Important update from DHCS

Certified Peer Support Specialist Certification Exam

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- CalMHSA, in partnership with DHCS, is releasing the initial administration of the Medi-Cal Peer Support Specialist Examination. The initial administration of the exam is for *early test takers* who met certification requirements and elected to participate in the initial administration phase of the exam between **September 23 – October 14, 2022**.
- The Certification Exam will be made available for *ALL test takers* starting **December 2022.**
- For more information on the exam, please refer to the Preparation Guide.

Reminder: CalMHSA Trainings for DMC-ODS

- All Medical Directors and direct service staff are required to complete the trainings as well as supervisors and managers of direct service staff.
- OTP programs are required to take the following trainings:
  - CalAIM Overview
  - Access to Service
  - Care Coordination
- All other DMC-ODS providers are required to complete the following CalMHSA trainings:
  - CalAIM Overview
  - Assessment
  - Diagnosis & Problem List
  - Progress Notes
  - Discharge Planning
  - Access to Service
  - Care Coordination
- Trainings shall be completed by 2/15/2023. QA is monitoring attendance monthly.

Update: DHCS CalAIM FAQ

DHCS has released the CalAIM Behavioral Health Initiative FAQ, which is intended to be a resource in the implementation of CalAIM behavioral health initiatives, including Documentation Redesign. This will be updated on a regular basis and a new webpage devoted to addressing CalAIM Behavioral Health FAQs is coming soon. For more information, please visit the CalAIM Behavioral Health webpage. A "CalAIM FAQ" tab is available on the Optum site where these FAQs will also be posted.

CalAIM Highlights

- SUD QA is developing an additional FAQ focused on CalAIM documentation standards.
  - The CalAIM FAQ includes questions gathered from QI Matters and SUD QA Office Hours.
  - Expected to be posted by 10/28/22 under the "CalAIM FAQ" tab on the Optum Website.

UTTM Tip of the Month

Just because treatment planning documentation standards have changed due to CalAIM, communication with participants about their plan of care is still something that should be occurring.

- Review assessment information to determine problem list items.
- Review problem list with participant and discuss individualized plan of care.
- Reminder that there are no changes for OTP providers.

Reminder: QIP Meeting Date Changes
- Due to meeting conflicts and holidays, several upcoming QIP meetings have been rescheduled to another date.
    - October – rescheduled to 10/20/22
    - November – rescheduled to 11/17/22
    - December – rescheduled to 12/15/22

SUD Quality Improvement Partners (QIP) Meeting
The QIP is a monthly meeting for all DMC-ODS Providers to get the most up to date information on all things Quality Assurance, Management Information Systems and Performance Improvement. The expectation is that this meeting is attended by all DMC-ODS contracted providers. The program manager and quality assurance staff monthly attendance is expected as part of your contract. If you are unable to attend, please send a designee to cover.
    - Date: **Thursday, October 20, 2022**
    - Time: 10:00 a.m. to 11:30 a.m.
    - Where: via WebEx - Participation information sent by email prior to the meeting.

Update: Annual DMC-ODS Training
- QA has posted the PowerPoint slides of the annual DMC-ODS training to the Optum site under the "Training" tab.
- Posting includes a document for Q&A related to topics shared during the training.
- Training attendance has been reviewed to ensure all programs participated. Programs identified with no attendees will be notified and reminded to review the training to remain compliant with the annual training requirement.

Mega Regs/Network Adequacy: System of Care Application (SOC) Reminders
- As part of Network Adequacy requirements (BHIN 22-032 and 22-033), providers have been asked to utilize the System of Care (SOC) application to collect the information needed to assist the County with routine submission.
- Providers are required to **frequently** update their current profile (community-based locations, cultural competency hours, etc.) in the SOC application **as changes occur** to show accurately on the provider directory.
- Providers and Program Managers are required to attest to all SOC information **monthly**.
- New hires and transfers are required to register **promptly**, and attest to information once registration is completed.
- For **tips, FAQs, and other resources** on how to complete the registration and/or attestations, visit the SOC Tips and Resources website.
- If you have any questions regarding registration, login, or the SOC Application, please reach out to the Optum Support Desk at 800-834-3792, Option 2, or email sdhelpdesk@optum.com.

The County of San Diego is pleased to announce we will soon be implementing EPSDT 0.5 services
- Services are intended for beneficiaries under the age of 21:
    - Who are at risk of developing a substance related problem or for those whom there is not yet sufficient information to diagnose a substance use disorder.
    - Identified youth who are at risk for substance use and misuse and seek to stop or reduce before it escalates.
    - Includes: assessment, education, screening, brief intervention, and other interventions aimed at reducing or preventing substance misuse.
    - A tip sheet is in the process of being posted to the Optum site under the "Toolbox" tab.

Peer Plan of Care Co-signatures
Per BHIN 22-019, peer support services must be based on an plan of care approved by any treating provider who can render reimbursable Medi-Cal services.
- This requirement indicates that peer plans of care should be co-signed by any treating provider who can render reimbursable Medi-Cal services.
- The need for a co-signature is linked to the peer role. Therefore, if the Peer staff member holds both peer and SUD counselor credentials, they would still need to obtain a co-signature on plans of care.

