for Pharmacy Settlement	Spring 2025
4. Launch New OSF Initiatives: Conduct RFPs, Enter Contracts, Promote Efforts	Summer/Fall 2025

For updated information on OSF planning, expenditures and outcomes in Marin County, please visit ODFreeMarin.org/OSF



Requests for display accommodations may be made by
 Phoning 415-473-4381 (voice) CA Relay711 or by **by phoning your phone**
 Email at info@odfreemarin.org **mail@marincounty.org**

Opioid Settlement Funding Resources

ODFreeMarin.org/OSF



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[GET HELP](#) ▾

[GET THE FACTS](#) ▾

[GET INVOLVED](#) ▾

[NEWS](#) ▾

[CALENDAR](#)

[ABOUT](#) ▾

Explore the [Opioid Settlement Funds Page](#) & Take the [Community Survey](#) to help identify priorities!

How would you prioritize OSF allocations to fund the above listed opioid remediation initiatives? What additional priorities in Marin do you think need funding in this effort?

[OSF Presentation](#)

[OSF Survey](#)



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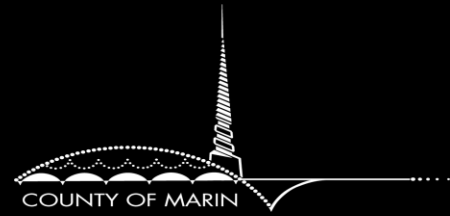


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Thank You!



Questions: info@odfreemarin.org
Learn more: odfreemarin.org/OSF

Provider Feedback

- OD Free Marin – Community Coalition model with HHS helping as backbone organization
 - Intervention, Treatment, and Recovery Action Team
 - How to make it relevant/useful to our providers?
- Accessing Mild to Moderate Mental Health Services
- CPT/Procedure Codes available in contracts and/or SmartCare
- Following up after Emergency Dept. visit or non-fatal overdose 911 call – provider alerts





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RESOURCE SLIDES

Please share with applicable staff

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	
Marin County				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	Add
Medi-Cal DMC				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	Add
Medi-Cal DMC				<input type="text"/> 	<input type="text"/> 	<input type="checkbox"/>	DMC 	Add
Medi-Cal MH				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	MH	Add

Resource Reminder: Medi-Cal Eligibility Re-determinations

Who:

- Public Assistance (PA) Contact for SUD Providers: **Peter Funk** (peter.funk@marincounty.gov)

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 columns for Plan Name, Start Date, End Date, and a 'Set End Date' button. A blue arrow points from the text in the list group to the 'Plan Time Spans' section of the screenshot.

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: **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)

Service Detail | **Billing Diagnosis** | **Authorization(s)**

Documentation Time: Days

Evidence Based Practices:

Transportation Service:

Override Charge Amount Overridden By:

Override Errors Overridden By:

Interpreter Services Needed

Warnings / Errors

Date	Error Type	Error Message	Next Step
No data to display			

Custom Fields

Interpreter Service

Interpreter has been scheduled Yes No Language:

Interpreter Agency Scheduled:

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)

