COUNTY OF SAN DIEGO
BEHAVIORAL HEALTH SERVICES

SmartCare User Group

County of San Diego
Behavioral Health Services

September 22, 2026

Meeting Goals

Transparency

Engagement

Inclusion

Meeting Agenda

- Meeting Goals
- Updates
  - Clinical
  - MIS
  - Data Sciences
  - Billing
- Q&A

Who to Contact?

Who to Contact	How to Contact
SmartCare System issues: i.e. glitches, functionality issues, pop-up errors	CalMHSA various options: 1. Connect via Live Chat (M-F 8:00am – 5:00pm) a. 2023.calmhsa.org b. Access when logged in to the SmartCare EHR 2. Submit a ticket (M-F 8:00am – 5:00pm) a. 2023.calmhsa.org b. Access when logged in to the SmartCare HER 3. After Hours support (only available for system outages) a. Call (916) 214-8348
Password Resets and Account Unlock	Call 1-800-834-3792 (Available daily from 4:30am – 11:00pm including weekends and holidays)
SmartCare ARF submission and any access related issues or questions	BHS_EHRAccessRequest.HHSA@sdcounty.ca.gov
SmartCare support questions that cannot be addressed by the CalMHSA Support Desk should be directed to MIS	BHS_EHRSupport.HHSA@sdcounty.ca.gov
For questions related to documentation guidelines, DHCS regulations or policy	QIMatters.HHSA@sdcounty.ca.gov
Billing Issues or Questions that cannot be addressed by the CalMHSA Help Desk	Mental Health: MHBillingUnit.BHS@sdcounty.ca.gov MH Billing Line: 619-338-2612 SUD: SUDBillingUnit.BHS@sdcounty.ca.gov SUD Billing Line: 619-338-2584
Reports and Data Questions	BHS-DataScience.HHSA@sdcounty.ca.gov

Clinical Updates

Jill Michalski,

EHR Team, Clinical Lead

Eileen Quinn-O'Malley,

EHR Team, Chief, Agency Operations

Eleos Updates

We're almost there!

- Training Communication & Registration information coming soon!
  - Training format options and training tracks
    - SmartScribe Users
    - Supervisors/Program Managers
- Pre-Go Live Provider Survey email: week of 9/21/26
- Training Registration Email from Eleos: 10/19/26
- End to End Testing: Week of 10/19/26
- Welcome Email to Providers &

  Eleos Academy Access: 10/25/26 - 10/26/26
- Training/Go Live: 10/27/26 – 10/30/26

Eleos Updates

- Eleos SMARTScribe User Criteria
  - Limited to staff who provide direct clinical services and document within SmartCare
  - Approved user lists created based on submission of Eleos Expression of Interest (EOI) and requested staff access lists.
  - Submitted and approved AI Policy in effect
- Eleos Access Request forms will be available after Phase 1 Go Live for programs with new or recently hired staff or programs/staff that missed initial submission timelines
  - Goal will be to ensure staff who were not included in original EOI user list request can obtain access as soon as possible following Go Live.