SUDURM Updates
Adolescent Initial Level of Care Assessment
- Change in timelines of completion
  - Outpatient programs – To be completed within 30 calendar days from day of admit or within 60 calendar days if under the age of 21 or experiencing homelessness.
  - Residential programs – To be completed with 10 calendar days from day of admit.
- Added section for "If referral is being made but admission is expected to be DELAYED, reason: (Must select one of the reasons below, if applicable)"
- Added Nicotine or Tobacco screening questions to Dimension 1
- Added Provisional Diagnosis Narrative for LPHA

Physician's Direction Form
- Added Medical Director's Printed Name to all sections
- Added Physical Examination Results section
  - Medical Director will check this box when the Medical Director reviews the client's physical examination results that were obtained in the last 12 months. If checked, the results must be included in the chart.
  - Medical Director's Printed Name, Signature, and Date: Medical Director reviewing client's file must print name, sign, and date.
- Both updated documents are available on the Optum site under the "SUDURM" tab.

Tobacco Use Disorder and Additional Resources
- On January 1, 2022, Assembly Bill (AB) 541 went into effect, requiring SUD recovery or treatment facilities to assess for and take actions to address client tobacco use disorders.
- In May 2022, DHCS issued information notice BHIN 22-024 to provide clarification and resources to DMC-ODS programs regarding the implementation of AB 541.
- In addition to requiring assessment for tobacco use disorders, for those identified with a tobacco use disorder, the program will need to:
  - Provide information to the client on how continued use of tobacco products could affect their long-term success in recovery from a substance use disorder
  - Recommend treatment for tobacco use disorder in the treatment plan
  - Offer either treatment, subject to the limitation of the license or certification issued by the department, or a referral for treatment for tobacco use disorder
- The California Department of Public Health (CDPH) California Tobacco Control Program has published "Understanding Assembly Bill (AB) 541: Assessment of Tobacco Use Disorder in Substance Use Disorder Recovery or Treatment Facilities" to provide education and resources for Tobacco Use Disorder (TUD) screening, assessment, and treatment, as well as the adoption of tobacco-free campus policies.
- Resources related to smoking and tobacco cessation have been provided under the "Toolbox" tab on the Optum website.

Reminder: Dependent vs Independent Living
- Per CalOMS, information about a client's living status at admission and discharge is required. It is important to understand and explain each definition to the client while obtaining CalOMS information.
- **Dependent Living**: Clients living in a supervised setting such as, residential institutions, prison, jail, halfway houses or group homes and children (under age 18) living with parents, relatives, guardians or in foster care. NOTE – Recovery Residences and Sober Living should be considered "dependent" living.
- **Independent Living**: This includes individuals who own their home, rent/live alone, live with roommates, and do not require supervision. These people pay rent or otherwise contribute financially to the cost of the home/apartment. This also includes adult children (age 18 or over) living with parents.
- When CalOMS questions are not understood or are not correctly defined for clients, the data obtained and reported to DHCS is incorrect. Refer to the CalOMS Tx Collection Guide for additional information.

Reminder: Interim Services

- Programs shall be responsible for keeping records of interim services and documenting efforts for each client. Programs may be asked to provide evidence of interim services.
- Monitoring is shifting from monthly with QA to annual monitoring with COR teams.
- For more information on Interim Services, see the tip sheet posted on the Optum site under the "Monitoring" tab.

Management Information Systems (MIS)

CalOMS – Open Admissions Errors Email

- If the client is due to have an annual update; however, the client is going to be discharged, ONLY create the discharge
  - The annual update and discharge cannot be submitted to the state within the same extract, this will cause a 475 error "Annual Update cannot be submitted after the matching Admission record has been Discharged"
  - CalOMS extracts occur at a minimum twice a month – 1st and 15th of the month.

Important – Contact Screen (Access Times)

- These three fields – 1st Available Intake/Screening Appt, 2nd Available Intake/Screening Appt, and 3rd Available Intake Screening Appt are intended to capture the Facility's availability to offer an appointment, and is **not** to be based on the perspective client's availability.
  - Should always be the facility's actual availability.

- The field 1st Accepted Intake/Screening Appt is intended to capture an appointment the perspective client accepted.
  - The accepted date may, OR may not be one of the facility's 1st, 2nd, or 3rd available appointments.
  - If the Disposition field is "Made an Appointment", the 1st Accepted Intake/Screening Appt field should contain the actual date the client accepted.
  - If the Disposition field is anything other than "Made an Appointment", user should use the work-around date 1/1/2025.
  - This work-around date **must not** be used in the facility's three availability fields.

Revised - SanWITS Encounter Diagnosis Section Change – anticipated Nov 2022

- The diagnosis will populate the encounter screen from the diagnosis list but remain editable.
- This change is in preparation of forthcoming Contingency Management pilot.
- In addition, Diagnosis will be assigned through either the Adolescent ILOC (when applicable) or through the Diagnosis List.
- This will be temporary change until the new problem list is added to SanWITS.