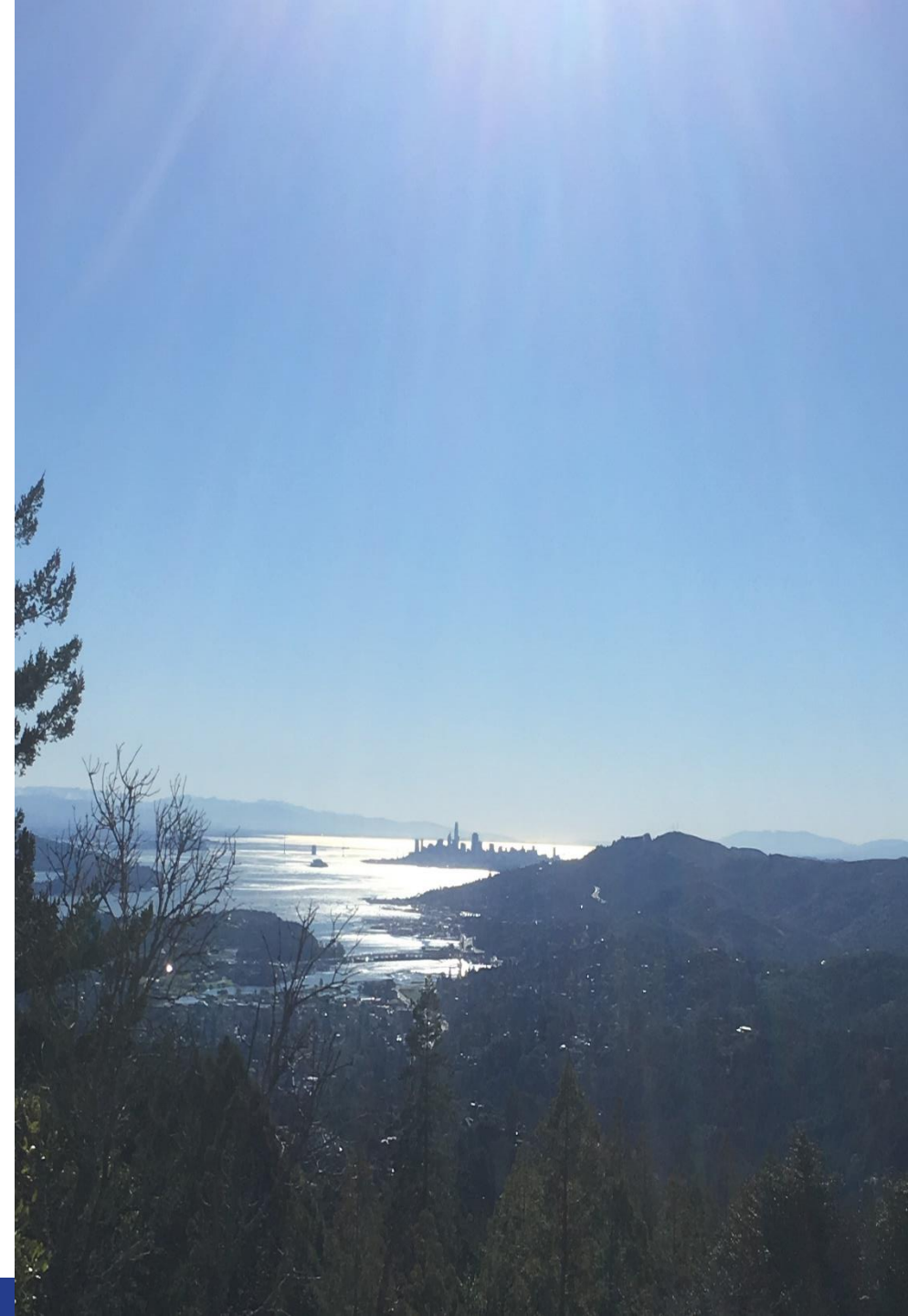
SmartCare - Seeking Help

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 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:

