



QM ... UP TO THE MINUTE August 2021

MENTAL HEALTH SERVICES

Updates!

E-Prescribing Fluoxetine oral tablets in CCBH

Prescribers are asked to no longer e-prescribe fluoxetine <u>oral tablets</u> in CCBH. Alternately, prescribers should order this medication by selecting and utilizing Print/Fax/Handwritten/Called In/Samples Given options. This request pertains specifically to e-prescribing the *oral tablets*, other forms of the medication (i.e.: capsules) can continue to be e-prescribed in CCBH.

This is necessary due to the Multum data source has multiple variations of the medication's associated normalized name and unique identifiers. Cerner and Multum are working to address this issue and provide a solution.

Posted Notice for Psychologists

Programs to display posted notice for consumers notifying them of how they can contact the Board of Psychology with any complaints. Programs can contact the Board of Psychology website for additional information or to download a copy of required posting. Copies of the notice have also be uploaded to the Optum Website, under MHP documents in the Beneficiary

Optum Website Updates MHP Provider Documents

OPOH Tab:

- Section C, pg C.24 updated language re: Coordinating Care with CWS, use of confidential code.
- Section G: updated billing retention language
- Section Q format updates

Beneficiary Tab:

 Grievance/Appeal posters updated on Optum Website to most current revision 3/6/19

UCRM Tab:

Updated CYF UM Request Form

<u>Tab</u> titled "California Board of Psychology Consumer Statement" and is available in the following threshold languages: English, Spanish, Tagalog and Vietnamese.

This will be reviewed for compliance during the program's Medi-Cal Site Re/Certification visit effective 7/27/2021.

Grievance & Appeals Posters

The Grievance & Appeals posters have been updated on the Optum Website to the most current revision dated 3/6/2019. The posters can be found on Optum in MHP Documents under the Beneficiary Tab.

CYF UM Request Explanation Form Update:

The UM Request Explanation Form has been revised with added language to include "Any UM request that is denied or authorized for a reduced amount, duration, or scope than requested will require the COR to issue a notice of adverse benefit determination (NOABD) to youth/family. The updated CFY UM Request form has been uploaded to the Optum Website, in MHP Documents in MHP Documents, under the UCRM Tab.

PSC-35 Explanation Form Update:

The PSC-35 Explanation Form has been revised with added language to include "If PSC is completed for a youth who is 17 yrs. at start of treatment and turns 18 yrs. during the treatment episode, the PSC must still be completed at discharge. The update form has been uploaded to the Optum website in MHP Documents under the UCRM Tab. MH UTTM August 2021



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Notification of Enrollee of Termination of a Provider

Providers must notify enrollees of termination of a provider in writing within 15 business days. Reference: OPOH Section C, pg. C.5:

 "Providers shall make a good faith effort to give written notice of a termination of a contracted provider, within 15 calendar days after receipt or issuance of the termination notice, to each enrollee who received his or her primary care from, or was seen on a regular basis by, the terminated provider."

Use of Monitors or Video Display for Posted Beneficiary Notices

QM is currently reviewing programs continued use of monitors/video displays to post required beneficiary documents and notices. At this time, programs will be required to display and provide the following documents in their lobby in

paper form: Grievance/Appeal posters and forms, Notice of Privacy Practices, and Quick Guides. DHCS regulations require that clients have access to these forms without having to ask for assistance. All required notices and documents are available on the Optum Website, under MHP Documents, in the Beneficiary Tab.

OPOH Updates:

Section C, pg C.24: updated language regarding Coordinating Care with CWS and how to obtain and use the confidential code to obtain CWS Status.

Section G: Updated billing retention language requiring retention of all billing records from 7 years to a minimum of 10 years when the program is funded with state or federal dollars.

Section Q: formatting updates, no changes to content

Knowledge Sharing

Safety Protocols during BHS Site Visits

CDPH indicates that public health facilities continue to require that masks are worn indoors, regardless of vaccination status.

QM requests that programs adhere to mask protocols and social distancing when engaged in on-site visits and/or Medical Record Reviews with QI Staff; if program staff are not in compliance with mask requirements, your meeting may be rescheduled with notification to your COR. We appreciate everyone taking the steps needed to protect our community's health. Stay strong, stay well

Use of Administrative Updates to BHA's and/or Client Plans

Administrative updates to BHA's and/or client plans are intended to be utilized when an annual update is due and a client has been inaccessible due to AWOL, non-responsiveness to attempts to engage client in services or similar situations. If your program/clinician is able to contact/engage the client and/or the client has been attending services/maintained contact with the program, then use of an administrative update to the BHA or client would **not** be appropriate. There should also be documentation in CCBH to indicate attempts made to contact and engage the client prior to completing the administrative update supporting the use of an administrative update.



