

System of Care Application Tip Sheet for Program Managers

Upon login you should see the following view for **MH** Providers



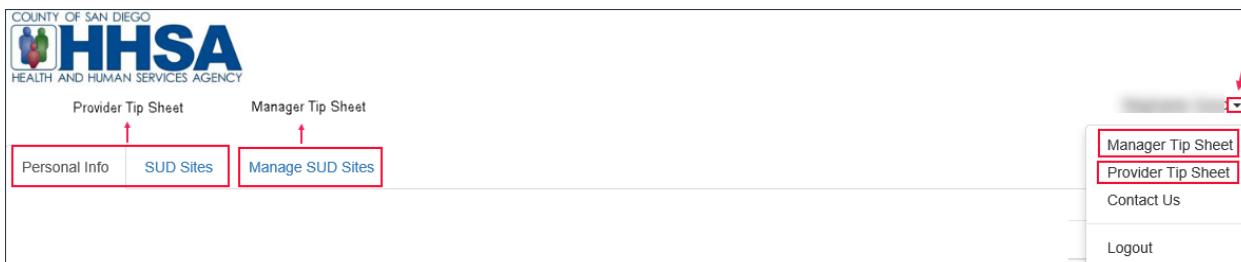
Provider Tip Sheet Manager Tip Sheet

Personal Info MH Sites Manage MH Sites

Manager Tip Sheet Provider Tip Sheet

Contact Us Logout

Upon login you should see the following view for **SUD** Providers



Provider Tip Sheet Manager Tip Sheet

Personal Info SUD Sites Manage SUD Sites

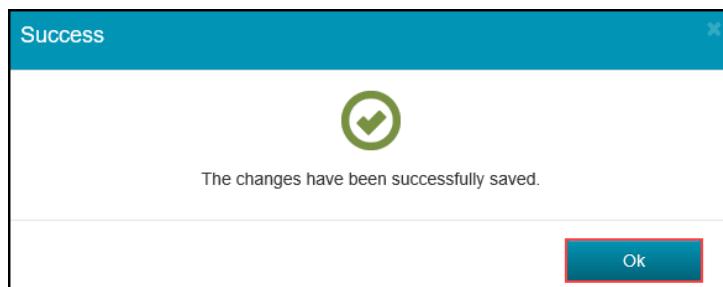
Manager Tip Sheet Provider Tip Sheet

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Please note, managers who provided a direct service will have a total of three tabs, **Personal Info**, **MH/SUD Sites**, and **Manage MH/SUD Sites**. All tabs will need to be reviewed and completed. Refer to Provider Tip Sheet for assistance in reviewing **Personal Info** and **MH/SUD Sites**.

Saving your entries:

1. Make sure to save your data as you complete each section for each subunit. **If you do not save as you go, you will time out and lose your data.** The system does not provide a time out warning screen.
 - a. Each time you save, you will receive a successfully saved message confirming your changes were saved.



Manage MH Sites

1. Tab will show each subunit/facility the Manager manages and has CCBH/SanWITS access to.
 - a. **Each subunit** must be updated.
 - i. The sites are in numeric order.
 - ii. The first site is automatically selected and can be seen with a dark border and font.

2. MH - Subunit Information/ SUD- Facility Information

a. MH- Subunit Information

- i. Review and update all fields as appropriate.
- ii. Certain fields such as Legal Entity, CCBH Unit ID, Unit Name, CCBH Subunit ID, Subunit Name, NPI Number Type 2, Provider Number, and DEA Number are not editable. If the information is incorrect, please contact the Optum Support Desk.

Subunit Information

Legal Entity	
CCBH Unit ID	
Unit Name	
CCBH Subunit ID	
Subunit Name	
NPI Number Type 2	
Provider Number	
DEA Number	
Urgent Wait Time (Hrs) *	0
Non-Urgent Wait Time (Bus. Days) *	0
Accepting New Referrals *	Yes
Profit Status *	(Select One)
Facility Type *	(Select One)

b. SUD – Facility Information

- i. Review and update all fields as appropriate.
- ii. Certain fields such as Agency Name, Agency ID, Facility Name, Facility ID, NPI Number Type 2, DMC Certification Number, DEA Number are not editable. If information is incorrect please contact [SUD MIS Support.HHSA@sdcounty.ca.gov](mailto:SUD_MIS_Support.HHSA@sdcounty.ca.gov).