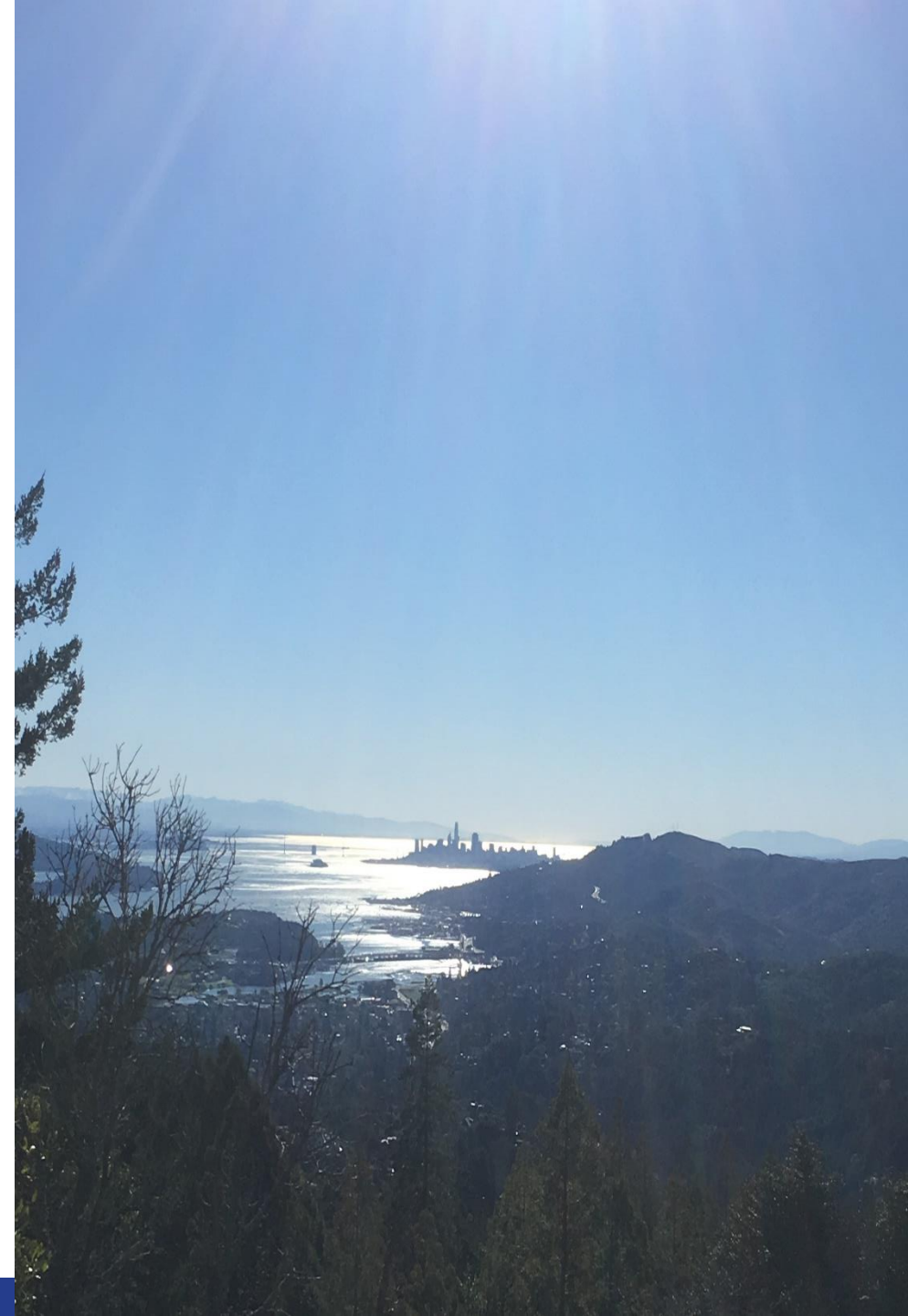
Use the [Marin BHRS EHR Support Request](#) /ticketing system to submit all new inquiries. The BHRS EHR support email should be used to respond to additional EHR requests to previously submitted tickets.