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Service Codes/Interventions on Client Plans

Services/Interventions that will be regularly provided as an ongoing service must be included on the client plan and agreed to by the client. An "unplanned service" which is provide *more than once* must be added/included on the client plan utilizing the Revise function or will be disallowed.

Obtaining Child Welfare Services Case Status Information

Due to privacy laws protecting the disclosure of client CWS case status, **effective July 2, 2021, BHS providers will need to provide a confidential code when calling the CWS hotline to obtain PSW name and telephone number**. Case status of youth in BHS programs can be obtained through the provider contacting the PSW directly by phone.

As of July 2, 2021, Program Managers at all BHS mental health programs have been contacted and given the confidential code. Program Managers are responsible for disseminating the information to staff, as needed, and ensuring the confidential nature of the code is understood by staff who obtain the information.

BHS providers should continue to access PSW contact information and CWS case status through the following process:

- Call the CWS hotline at 858-514-6995 and press option #4.
- Provider will then be prompted to provide the confidential code.
- The information that can be provided by CWS is limited to a PSW's name and telephone number. To limit confusion of the CWS clerical staff answering the phone, please refrain from using terms such as, "Pathways to Well-Being", "Eligibility" or "Katie A".
- BHS providers shall continue to utilize the following language: "I am calling to obtain the name and telephone number of the assigned worker for [youth name]."
- BHS Provider shall contact PSW directly to obtain further information on case status (i.e., open, voluntary, closed).

Programs should contact your Contracting Officer's Representative (COR) or PWB for more information or any questions.

Performance Improvement Team (PIT)

Mega Regs/Network Adequacy: System of Care Application (SOC) Update

• The Department of Health Care Services (DHCS) is requiring Mega Regs/Network Adequacy data to be submitted **monthly** in October.

Mega Regs/Network Adequacy: System of Care Application (SOC) Reminders

- The SOC Application is a web application designed as a one-stop shop for providers to access and submit all documentation required by the Medicaid and Children's Health Insurance Plan (CHIP) Managed Care Final Rules, also known as the Mega-Regs.
- New hires and transfers should register promptly, and attest to information once registration is completed.
- Providers are expected to frequently update their current profile (community-based locations, cultural competency hours, etc.) as changes occur to show accurately on the provider directory.
- Providers are expected to attest to all SOC information monthly.
- Program managers should visit the SOC monthly to review program's information and attest to information monthly.





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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

Management Information Systems (MIS)

MIS Questions?

MIS has an email for you to send all questions regarding your CCBH accounts.

MIS manages all things related to the system, including authorizations for all trainings/skills assessments/reactivations, account management. Our email is: MISHelpDesk.HHSA@sdcounty.ca.gov

Cerner Reminder

For questions regarding Cerner products or functions, please call or email the Optum Support Desk at 800-834-3792 or email SDHelpdesk@optum.com. Please do not call Cerner directly!

Training and Events

BHS Quality Improvement 9th Annual Mental Health Providers Knowledge Forum: Tuesday, August 24, 2021, from 9:00 am – 12:00 pm via WebEx. In order to receive a calendar invitation/reminder, please click here to register. Once you get to the WebEx site, please click on either the registration link or button, as indicated on the sample image below, to complete the process.



Progress Notes Practicum: Tuesday, **August 17, 2021** from **12:30p – 3:30p** via WebEx. Registration required. **Support Partner Documentation Training:** Wednesday, **August 25, 2021** from **12:30p – 3:30p** via WebEx. Registration required.

Quality Improvement Partners (QIP) Meeting: No QIP Meeting for August in lieu of the QIP Annual Forum. RCA (Root Cause Analysis) Training: Thursday, September 2, 2021 from 9:00a – 12:00p via WebEx.

- The intended audience of this training is Program Managers and QI staff
- Registration Required. Waitlisted registrants from the last session will have priority for admission. All new registrants will be accepted to waitlist if registration is filled.

Important information regarding training registrations:

• Please be aware when registering for required or popular trainings, either with the county or a contracted trainer, there may be a waiting list.



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- When registered for a training, please be sure to cancel within 24 hours of the training if you are unable to
 attend. This allows those on a wait list the opportunity to attend. Program Managers will be informed of no
 shows to the trainings.
- If registered for a training series, please be aware that attendance for all dates in the series are required to obtain certification, CEU's or credit for the training.
- When registering for a training please include the name of your program manager.
- We appreciate your assistance with following these guidelines as we work together to ensure the training of our entire system of care.
- If you have any questions, or if you are having difficulty with registration, please reply to this email or contact BHS-QITraining.HHSA@sdcounty.ca.gov. We hope to see you there.

Is this information filtering down to your clinical and administrative staff?

Please share UTTM with your staff and keep them *Up to the Minute!*Send all personnel contact updates to **QIMatters.hhsa@sdcounty.ca.gov**