Facility Information

Agency Name	
Agency ID	
Facility Name	
Facility ID	
NPI Number Type 2	
DMC Certification Number	
DEA Number	
Urgent Wait Time (Hrs) *	0.0
Non-Urgent Wait Time (Bus. Days) *	0.0
Accepting New Referrals *	
Profit Status *	
Facility Type *	

3. Treatment Location Information

- a. Review and update all fields as appropriate.
 - i. Certain fields such as Treatment Location Name, and Address are not editable. If the information is incorrect:
 - MH- Please contact your programs COR or QI Matters.
 - SUD- Please contact SUD_MIS_Support.HHSA@sdcounty.ca.gov
 - ii. Public Phone #
 - The phone number that clients can use to contact the treatment site.
 - iii. Private Phone #
 - The phone number the county, SOC administration, and other professionals will use to contact the treatment site.
 - Private Phone number could be the program manager's assigned work cell phone.
 - iv. Public Email
 - Site-specific work email address that will be viewable in the (public) Provider Directory.
 - v. Private Email
 - The professional email address that would be used when the County or Optum wants to contact the program through the SOC application regarding any SOC submission requirements information.
 - vi. Distance to Closest Public Transportation
 - How far is the closest bus stop, trolley, or train station?
 - Select from the drop-down menu.

① Treatment Location Information

① Treatment Location Name	[Redacted]
① Street	[Redacted]
① Suite	[Redacted]
① City	[Redacted]
① State	[Redacted]
① Zip Code	[Redacted]
① County	[Redacted]
① Public Phone # *	[Redacted]
① Private Phone # *	[Redacted]
① Fax #	[Redacted]
① Public email *	[Redacted]
① Private email *	[Redacted]
① Website	[Redacted]
① Distance to Closest Public Transportation	<input type="text"/> 

4. Language Capacity

- a. The information displayed is from an aggregated list of languages reportedly spoken by rendering providers of the site.
- b. If any other languages provided at this site, please specify in **Other Language Services Available**.

Language Capacity

Arabic	Poor
Armenian	N/A
Cambodian	N/A
Cantonese	N/A
English	Fluent
Farsi	N/A
Hmong	N/A
Korean	N/A
Mandarin	N/A
Other Chinese	N/A
Russian	N/A
Spanish	N/A
Tagalog	N/A
Vietnamese	N/A
American Sign Language	N/A

Other Language Services Available



5. Age Group and Hours of operation

- a. Age Group (0-20, 21+, or all ages)
 - i. This is **un-editable** and is aggregated from all providers who work at the site.
- b. Hours per Week
 - i. Represents the number of hours per week the site can serve Medical clients.
 - Allows any values between 1 and 168.

Age Groups and Hours of Operation

Age Group

All Ages

Hours per Week *



6. Provider Types and MH-Service Types/SUD- Modalities

- a. The information displayed is from an aggregated list of Provider Types and Service Types/Modalities reported by rendering providers of the site.
 - i. Wrong **MH-Provider Types** can be corrected via a modify ARF to update Licensure/Credentials.
 - ii. Wrong **MH-Service Type** can be updated via the Provider's MH Sites tab.

Provider Types
Associate Clinical Social Worker
Licensed Clinical Social Workers
Licensed Physicians
Licensed Psychiatrists
Licensed Vocational Nurses
Mental Health Rehabilitation Specialists
Nurse Practitioners
Other Qualified Providers

Service Types
Case Management
Crisis Intervention
Mental Health Services
Medication Support

- iii. Wrong SUD – **Provider Types** can be corrected by contacting SUD MIS via email.
- iv. Wrong SUD-**Modalities** can be updated via the Provider's SUD Sites tab.

