MENTAL HEALTH SERVICES

Updates!

COVID Waiver Updates

With the expiration of COVID Waivers, we would like to highlight the following areas of change:

- CYF Session-based Utilization Management Cycle
  - Program had been provided a temporary suspension for session-based services. The suspension ended June 30, 2021, and the UM session tracking resumed as of July 1, 2021.
    - The UM cycle expectation was revised upon reinstatement to eliminate the need to track previously rendered services prior to the suspension.
    - All clients will begin the UM cycle session count at "Session 1" as of July 1, 2021.
    - Reference: 2021-06-29 BHS Information Notice – CYF Utilization Management Reinstated Effective 7/1/21 under the Communications Tab on the Optum Website in MHP Provider Documents.
- Telehealth
  - On July 7, 2021, DHCS clarified that telehealth waivers will remain in place through December 2022, or until further guidance on the waiver is ended at the federal level. This includes the use of telehealth platforms, ability to use telephone assessments, and continuing signature guidance when providing telehealth services. The Quality Management teams will be issuing additional guidance once DHCS officially releases updated communication.
- Emergency enrollment in Medi-CAL for Mental Health Providers
  - This waiver ends as of **June 30, 2021**. Programs will be required to have on-site visits for certification.
- Signature requirements for anti-psychotic medications
  - This waiver ends as of **September 30, 2021**. Programs will be required to get client signatures for any anti-psychotic medications and will no longer be able to utilize verbal consents. If client refuses to sign, this will still need to be indicated on the form.

Optum Website Updates
MHP Provider Documents

OPOH Tab:
- **Section B:**
  - Pgs. B.4-5 updated information for contact for potential fraud, waste, or abuse reporting.
- **Section D:**
  - Pgs. D.27, D.30, D.33, D.36-D.42 updated CYF UM, SARS, TBS, STRTP, auth for SMHS, APL 17-018, school interface
- **Section E:**
  - Pgs. E.1, E.3 updated reference to UCRM tab
- **Section G:**
  - PgsG.13-14 updated references to Forms tab
  - replaced language
- **Section L:**
  - Pgs. L-3: updated documentation instructions when EHR unavailable

Communications Tab
- 2021-06-29 BHS Information Notice – CYF Utilization Management Reinstated Effective 7/1/21

Forms Tab:
- Updated CYF Med Monitoring Form
- Updated A/OA Med Monitoring Form

Medication Monitoring Tool Updates

The A/OA and CYF Medication Monitoring Tools have been updated (Revised 6.29.21) and have been posted on the Optum Website under the Forms Tab. Please note the following updates:

- CYF Medication Monitoring tool:
  - 2b. "For youth newly prescribed antipsychotic medication, were labs for fasting blood glucose or HbA1C and LDL- C/cholesterol obtained **90 days prior to initial prescribing or within 15 days thereafter**?"
  - 5a. "If the stimulant prescription is ongoing, has the CURES database been checked at least every 6 months and is that documented?"
  - 5f. "If the Schedule IV hypnotic prescription is ongoing, has the CURES database been checked at least every 6 months and is that documented?"

- A/OA Medication Monitoring tool:
  - 10. "CURES database is reviewed upon initial prescription of a controlled substance and **every 6 months thereafter if the prescriber renews the prescription and the substance remains a part of treatment**."

Program Reporting of Fraud, Waste and Abuse:

Concerns about ethical, legal, and billing issues, (or of suspected incidents of fraud, waste and/or abuse) should be reported directly to:
- The HHSA Agency and Compliance Office (abbreviated ACO) by phone at 619-338-2807, or by email at Compliance.HHSA@sdcounty.ca.gov.
- Or report to the Compliance Hotline at 866-549-0004

(NEW) In addition, any potential fraud, waste, or abuse shall be reported directly to DHCS' State Medicaid Fraud Control Unit. Reporting can be done by phone, online form, email or by mail. o 1-800-822-6222
- Fraud@dhcs.ca.gov
- Online form
- Medi-Cal Fraud Complaint – Intake Unit
  Audits and Investigations
  P.O. Box 997413, MS 2500
  Sacramento, CA 95899-7413

All reporting shall include contacting your program COR immediately, as well as the MH QM team at QIMatters.HHSA@sdcounty.ca.gov to report any of these same concerns, or suspected incidents of fraud, waste, and/or abuse.

OPOH Updates

Section B: pgs. B.4-5 has been updated with the following information re: contact information for fraud, waste, or abuse reporting.
Section D: pgs. D.27, D.30, D.33, D.36-D.42; CYF updated the following sections: CYF UM, removed SARs for foster youth, TBS, STRTP, auth for SMHS, APL 17-018, school interface
Section E: pgs. E.1 and E.3 updated with reference to the UCRM Tab
Section G: pgs. G.13, G.14
- updated with reference to Forms Tab
- replaced "perpetual medication log" language with "disposal log"
Section L: pgs. L.2-3
- updated information for Documentation Guidelines when Electronic Health Record (EHR) is unavailable.

Knowledge Sharing

Medication Progress Note Help Text update

Some of the help text available on the progress note templates for SC 26, Meds EM Expanded Low, SC 27, Meds EM Detailed Moderate and SC 28, Meds EM Comprehensive High, have been updated for further clarity.