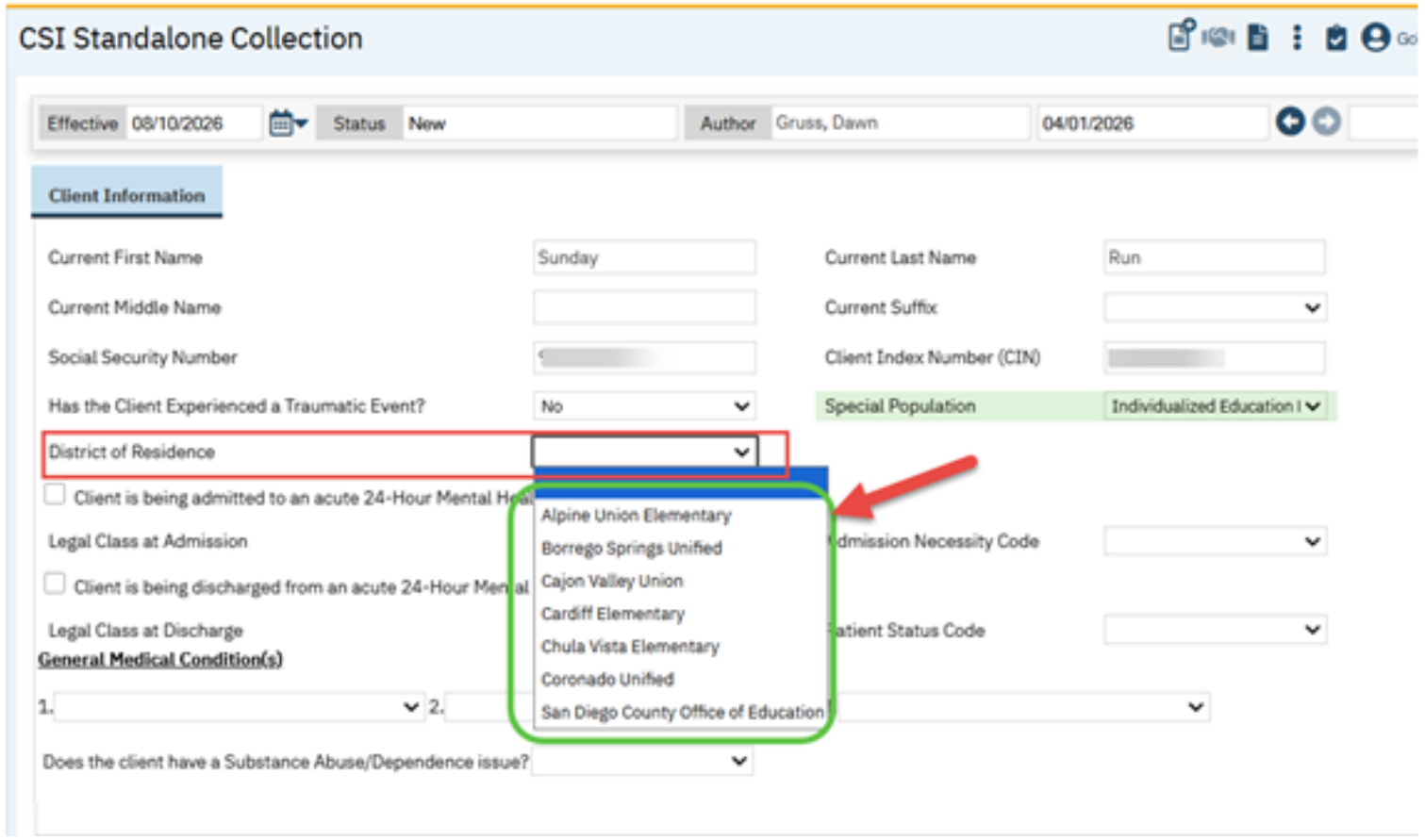
Eleos Updates Continued

- Access to Supervisors, Program Managers and Program QI Staff will be granted during Phase 2 roll out of SmartComply
- Functionality within SMARTComply includes access to dashboard with key metrics
  - SMARTScribe Dashboards will show data such as the number of Eleos-generated notes and time spent creating progress notes
  - SMARTComply Dashboards will identify notes that were out of compliance and highlight specific documentation gaps that were flagged
  - These dashboards will support in providing focused guidance to staff with documentation improvements and/or service provision

CSI Standalone District of Residence (School) Update

- CSI District of Residence question within the CSI Standalone was updated from a textbox to a dropdown on Aug 24, 2026
- This dropdown appears when selecting the Individualized Education Plan from Special Population in the CSI Standalone document
- MIS has updated the dropdown menu options to include as San Diego school districts
  - If a district is missing, please contact MIS to have it added.
    - BHS_EHRSupport.HHSA@sdcounty.ca.gov

CSI Standalone District of Residence



Client Present/Collateral Contact Service Note Indicators

- Service Note templates have been updated to include “Client Present” checkbox and Collateral contact information “Other Person(s) Present” open text field
- When entering a collateral contact, best practice is to identify the collateral source using minimal detail
  - Do not utilize names
  - identify as “spouse”, “parent”, “mother”, “teacher” or other generic description.