SanWITS Quarterly Users Group Meeting – Let's Get Together!

Purpose of the Users Group - review and educate State Reporting for CalOMS, ASAM, DATAR, and Capacity, SanWITS updates, changes in system requirements, Billing & QA updates, and address User concerns.

- Next meeting: Monday, Oct 17, 2022, at 9:00 a.m. – 11:00 a.m.
- RSVP please, WebEx invite will be sent
- At least one representative from each facility is highly recommended
- Quarterly meetings are expected to occur on the 3rd Monday each quarter (adjusted for holidays)
  - Jul, Oct, Jan, Apr
- ASL Interpreters have been requested for each meeting

We welcome and encourage you to send us agenda items to be covered during our User Group Meetings
SUD_MIS_Support.HHSA@sdcounty.ca.gov

Billing Unit - SanWITS Billing Classes

As most of us are still adjusting to remote work, we're also learning new ways to continue servicing our customers. The SUD Billing Unit will continue conducting the billing training online.

- Our team will send an email to all programs to inquire what web conferencing platform or application you use for audio and/or video conferencing or training. Currently, the Billing Unit uses the Microsoft Teams application.
- Also, to schedule your billing training or if you have billing questions, please call our main line: 619-338-2584. You can also email us at ADSBillingUnit.HHSA@sdcounty.ca.gov.
- Prerequisite required: SanWITS lntro to Admin Functions training and one of the following encounter trainings – 1) Residential -Bed Management & Encounters training, or 2) Outpatient/OTP Group Module & Encounters training

SanWITS Virtual Trainings Provided

- Register online with RegPacks at: https://www.regpack.com/reg/dmc-ods
- Registration will close 7 days prior to the scheduled class date to allow time for individual staff account setups and other preparation needed.
- Attendees for Virtual Training will receive an email on the morning of training between 8:30 AM – 8:45 AM
    - Trainer email with training materials, resources, and specific instructions for virtual class
    - If staff do not receive emails by 9:00 AM, email sdu_sdtraining@optum.com to get the issue resolved.
- Type of Training Classes:
    1) SanWITS – Intro to Admin Functions (IAF) – SanWITS functions that are applicable to All program types
    2) Residential Facilities - Bed Management & Encounter Training
    3) Outpatient / OTP Facilities – Group Module & Encounters Training
    4) SanWITS Assessments (SWA)– designed for direct service staff who complete Adolescent Initial Level of Care (LOC)assessments, Discharge Summary, and Risk and Safety Assessment
- **All required forms are located on the "Downloadable Forms" tab.**
  Note: If the 3 forms are not fully processed by MIS 7 days prior to the scheduled training, staff will not be able to attend training regardless of receiving training confirmation.
- All credentials and licenses will be verified with the appropriate entities for SanWITS access**.**
- Upon completion of training, competency must be shown to gain access to the system. If competency is not achieved, further training will be required.
- **Staff are highly recommended to read the training packet thoroughly before entering information into the Live environment**
- Please remember, if unable to attend class, cancel the registration as soon as possible.

Reminder: For general information on COVID-19

Including the current case count in San Diego County, preparedness and response resources, and links to information from the California Department of Public Health (CDPH), Centers for Disease Control and Prevention (CDC), and the World Health Organization (WHO), please visit the County of San Diego COVID-19 webpage.

For local information and daily updates on COVID-19, please visit **www.coronavirus-sd.com**. To receive updates via text, send **COSD COVID19** to **468-311**.

Coronavirus Disease 2019
COVID-19

Reminder: COVID-19 | Behavioral Health Services (BHS) Provider Resources

- Behavioral Health Services (BHS) is committed to keeping our providers updated with emerging information related to the Coronavirus Disease 2019 (COVID-19) response.
- Follow the link to access the BHS Provider Resources Page which is updated regularly with the most recent communications and resources that have been sent to BHS providers.

Reminder: DHCS COVID-19 Response Resources

- The California Department of Health Care Services (DHCS) has frequently updated resources regarding provision of Behavioral Health Services during the COVID-19 crisis. For more information, visit the DHCS COVID-19 Response page at: https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-response.aspx

Communication

- Billing questions? Contact: ADSBillingUnit.HHSA@sdcounty.ca.gov
- SanWITS questions? Contact: SUD_MIS_Support.HHSA@sdcounty.ca.gov
- DMC-ODS Standards/SUDPOH/SUDURM questions? Contact: QIMatters.HHSA@sdcounty.ca.gov
- CalAIM and/or Peer related Q&As? Contact: bhs-hpa.hhsa@sdcounty.ca.gov

Is this information filtering down to your counselors, LPHAs, and administrative staff?

Please share the UTTM – SUD Provider Edition with your staff and keep them *Up to the Minute*!

Send all personnel contact updates to **QIMatters.hhsa@sdcounty.ca.gov**