



Mental Health Services



Updates

*Happy New Year and Welcome 2023!
Wishing all a very happy, peaceful, and
prosperous new year!*

QIP Meeting Registration:

Effective this month and forward all providers will need to register for the Quality Improvement Partner's meeting. Registration is required and will allow access to the meeting. [Click here to register.](#) The registration link is also included below under the Training and Events section in the QIP meeting blurb. This is a change from previous QIP's where registration via the link was not required. Please click on the link to register for the meeting.

CalAIM Behavioral Health Initiative FAQ:

DHCS has released an update to their [CalAIM Behavioral Health Initiative FAQ](#). This new webpage will continue to be updated regularly and is intended to be a resource in the implementation of CalAIM behavioral health initiatives, including Documentation Redesign. For more information, please visit the [CalAIM Behavioral Health](#) webpage.

Medi-Cal Rx Announcement:

The following alerts have been posted to the Medi-Cal Rx Web Portal on 1/01/2023.

1. [Now Active – Cal MediConnect Transition to Medicare Medi-Cal Plans](#)
2. [Updates to the Medi-Cal Rx Provider Manual](#)
3. [Changes to the Contract Drugs List \(CDL\)](#)
4. [Changes to the Contract Drugs List \(CDL\) – Authorized Drug Manufacturer Labeler Codes](#)
5. [Changes to the Contract Drugs List \(CDL\) – Over-the-Counter Drugs](#)
6. [Changes to the Pharmacy Reimbursable Physician Administered Drugs](#)
7. [Medi-Cal Rx Monthly Bulletin](#)

Optum Website Updates **MHP Provider Documents**

CalAIM Tab:

The DHCS CalAIM BH FAQs Link was added on 1/3/23.

Communications Tab:

The Day Treatment CalAIM and Contract Requirement Updates Memo 11.17.22 was posted. This memo explains the most recent changes to the hybrid day treatment STRTP programs. All recent CalAIM changes were explained along with screenshots of affected documents.

STRTP Tab:

Updated version of The Daily Progress Note Form Fill and Explanation was updated on 1/4/23.

The Updated STRTP UM Request Form and Explanation revised 11/1/22 with updated UM shift to time-based program level utilization management committee review.

Training Tab:

All outdated Progress Notes and Service Codes Webinar, BHA Webinar and Client Plan Webinar were removed on 12/27/22.

An updated Discharge Summary Explanation sheet was posted on 12/27/22. This was updated with CalAIM.

UCRM Tab:

The SC33 Progress Note template was removed on 12/23/22 as this is being replaced with the General Progress Note.

The Group Progress Note Template was updated on 1/4/23.

The Daily Progress Note Form Fill and Explanation was updated on 1/4/23.

All outdated PN templates were removed on 1/4/23.

If the above links do not take you to these documents, simply copy and paste the following link into your browser to access the Bulletins and News page: <https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news/>

For more information, contact MediCalRxEducationOutreach@magellanhealth.com

Updates to the Medi-Cal Peer Support Specialist Legacy and Peer Support Services Certification Programs Due Dates:

DHCS has made updates to the due dates for the Medi-Cal Peer Support Services Certification Programs Areas of Specialization as well as the Medi-Cal Peer Support Specialist Legacy deadlines as indicated below:

Medi-Cal Peer Support Services Certification Programs Areas of Specialization: The deadline for Medi-Cal Peer Support Certification Programs to implement the following three areas of specialization is extended to July 1, 2023:

- Crisis Services
- Forensic (Justice Involved)
- Homelessness

Eligibility for Legacy:

- The deadline for Peers employed as a Peer as of January 1, 2022, to seek certification through the Legacy process, is extended to June 30, 2023. Peers employed as a peer as of June 30, 2023 must complete or begin the process by or on June 30, 2023 to be eligible to be legaced. After this date, Peers seeking certification under a Medi-Cal Peer Support Specialist Certification Program must complete the initial certification process.

Knowledge Sharing

Medi-Cal Peer Support Specialist Certification

The [Medi-Cal Peer Support Specialist Certification Registry](#) is now online, while the Grandparenting/Legacy pathway for certification has been [extended](#) through June 30, 2023. The Medi-Cal Peer Certification Scholarship endorsement period has closed as of November 30, 2022. Please remember to complete your certification application by January 31 on CAPeerCertification.org for your scholarship application to be processed by CalMHSA. CalMHSA recently launched a searchable [Resource Library](#) on their website which includes application information, exam guides, procedures, and FAQs. Visit the [Q&A page](#) for a list of commonly asked questions and corresponding responses on Peer Support Services in BHS. Recognizing the need for input from peers and other stakeholders, CalMHSA established a Stakeholder Advisory Council that makes recommendations on behalf of a variety of stakeholder groups and [meets virtually every month](#). The State also offers the public and stakeholders this email address for Peer-related questions and comments: Peers@dhcs.ca.gov.