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

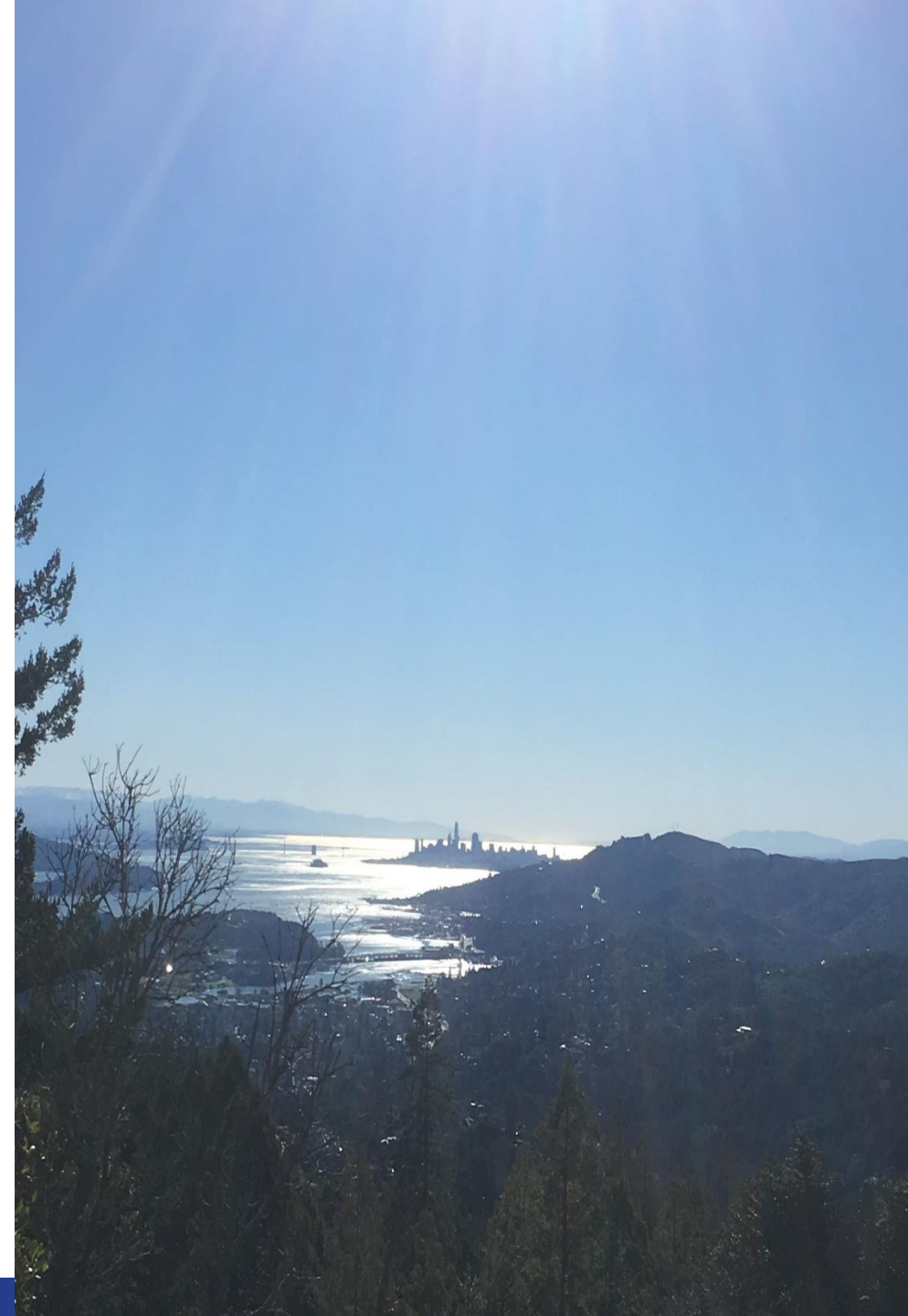
Ongoing Clinical Support:

BHRSQM@MarinCounty.org

- 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.