Client Present/Collateral Contact Service Note Indicators

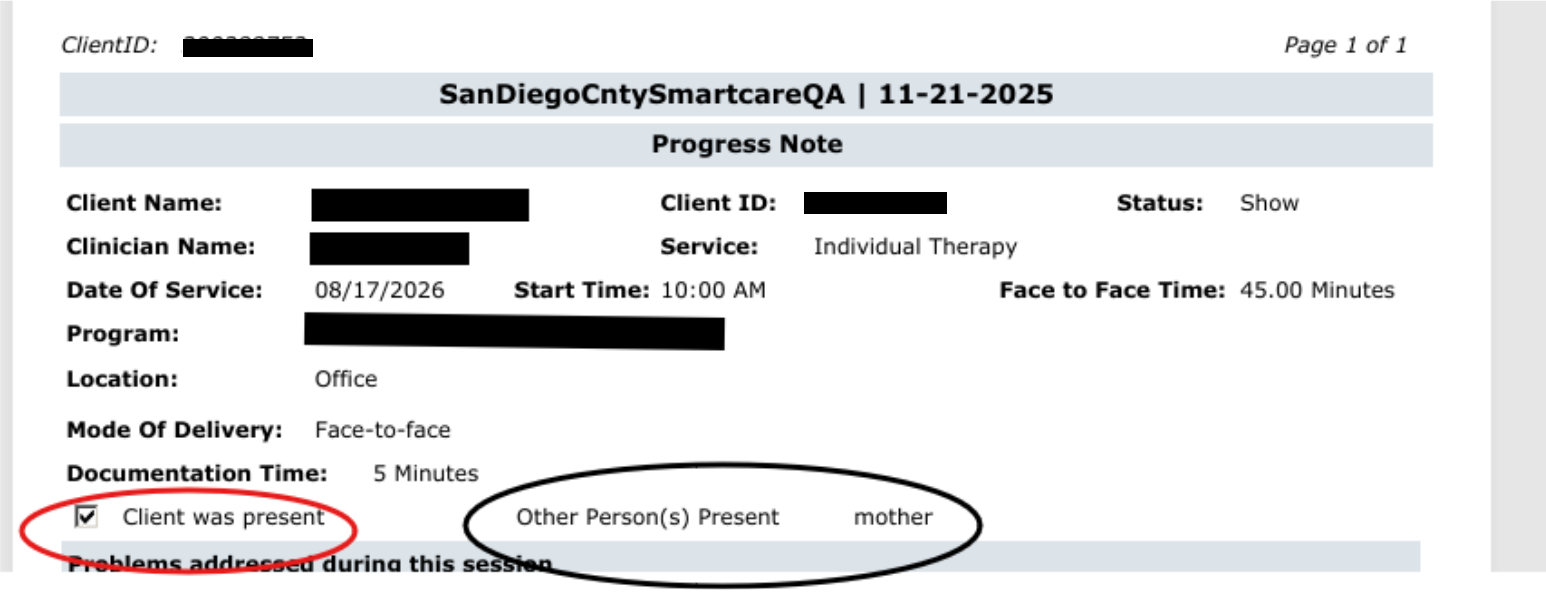
****EBP Bundled Rate Services** October 1, 2026 effective change****

- EBP providers **must** use the Client Present checkbox and Collateral contact field – this is what will attach the required UK Collateral Contact modifier to the service.

  - UK modifier will no longer be triggered by selecting telehealth as location indicator.

  - If Client Present is not checked = a collateral service and UK modifier will be attached to service

Client Present/Collateral Contact Service Note Indicators



ClientID: [redacted] Page 1 of 1

SanDiegoCntySmartcareQA | 11-21-2025

Progress Note

Client Name: [redacted] **Client ID:** [redacted] **Status:** Show

Clinician Name: [redacted] **Service:** Individual Therapy

Date Of Service: 08/17/2026 **Start Time:** 10:00 AM **Face to Face Time:** 45.00 Minutes

Program: [redacted]

Location: Office

Mode Of Delivery: Face-to-face

Documentation Time: 5 Minutes

☑ Client was present Other Person(s) Present mother

Problems addressed during this session

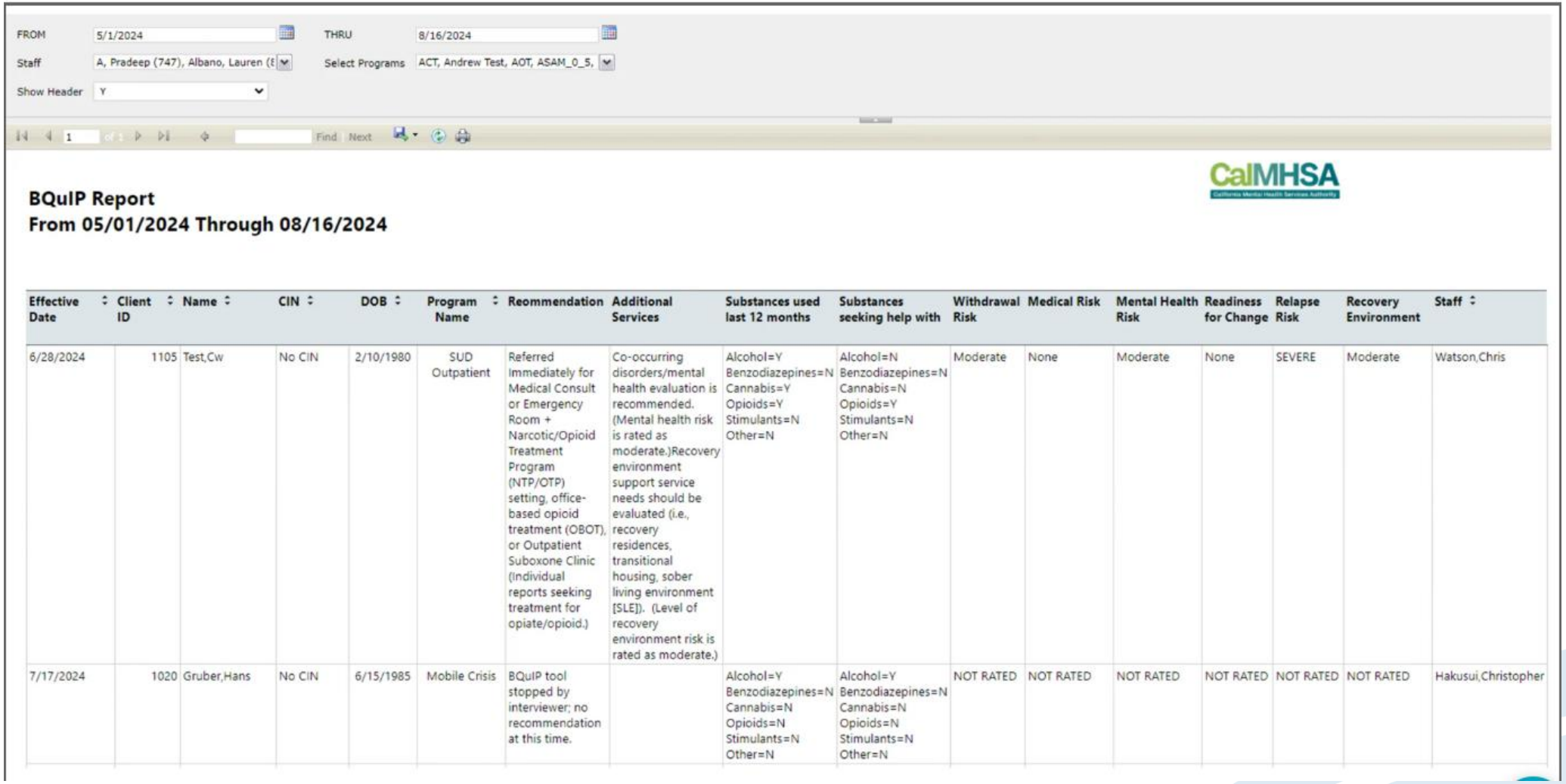
BQuIP
Brief Questionnaire for Initial Placement