The updates include the following language under the **Current Medications** prompt:
　　　"Indicate justification for continued medication use, reasoning for change such as critical decision points, any other changes to the medication plan, target symptoms improvement/lack of progress, client preferences, diagnostic exams, lab tests, management of intolerable side-effects. "

As well as the following language under the **Plan of Care** prompt:
　　　"Include diagnosis changes, target symptoms, psychotherapeutic needs, progress on recovery/resiliency goals, care coordination."

FY 21-22 Medical Record Reviews

July 2021 begins the new Fiscal Year and it's time to begin planning for your annual Medical Record Review (MRR). QI Specialists will begin reaching out to all SOC Programs to schedule your Medical Record Review within the next few weeks.

For FY 21-22, Program MRR Exit Meetings will be conducted **in-person** at your program site. Upon receipt of Chart Names, Programs will have **10 business days** to complete their self-review and submit their completed Program Summary Attestation to their QI Specialist. Programs will no longer be required to submit their hybrid documents. During the on-site MRR exit interview meeting, you will need to have all the hybrid charts available for review of all hybrid documents and medication practices. If your program is required to complete the pharmaceutical review, please be sure that a nurse will be available to participate during your scheduled exit meeting.

Programs are reminded that your assigned QI Specialist is not only available during your MRR process, but throughout the fiscal year to assist with program specific questions, concerns, documentation feedback and/or education and staff training needs. If you are unsure who your assigned QI Specialist is, you can reach out to QIMatters.

STRTP Staff Consultation

It is permissible for STRTP clinical staff to bill for consultation with STRTP residential staff. This can be captured in either an SC 82, SC 33, or SC 50 depending on the content of the consultation.

Serious Incident Report of Findings

The Serious Incident Report of Findings Explanation Sheet can be found on the Optum website on the Forms tab to assist programs when completing the SIROF.
When completing your SIROF, please be sure to include the following information:

Serious Incident Summary of Findings

1. Briefly describe the incident, including information from the Serious Incident report and any additional information gathered during the investigation.
2. Document your investigation into the events leading up to the incident (i.e., review of chart and any relevant Policy and Procedures, interviews of staff and/or client, etc.)
3. Document your analysis of the investigation (i.e., identify any precipitating factors, follow up service, response to treatment).

Recommendations/Planned Improvements
1. Changes in Policies and Procedures-Identify and new policies and procedures which will be implemented in order to reduce risk to the clients and the program.
2. Quality improvement practices-Identify ongoing strategies which the program will implement in order measure the effectiveness of the policies and procedures.
3. Clinical supervision/oversight
4. Trainings, etc.

Management Information Systems (MIS)

UPDATE: ARF Requirements

As we open up after COVID, all ARFs must now contain signatures, or they will be rejected. For those ARFs that were un-signable during the past year, the ARFs must now be signed and sent in. If you received an email, make sure all signatures are captured by **July 15th** in order for those staff to stay active in CCBH.

Training in CCBH must now be through Optum's training team. We will no longer allow in-house training except in special circumstances, or if a trainee cannot pass the Optum's class. You can register your staff through their website at: https://www.regpacks.com/optum

UPDATE: Data Entry Standard for ASJ Records

MIS has updated our data entry standard for ASJ records to **5** business days. QI will be monitoring this standard as a component of our enhanced ASJ data quality initiative. Questions regarding this standard should be addressed to MIS via email: MISHelpDesk.HHSA@county.ca.gov

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

Adult/Older Adult Documentation Training: Monday, **July 26, 2021** from **12:30p – 3:30p** via WebEx. Registration required.
Quality Improvement Partners (QIP) Meeting: Tuesday, **July 27, 2021** from **2:00p – 4:00p** via WebEx**.**
CYF Documentation Training: Thursday, **July 29, 2021** from **12:30p – 3:30p** via WebEx. Registration Required.

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.
- 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.

CCBH Training:

- Optum has transitioned to a **fully virtual training format**, thus eliminating travel, and allowing for expanded registration.
- Continue to enroll through www.regpacks.com/Optum
- Most courses include a video tutorial which orients attendees to training and illustrates successful completion of the practice exercises. Video tutorials are available under the Training tab at: https://www.optumsandiego.com/content/SanDiego/sandiego/en/county-staff---providers/orgpublicdocs.html
- The courses which do not yet include a video tutorial offer a 1-hour live WebEx instead.
- Attendees contact trainers for support via phone or email as they complete the practice exercises. A screensharing option is also available.
- Once attendee practice exercises are complete and accurate, they are granted access to begin documenting in the live environment.
- Please email sdu_sdtraining@optum.com if you have any questions about the process.

Helpful Tips to Consider Prior to CCBH Training:
- Set up dual monitors to make it simpler to toggle between handouts, a video tutorial, and the CCBH application.
- Review/print the training resources prior to training. The resources are located on the Optum website; click HERE and then click on the "Training" tab. Please note: This is only for the purpose of reviewing/printing the training materials; please do not attempt to complete the training early.
- Ensure the computer you will be using for training has the Citrix Receiver installed. If your computer does not have the Citrix Receiver installed, contact your program IT department for assistance.
  - Link to Citrix Receiver for Windows click HERE.
  - Link to Citrix Receiver for Mac click HERE.

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**