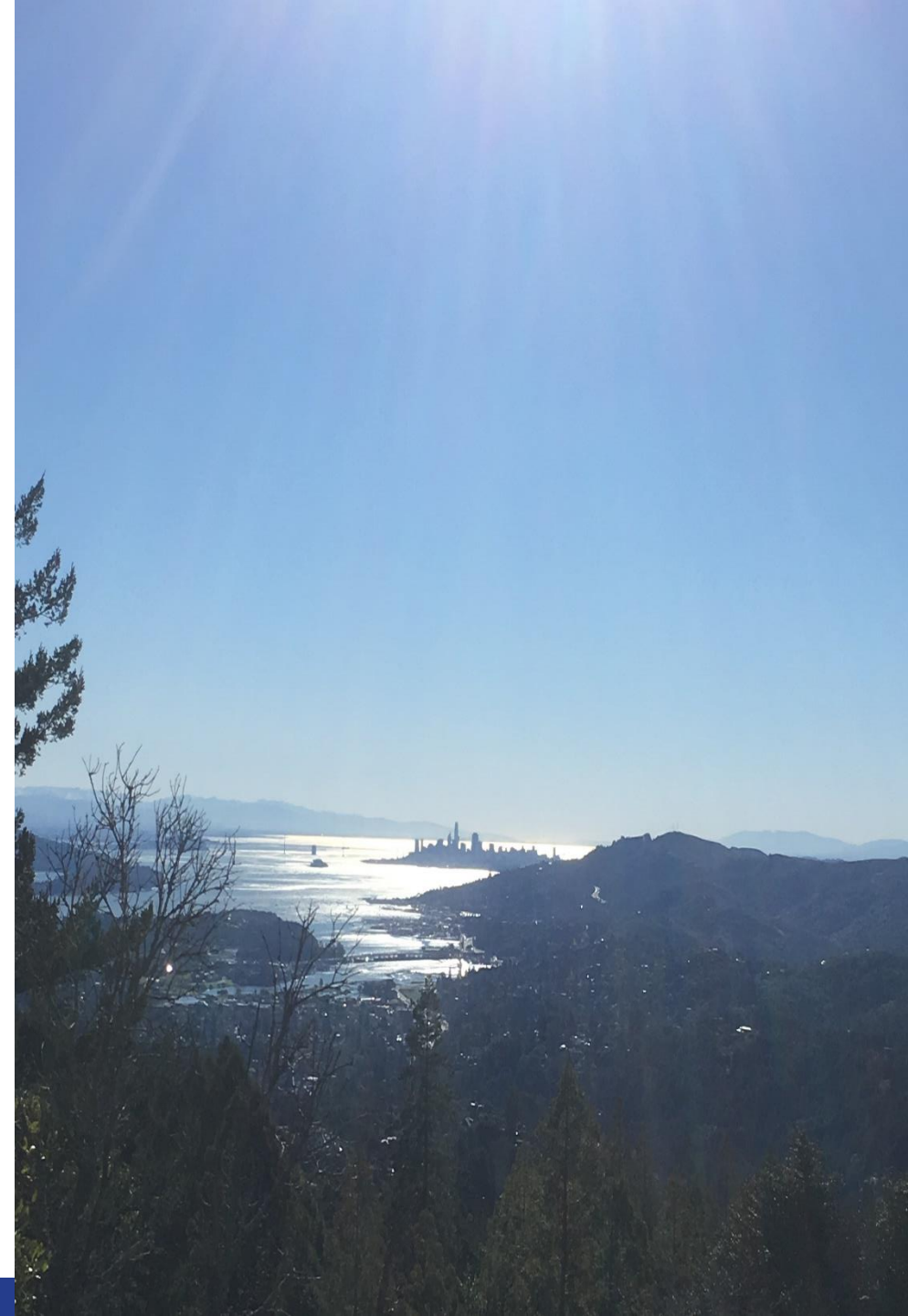
SmartCare - Seeking Help

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.*

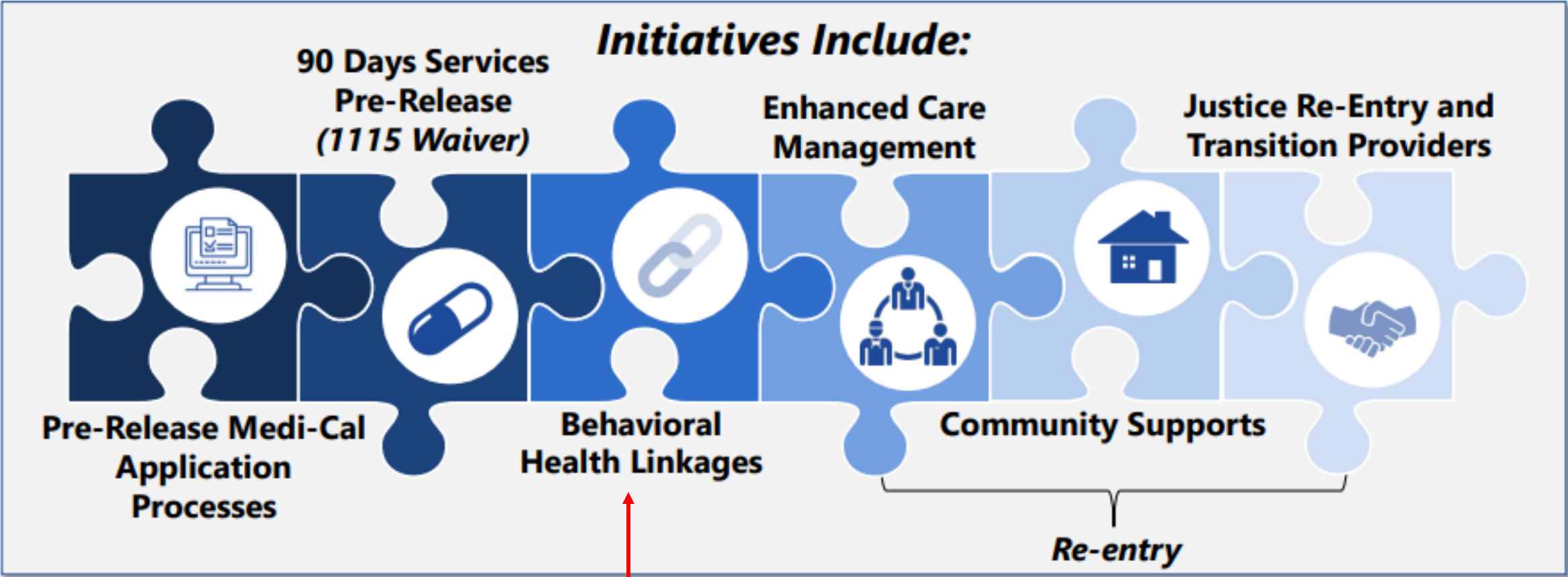
SUD Office Hours:

- We have resumed [SUD Office Hours](#) on the 2nd 