- BQuIP is a SUD screening tool developed by UCLA-ISAP and DHCS
  - Brief screening for initial placement into SUD services for adults
  - Structured questions across ASAM's 6 dimensions
- BHSA mandates that **FSP programs** are responsible for conducting an ASAM (American Society of Addiction Medicine) screening as part of an integrated assessment for **adults**.
  - DHCS does not require specific tool as long as the SUD screening is based in ASAM.
  - BHS decision to use of the BQuIP to meet BHSA's SUD screening requirement.
  - Use of BQuIP does not trigger 42 CFR Part 2 requirements

BQuIP – Provider Requirements

- BQuIP is approved for use by Clinical and Non-Clinical staff
- BQuIP Tool User training is required prior to use of the tool
  - The Brief Questionnaire for Initial Placement
  - BQuIP 3.0 Training Webinar (18mins)
  - BQuIP_30manualJune2020_beta.pdf
  - BQuIP-FrequentlyAskedQuestions06_2024v3.pdf
- CalMHSA:
  - How to Complete a BQuIP SUD Screening Tool
  - CalMHSA 106 – BQuIP Report
    - Displays all BQuIP documents – data determined by staff dropdown filter, program dropdown filter, and filtered dates

CalMHSA 106 BQuIP Report



FROM 5/1/2024 THRU 8/16/2024

Staff A, Pradeep (747), Albano, Lauren (E Select Programs ACT, Andrew Test, AOT, ASAM_0_5,

Show Header Y

Find Next

CalMHSA

BQuIP Report
From 05/01/2024 Through 08/16/2024

Effective Date	Client ID	Name	CIN	DOB	Program Name	Reommendation	Additional Services	Substances used last 12 months	Substances seeking help with	Withdrawal Risk	Medical Risk	Mental Health Risk	Readiness for Change	Relapse Risk	Recovery Environment	Staff
6/28/2024	1105	Test,Cw	No CIN	2/10/1980	SUD Outpatient	Referred Immediately for Medical Consult or Emergency Room + Narcotic/Opioid Treatment Program (NTP/OTP) setting, office-based opioid treatment (OBOT), or Outpatient Suboxone Clinic (individual reports seeking treatment for opiate/opioid.)	Co-occurring disorders/mental health evaluation is recommended. (Mental health risk is rated as moderate.)Recovery environment support service needs should be evaluated (i.e., recovery residences, transitional housing, sober living environment [SLE]). (Level of recovery environment risk is rated as moderate.)	Alcohol=Y Benzodiazepines=N Cannabis=Y Opioids=Y Stimulants=N Other=N	Alcohol=N Benzodiazepines=N Cannabis=N Opioids=Y Stimulants=N Other=N	Moderate	None	Moderate	None	SEVERE	Moderate	Watson,Chris
7/17/2024	1020	Gruber,Hans	No CIN	6/15/1985	Mobile Crisis	BQuIP tool stopped by interviewer; no recommendation at this time.		Alcohol=Y Benzodiazepines=N Cannabis=N Opioids=N Stimulants=N Other=N	Alcohol=Y Benzodiazepines=N Cannabis=N Opioids=N Stimulants=N Other=N	NOT RATED	NOT RATED	NOT RATED	NOT RATED	NOT RATED	NOT RATED	Hakusui,Christopher

Non-Billable Service Must Document

- Changes to Non-Billable procedure code by CalMHSA following feedback from Counties re: need for separate ISL and non-ISL procedure code for documenting non-medi-cal billable services to client
  - Additional guidance will be forthcoming regarding use of these codes with potential future sunset of the non-ISL procedure code.