Provider Types
Certified Substance Use Disorder Counselors
License Eligible Practitioners working under the supervision of Licensed Clinicians
Licensed Marriage and Family Therapists
Registered Substance Use Disorder Counselors

Modalities
Intensive Outpatient Clinic
Outpatient Drug Free Clinic

Licensed Capacity for OTP	0
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7. Other Options

- a. Review and select any other treatment options available at this treatment location.
 - i. ADA Compliant for Physical Plant
 - Is this treatment location compliant with American Disability Act (ADA) for physical plant?
 - If this is not checked, the state will require proof of exemption.
 - ii. Teaching Facility
 - A teaching facility is a hospital or organization that sponsors graduate medical education (GME) or participates in GME.

Other Options	
ADA Compliant for Physical Plant	<input type="checkbox"/>
TDD/TTY Equipment Available	<input type="checkbox"/>
Telehealth Services Status *	No Telehealth Services <input type="button" value="▼"/>
Teaching Facility	<input type="checkbox"/>

8. Medi-Cal Clients

- This treatment location's capacity for serving Medi-Cal clients.
 - Maximum
 - This is the **maximum** number of Medi-Cal members the site will accept.
 - Current
 - This is the current number of Medi-Cal members the site **currently** serves.

Medi-Cal Clients	
Max *	Current *
<input type="text"/>	<input type="text"/>

9. Medi-Cal Certification Info

- Confirm the Effective and Expiration dates of this site's current Medi-Cal Certification with the county.
 - If unsure of specific dates, please contact your COR or QIMatters.

Medi-Cal Certification Info	
Certification Effective Date	<input type="text"/>
Certification Expiration Date	<input type="text"/>

10. Work Schedule

- Days and hours of work for this treatment location.
 - For each day select Insert New.



- Site Name
 - Is not editable
- Day of Week
 - Select a day from the drop-down menu.
- Open Time
- Close Time
- Save

A screenshot of a modal dialog box titled 'Work Schedule Information'. It contains the following fields:

- Site Name:** A text input field.
- Day of Week ***: A dropdown menu labeled '(Select one)' with a red box highlighting the dropdown arrow.
- Open Time ***: A time input field consisting of three dropdown menus: hour (08), minute (00), and AM/PM (AM).
- Close Time ***: A time input field consisting of three dropdown menus: hour (05), minute (00), and AM/PM (PM).

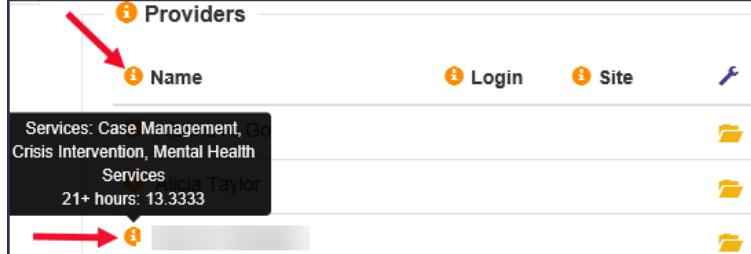
At the bottom are two buttons: a teal 'Save and Attest' button and a grey 'Cancel' button. A red arrow points to the 'Save and Attest' button.

- Once all entries have been entered, you will be able to review the complete Work Schedule.
 - If need to add another day, simply click Insert New.
 - If need to edit the Open or Close time, click edit.
 - If need to delete, click Delete.

Day of Week	Open	Close	
MON	8:00 AM	5:00 PM	Edit  
TUE	8:00 AM	5:00 PM	Delete  
WED	8:00 AM	5:00 PM	 
THU	8:00 AM	5:00 PM	 
FRI	8:00 AM	5:00 PM	 

Insert New 

11. Providers

- Review all providers' actions under this site.
 - Hover over the tool tip on the left to view a brief summary of provider's actions as displayed below.
 