CalAIM Behavioral Health Payment Reform

The CalAIM Behavioral Health Payment Reform initiative seeks to move counties away from cost-based reimbursement to enable value-based reimbursement structures that reward better care and quality of life for Medi-Cal beneficiaries. Payment reform will transition counties from cost-based reimbursement funded via CPEs to fee-for-service reimbursement funded via Intergovernmental Transfers (IGTs), eliminating the need for reconciliation to actual costs. As part of payment reform, specialty mental health and SUD services will transition from existing Healthcare Common Procedure Coding System (HCPCS) Level II coding to Level I coding, known as Current Procedural Terminology (CPT) coding, when possible. Please send questions on local implementation of payment reform to BHS-HPA.HHSA@sdcounty.ca.gov.

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

- Don't forget to attest to your profile in the SOC application this month!
- Are you new to a program? Register to the SOC app and attest to information once registration is completed.
- Are you a program manager? Remember to attest to your program's information on the SOC app monthly.
- For any questions, please reach out to the Optum Support Desk at 800-834-3792 (choose Option 2), or email sdhelpdesk@optum.com.

Updated COVID-19 Vaccination and Masking Guidelines

As a reminder, programs should visit the CDPH webpages, [Health Care Worker Vaccine Requirements](#) and [Guidance for the Use of Face Masks](#), and review DHCS information, [Behavioral Health Information Notice 22-058](#), for the most recent public health orders related to health care worker testing and vaccine requirements.

CalMHSA Trainings for MHP for CalAIM

- All clinical staff registered in CCBH are required to complete the trainings as well as supervisors and managers of clinical registered CCBH users.
- Registered clinical users are required to complete the following CalMHSA trainings:
 - o CalAIM Overview
 - o Screening
 - o Assessment
 - o Transition of Care Tool
 - o Diagnosis & Problem List
 - o Progress Notes
 - o Discharge Planning
 - o Access to Service
 - o Care Coordination
- Trainings shall be completed by 2/15/2023. QA is monitoring attendance monthly.

Reminder: Please ensure you are checking the most recent documentation manuals on the CalMHSA website as they are updated to ensure that the most recent information is included.

CalMHSA Documentation Trainings

CalMHSA has been collaborating with DHCS on the integration of CalAIM requirements and documentation standards. Part of their process has been to create training guides and videos to support counties in implementation of updated documentation standards. The County is asking that staff listed below review the documentation guidelines, which can be found here: [California Mental Health Services Authority | CalAIM \(calmhsa.org\)](#). The following are additional items that can be found on the CalMHSA website geared to support providers with the roll out of the CalAIM initiative:

CalAIM Communication Materials

- Communication Materials for Staff
- Communication Materials for People in Care
- Communication Materials for People in Care (Spanish)

CalAIM Documentation Guides, Web-Based Trainings & Training Dashboard

Documentation Guides

- MH Clinical Staff
- MH Certified Peer Support Specialists
- MH MHRS & Other Staff
- MH Medical Staff

- SUD Clinical Staff
- SUD Certified Peer Support Specialists
- SUD AOD Counselors
- SUD Medical Staff

Training Dashboard

- Option to “Download data” (into an Excel spreadsheet) at the bottom of the webpage

[CalAIM Policies & Procedures and Attestations](#)

- P&P Attestation for BHINs 21-071, 21-073 & 21-075
- P&P Attestation for BHIN 22-011 No Wrong Door
- P&P Attestation for BHIN 22-019 Documentation requirements for all SMHS, DMC, and DMC-ODS Services
- Medical Necessity Determination and Level of Care Determination
- Requirements for Drug Medi-Cal (DMC) Treatment Program Services (BHIN 21-071)
- Criteria for Beneficiary Access to SMHS, Medical Necessity and Other Coverage Requirements (BHIN 21-073)
- Drug Medi-Cal Organized Delivery System Requirements for the period of 2022-2026 (BHIN 21-075)
- Documentation Requirements for all SMHS (BHIN 22-019)
- No Wrong Door (BHIN 22-011)

Management Information Systems (MIS)

Update:

Due to a request from the Compliance Office, MIS will no longer be requesting SSNs of Users on the ARFs. This has been the only way we have to identify staff, so it was suggested that we use the DOB for identification purposes. In February, we will be taking the SSN field off the ARFs and asking for all staff's DOB instead. We did begin asking for DOB in the past year due to Optum's Credentialing request. There are still many users without DOBs in our system. MIS will send all programs a list of staff and request a DOB from all those without them in our CCBH records. Thank you for your cooperation in this effort.