- New ISL procedure code created:
  - “ISL Non-Billable Service”

- *ISL Non-Billable Service, Must Document* procedure code was reverted to its original name and code:
  - “Non-Billable Service, Must Document”

ISL Preparation in SmartCare

- What is ISL?
  - Individual Service Level data
  - ISL code will capture a cost tied to specific an individual that is not claimable to Medi-Cal.
- Why is it important?
  - DHCS currently only sees a fraction of BHP investments via Medi-Cal claims
  - ISL “fills the gap” - DHCS will now see costs beyond what Medi-Cal claims alone reflect.

Individual Service Line (ISL) Preparation in SmartCare

- SmartCare continues to work on functionality, configuration and workflows needed to prepare counties for ISL (Individual Service Level) encounter reporting beginning **January 1, 2027**
  - Mapping of ISL codes to non-billable codes/non-billable activities, assignment of ISL codes to Programs, workflow and reporting development, invoicing workflows
  - BHS comms will be forthcoming – training, county implementation, program resources
  - CalMHSA will be providing LMS trainings for providers, knowledge articles

Stay Tuned for More to Come!

Client Flags vs Special Populations

- Special Populations
  - Used to meta-tag at client level to track clients for specific data points that cannot be tracked elsewhere in SmartCare
    - Client level reporting requirements, billing rules/modifiers assigned to specific populations
    - Examples:
      - Homelessness Status
      - IHBS/KTA
- Client Flags
  - Used to alert treatment team members and other programs/providers within SmartCare to important client information
    - Levels: Information, Urgent, Warning
    - Pop Up Alert or Client Ribbon
    - No impact to billing or other functionality
    - Example: CARE ACT client, High Risk Client, Minor Consent client

Annual ICD-10 Code Updates

- Centers for Medicare & Medicaid Services (CMS) releases updates to the ICD-10 code list annually.
  - Updated ICD-10 codes in effect as of **10/1/26**.
- CalMHSA has reviewed CMS updates to the ICD-10 list and will be pushing the changes into PROD
  - **One new addition**: F64 – Gender Identify Disorder, in remission
  - No current F codes will become invalid.
  - Some Z-code changes but none which fall within the SDOH range (Z55-65)
- ICD-10 code(s) that will become valid on 10/1/26 will not be searchable in SmartCare prior to 10/1/26.
- For more information: Annual ICD-10 Code Updates - 2023 CalMHSA

SmartCare LMS Courses Update

- The SmartCare courses are now housed in a category labeled “SmartCare Training for All Users” in the EHR SmartCare category of the CalMHSA LMS site.

- Additional category labeled “Role-Based SmartCare Training”

- CalMHSA LMS:
  - https://moodle.calmhsalearns.org/login/index.php

Management Information Systems (MIS)

Becky Ferry-Rutkoff

SmartCare Support:
BHS_EHRSupport.HHSA@sdcounty.ca.gov

SmartCare Access/ARFs:
BHS_EHRAccessRequest.HHSA@sdcounty.ca.gov

Staff Administration

Reminders:

- Do NOT remove prior taxonomies from NPPES, it can cause billing issues; new taxonomies can be added

- ARF Rejections for incompleteness have increased. Please ensure all required fields are completed.
  - Example: RES/CSU Program check box on the ARF must be checked if the program is RES/CSU

Batch Service Upload – Update

- **New Template Required**
  Providers must begin using the new Batch Service Upload template starting today; the previous version is no longer accepted.
- **New Fields Included in the Updated Template**
  - Mode of Delivery (required)
  - ClientWasPresent (optional)
  - OtherPersonsPresent (optional)
- **ClientWasPresent – Important Rule**
  - Enter **"Y"** if the client was present.
  - Leaving this field blank will result in the checkbox **not** being marked.
- **SmartCare Report Update**
  - The **CoSD Batch Upload Reference Guide report** has been updated and is **available** for download in SmartCare.