 - Login** shows when the provider last logged in to the site. If they never signed in, the field will be empty.
 - Site** shows the last time the MH Site was attested to by provider. Field will be empty if the provider has not made any changes.
 - To view the information made to the **Personal Info** tab, click on the folder icon, **Details**.
 - Wrench** Icon indicates Actions. The type of Actions as seen next to each providers name such as details, edit, and email.

Providers	Name	Login	Site	
				

- v. **Yellow folder** icon will show the full info of the provider, including from the Personal Info tab.
- vi. **Pen icon is for Edit** () the manager can edit and attest on behalf of prescribers.
 - This action can only be done for prescribers.
- vii. **Green Envelope** icon is for Emailing, it allows managers to send emails directly to providers.
 - This option is only visible when the provider has entered their **Professional Email** on the Personal Info Tab.
 - An email template will appear when selected, complete all required fields with asterisk and select Submit.
 - The Sender/Manager will receive a copy of the email that was sent.

Providers			
 Name	 Login	 Site	
 [REDACTED]	12/18	  	Providers full information
 [REDACTED]	02/28	  	
 [REDACTED]	02/20	12/18	
 [REDACTED]	02/20	12/18	
 [REDACTED]	12/18	 	
 [REDACTED]	02/24	12/18	
 [REDACTED]	02/19	12/18	
 [REDACTED]	12/18	 	
 [REDACTED]	12/18	 	
 [REDACTED]	04/07	12/18	
 [REDACTED]	02/21	12/18	 
 [REDACTED]	02/19	12/18	 

Providers full information

Edit and attest on behalf of prescriber

Email provider

Name of provider will display here

Sender's Email Address *

High Priority

Subject *

Body *

Send



12. To contact the Optum Support Desk

- There are two ways to contact the Optum Support Desk.
 - Option 1. Click on the drop-down arrow next to "your name" at the top of the page and select **Contact Us**.
 - An email template will appear. Complete all fields and Submit.

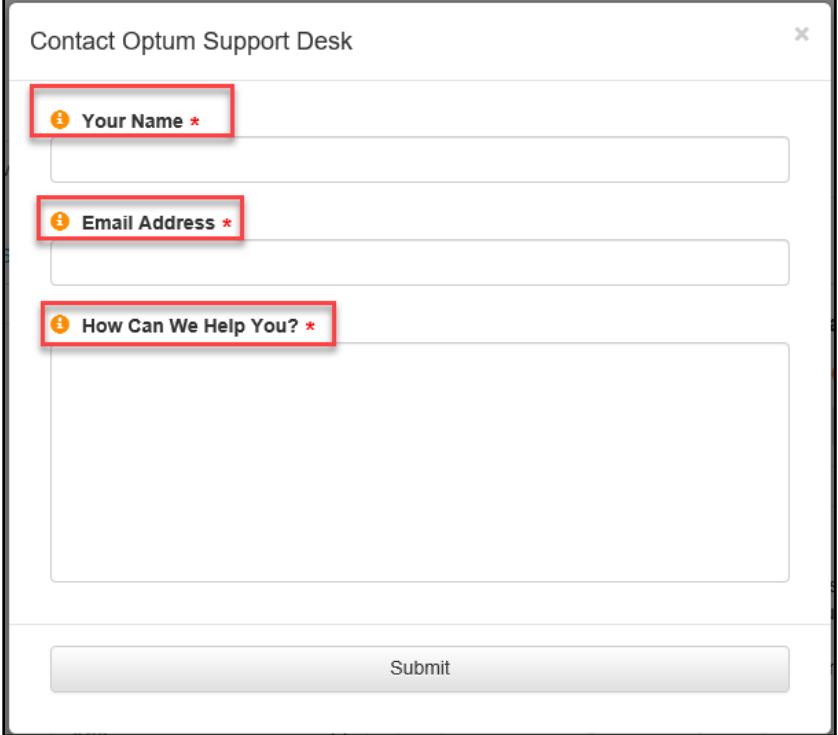
Contact Optum Support Desk

>Your Name *

Email Address *

How Can We Help You? *

Submit



ii. Option 2. On the bottom of the screen, click on “Optum Support Desk”, the email template will appear. Complete all fields and Submit.