Reminder! The new ARFs are on the RegPacks site: www.regpack.com/reg/optum
Any older versions will be rejected.

Also, please remember our new emails:

For ARFs: mhehraccessrequest.hhsa@sdcounty.ca.gov

For Help Desk: mhehrsupport.hhsa@sdcounty.ca.gov

MIS Questions?

MIS manages all things related to the system, including authorizations for all trainings/skills assessments/reactivations, account management. Our email is: mhehrsupport.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

Quality Improvement Partners (QIP) Meeting: Tuesday January 24, 2022, from **2:00pm – 4:00pm** via Microsoft Teams. Registration is now required and will allow access to the meeting. [Click here to register](#). 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.

Office Hours

Please see the schedule below for the remaining January 2022 virtual **Office Hours** sessions. Each session will be hosted by two of our Quality Assurance Specialists.

Please remember that the Office Hours are intended to be attended and utilized by line/direct service staff as well as program managers and QI staff. Our team has noticed that primarily PM's and QI staff have been in attendance. Line staff should utilize these office hours as well, to attend and ask any questions they may have. Additionally, please bring your questions when you attend Office Hours so that we can utilize the time efficiently and address questions from the SOC.

Registration is not necessary, please contact Christian (Christian.soriano2@sdcounty.ca.gov) or reply to this message if you would like a calendar reminder for any specific sessions. **If you need an ASL interpreter, please notify us at least 7 business days before your desired session.** If you have any further questions/comments regarding these sessions, please contact QIMatters.HHSA@sdcounty.ca.gov. Sessions for future months are forthcoming.

January 2022 Office Hours:

- Thursday, January 12, 2023: [Click here to join the meeting](#)
- Tuesday, January 17, 2023: [Click here to join the meeting](#)
- Thursday, January 26, 2023: [Click here to join the meeting](#)

QI Matters Frequently Asked Questions

Q: It is my understanding that when billing services provided when a client is in jail, the appropriate 800 code is to be used. Can you please clarify whether the Provided At billing indicator must always be jail or do we choose the actual place the provider was at during the service (i.e., Office, etc.)?

A: Corrected from the December UTTM: If the client is in Jail, that is considered a complete lockout setting and the program cannot bill a SC50, even if it is for discharge planning. The only time you can bill in a complete lockout setting with the service being reimbursable would be if it was on the day of admission or the day of discharge and the service would have to have taken place outside of the lockout setting. For the Provided at service indicator, you will always enter the lockout setting and under the Outside Facility service indicator you will enter the actual facility name.

Q: Can direct service providers can bill SC50, SC10, or SC13 when doing Utilization Management reviews?

A: Utilization Management Reviews are a never-billable activity. This information can be found in OPOH Section D, pages D.23-D.28 for reference as well as on the Optum Website under the OPOH tab.

Q: Does the PCP Coordination of Care Form need to be completed annually? Or how often should it be completed?

A: The PCP form is not required to be completed annually, only upon change of information. If a change of information occurs, the form should be completed to reflect the new information and sent to the PCP.

Q: What is the timeline to complete a Psychiatric Assessment? Has this changed with CalAIM?

A: There have been no changes to expectations for completing the Psychiatric Assessment. The psychiatric assessment should be completed at the time the client is initially evaluated for medication and should be updated as clinically indicated throughout the course of treatment. The Psychiatric Assessment Explanation Sheet can be located on the Optum website.

Q: When it comes to completing intake paperwork with clients, what color pen ink is acceptable?

A: Either blue or black ink can be used for legal documents.

Q: When a Medical Assistant (MA) calls a refill into the pharmacy, is that always considered a never billable note? Or can an 815 be billed?

A: SC 815 is a direct support service that is not a Specialty Mental Health service that is provided to the client. Since calling in a refill to the pharmacy is not a direct service to the client it would not be able to be an SC 815. You may utilize a Never Billable Informational Note.

Q: When we schedule a group but only 1 person shows, do we write a group note or individual?

A: If a group is planned and only one client is present due to others cancelling or no-show, you would not be able to document or claim a group service. For the client who was present, you would bill this as an individual service and claim the appropriate service code depending on the service provided – either an individual rehab service or psychotherapy service. In your narrative you could indicate the client was scheduled for a planned group service but due to low participant count, was provided an individual service to help capture/document why the client did not participate in a required group.

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