Staff Administration

Residential (My Office) and Bedboard (My Office) List Not Displaying Data:

- If no data is populating:
  - Select [Select All] in the Units and Programs dropdowns
  - Unselect [Select All]
  - Click 'Apply Filter'

- This will refresh the filters and pull the data correctly
- Reach out to the CalMHSA Help Desk for any questions

Data Science (DS) Reports

Derek Kemble

SmartCare Reports:
BHS-DataScience.HHSA@sdcounty.ca.gov

Report Training and Resources

Current Efforts

- Optum SmartCare Training
- SmartCare Help Desk Support
- SmartCare ARF: Treatment Programs
- Centralized E-mail support:
  - BHS-DataScience.HHSA@sdcounty.ca.gov

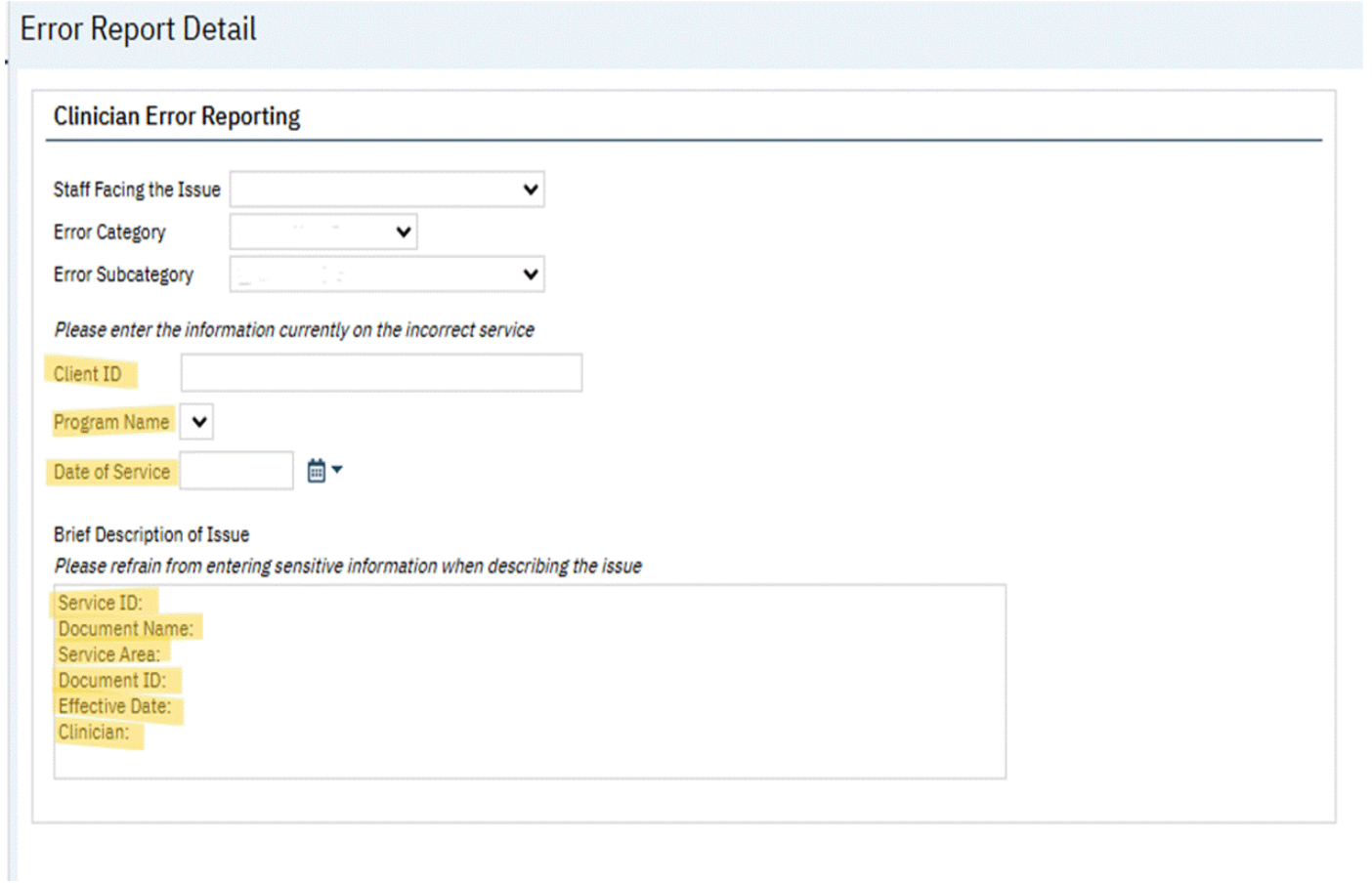
SmartCare Errors Report Detail: Completing All Required Fields

For anything **document-related**, we will need the **Document ID, Document Name, and a specific reason why the document needs to be deleted**. Simply stating “This is wrong” is not sufficient. The reason should provide enough information for the team to understand what is incorrect and what needs to be addressed. We also will need Client ID, Program Name, Date of Service, **Service ID,** Effective Date, and Clinician (see highlighted fields in screencap).