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.



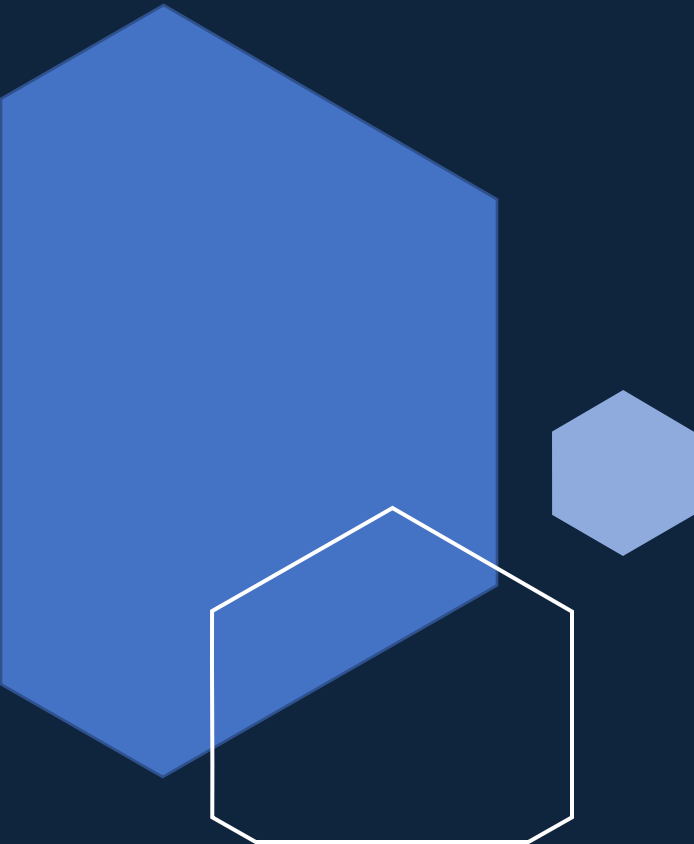
What is CalAIM Justice Involved?

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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