Completing all of these fields is important because it allows us to research and resolve the issue without having to send emails back and forth to obtain additional information. When all required information is provided, **document-related errors can generally be resolved within 24–48 hours, and in many cases by the next business day.**

To help improve workflow and turnaround time, **requests that are missing required information will be placed into a separate follow-up queue. Our team will first work through requests that contain all of the information needed to resolve the error. Requests in the follow-up queue will be addressed once the complete requests have been worked through.**

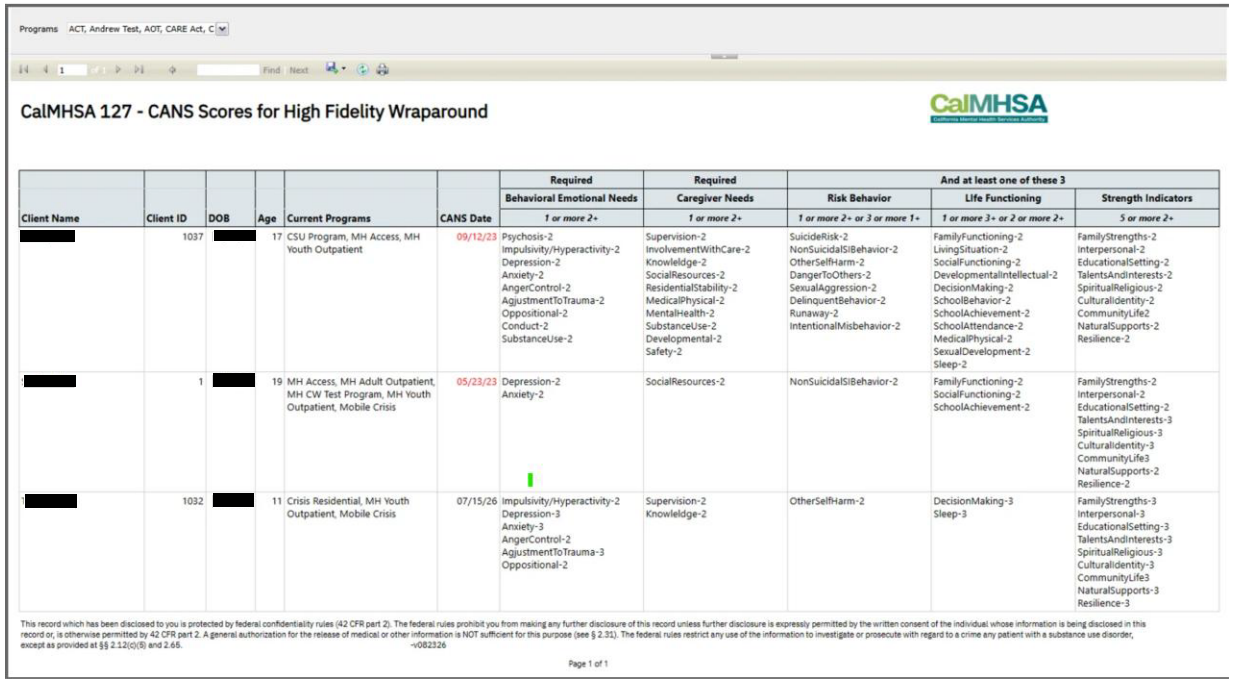
This is simply to make the most efficient use of everyone's time and avoid delaying requests that are ready to be worked. **The more complete the information provided in the Errors Report, the faster we can get the issue resolved.**



CalMHSA 127- CANS Scores for HFW

CalMHSA 127 - CANS Scores for High Fidelity Wraparound - 2023 CalMHSA

The purpose of this report is to identify and provide a list of clients who have CANS assessments containing the qualifying scores required for HFW eligibility within a specified timeframe. The report will allow users to filter results by ~~a date range and~~ one or more programs.



Programs ACT, Andrew Test, AOT, CARE Act, C

Find | Next

CalMHSA 127 - CANS Scores for High Fidelity Wraparound

CalMHSA

Client Name	Client ID	DOB	Age	Current Programs	CANS Date	Required: Behavioral Emotional Needs (1 or more 2+)	Required: Caregiver Needs (1 or more 2+)	And at least one of these 3: Risk Behavior (1 or more 2+ or 3 or more 1+)	And at least one of these 3: Life Functioning (1 or more 3+ or 2 or more 2+)	And at least one of these 3: Strength Indicators (5 or more 2+)
[redacted]	1037	[redacted]	17	CSU Program, MH Access, MH Youth Outpatient	09/12/23	Psychosis-2 Impulsivity/Hyperactivity-2 Depression-2 Anxiety-2 AngerControl-2 AgjustmentToTrauma-2 Oppositional-2 Conduct-2 SubstanceUse-2	Supervision-2 InvolvementWithCare-2 Knowledge-2 SocialResources-2 ResidentialStability-2 MedicalPhysical-2 MentalHealth-2 SubstanceUse-2 Developmental-2 Safety-2	SuicideRisk-2 NonSuicidalSIBehavior-2 OtherSelfHarm-2 DangerToOthers-2 SexualAggression-2 DelinquentBehavior-2 Runaway-2 IntentionalMisbehavior-2	FamilyFunctioning-2 LivingSituation-2 SocialFunctioning-2 DevelopmentalIntellectual-2 DecisionMaking-2 SchoolBehavior-2 SchoolAchievement-2 SchoolAttendance-2 MedicalPhysical-2 SexualDevelopment-2 Sleep-2	FamilyStrengths-2 Interpersonal-2 EducationalSetting-2 TalentsAndInterests-2 SpiritualReligious-2 Culturalidentity-2 CommunityLife2 NaturalSupports-2 Resilience-2
[redacted]	1	[redacted]	19	MH Access, MH Adult Outpatient, MH CW Test Program, MH Youth Outpatient, Mobile Crisis	05/23/23	Depression-2 Anxiety-2	SocialResources-2	NonSuicidalSIBehavior-2	FamilyFunctioning-2 SocialFunctioning-2 SchoolAchievement-2	FamilyStrengths-2 Interpersonal-2 EducationalSetting-2 TalentsAndInterests-3 SpiritualReligious-3 Culturalidentity-3 CommunityLife3 NaturalSupports-2 Resilience-2
[redacted]	1032	[redacted]	11	Crisis Residential, MH Youth Outpatient, Mobile Crisis	07/15/26	Impulsivity/Hyperactivity-2 Depression-3 Anxiety-3 AngerControl-2 AgjustmentToTrauma-3 Oppositional-2	Supervision-2 Knowledge-2	OtherSelfHarm-2	DecisionMaking-3 Sleep-3	FamilyStrengths-3 Interpersonal-3 EducationalSetting-3 TalentsAndInterests-3 SpiritualReligious-3 Culturalidentity-3 CommunityLife3 NaturalSupports-3 Resilience-3

This record which has been disclosed to you is protected by federal confidentiality rules (42 CFR part 2). The federal rules prohibit you from making any further disclosure of this record unless further disclosure is expressly permitted by the written consent of the individual whose information is being disclosed in this record or, is otherwise permitted by 42 CFR part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose (see § 2.31). The federal rules restrict any use of the information to investigate or prosecute with regard to a crime any patient with a substance use disorder, except as provided at §§ 2.12(c)(5) and 2.65. -v082326

Page 1 of 1

New CoSD Reports

CoSD CalOMS Data Report

* Admission and Discharge

CoSD Batch Service upload Error Report

CoSD MCO OHC Claims

CoSD Batch upload reference guide

CoSD 814 - Claims Denial Contractor Report

CoSD 121 - ASCMI Completion Report

BHS Billing Unit Announcements

Tess Bugay,

Medical Claims Manager

Carmen Saline,

Admin. Analyst III

BHS BILLING EMAILS

The BHS Billing Unit's old email addresses is still active until 09/29/2026.

MHBillingUnit.HHSA@sdcounty.ca.gov (MH)

ADSBillingUnit.HHSA@sdcounty.ca.gov (SUD)

However, to ensure that the MH and SUD billing teams receive your emails and to provide timely responses, we highly recommend that all billing and related communications be sent to our new BHS Billing email addresses.

- ✓ **MH billing and billing-related emails to: MHBillingUnit.BHS@sdcounty.ca.gov**
- ✓ **ADP or SUD billing and billing-related emails to: SUDBillingUnit.BHS@sdcounty.ca.gov**

Medi-Cal Claim Denials

- Currently, denial lists are emailed to programs until a provider version of the denial report becomes accessible for use in SmartCare.
- If you receive an email denial from your program, it's recommended to review and validate the denial.
- Please respond to the BHS billing team via email if you agree or disagree with the state determination.
- Claims that are eligible for service replacement or rebill will be processed by the BHS Billing Unit.

CARC & RARC

- The CARC (Claim Adjustment Reason Code) and RARC (Remittance Advice Remark Code) are standardized codes provided by insurance companies to explain why a medical claim was denied, reduced, or paid differently than billed.
- CARC and RARC are included in the electronic remittance advices (ERAs) or explanations of benefits (EOBs) that the BHS Billing Unit posts to SmartCare.
- The CARC and RARC tables are posted on the BHS Optum Billing resources website for your reference.

CARC & RARC Continued

- The CARC and RARC tables are posted on the BHS Optum Billing resources website for your reference.

MH CARC and RARC

SUD CARC and RARC

Q&A

For further questions: contact QIMatters.HHSA@sdcounty.ca.gov

Or go online for more information at:
OptumSanDiego.com → SMH&DMC-ODS Health Plans → SmartCare Tab

Next Meeting: Monday, October 19, 2026, 11:00am - 12:00pm