COUNTY OF SAN DIEGO
BEHAVIORAL HEALTH SERVICES

SmartCare User Group

County of San Diego
Behavioral Health Services

July 21, 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,

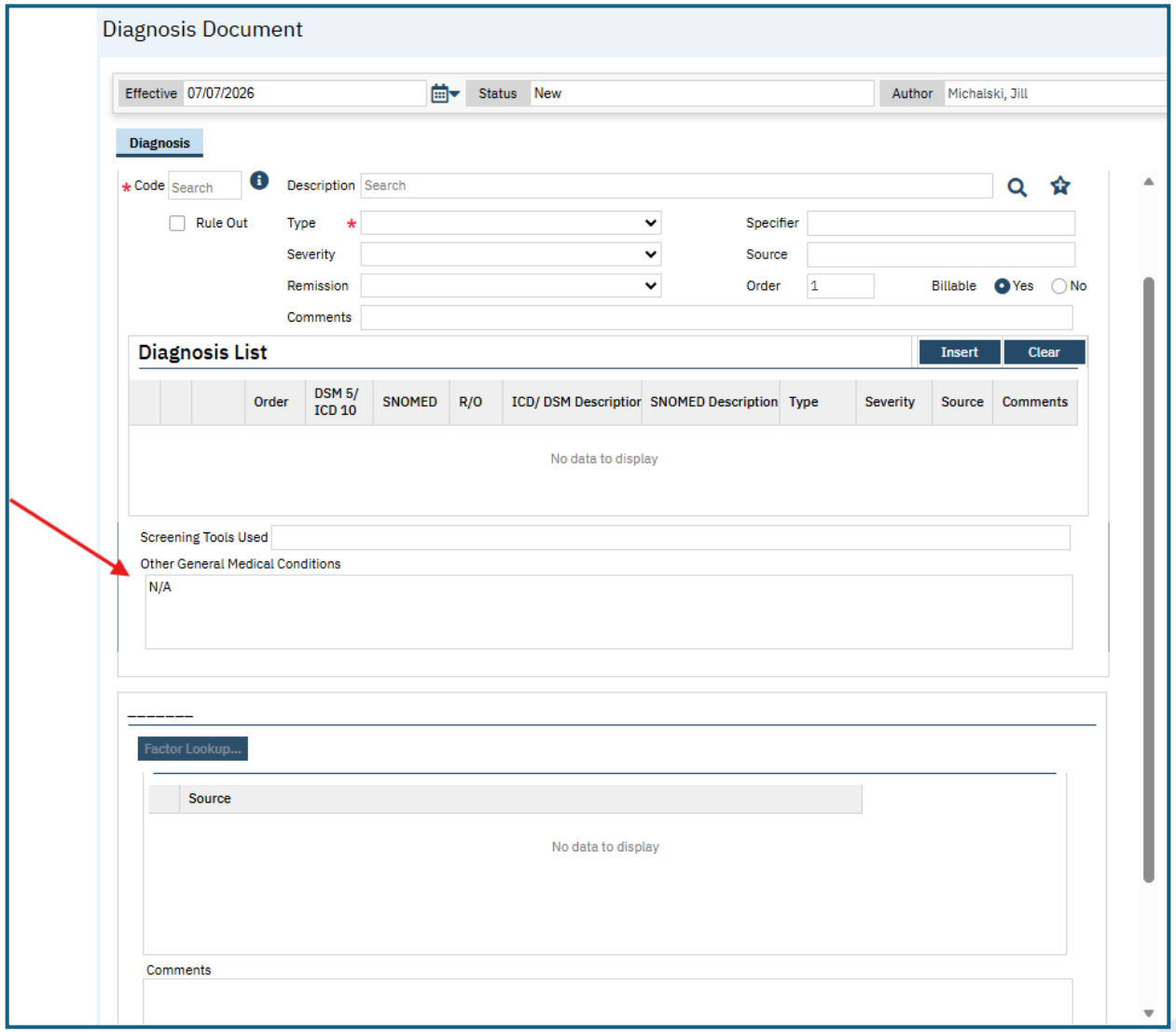
EHR Team, Clinical Lead

Eileen Quinn-O'Malley,

EHR Team, Chief, Agency Operations

Diagnosis Document Update – General Medical Conditions

- The “Other General Medical Conditions” field in the SmartCare Diagnosis Document will now automatically populate with “N/A” by default – effective July 16:
  - If the member has no other significant general medical conditions – no action needed – N/A will default and remain in the field.
  - If there is relevant medical conditions to document, delete the text and enter the appropriate clinical information.


Diagnosis Document
Effective 07/07/2026
Status New
Author Michalski, Jill
Diagnosis
Code Search
Description Search
Rule Out
Type
Specifier
Severity
Source
Remission
Order 1
Billable Yes No
Comments
Diagnosis List
Insert
Clear
Order
DSM 5/ ICD 10
SNOMED
R/O
ICD/ DSM Description
SNOMED Description
Type
Severity
Source
Comments
No data to display
Screening Tools Used
Other General Medical Conditions
N/A
Factor Lookup...
Source
No data to display
Comments

ASCMI Potential Changes

- Two data types removed from CMP web portal – responses being suppressed while undergoing DHCS legal review:
  - HIV Test Results
  - Genetic Testing
- No changes to workflow during ASCMI Form collection via SmartCare – paper form remains the same. Consent should still be captured locally for these two data types.
  - Other changes may occur as feedback is collected

ASCMI Important Reminders

- Effective date is the date that the ASCMI is completed with and signed by client
  - Do not backdate ASCMI forms.
  - Consent expires one year from date of client signature (clients 18+)
  - For clients 17 or under, consent will only last until they turn 18 or until their guardianship changes.
- Do not “pre-complete” or sign an ASCMI before meeting with or obtaining client signature
  - ASCMI should be completed with client and signatures of client and provider should match and align to the date the ASCMI was completed.

ASCMI Reminders, continued

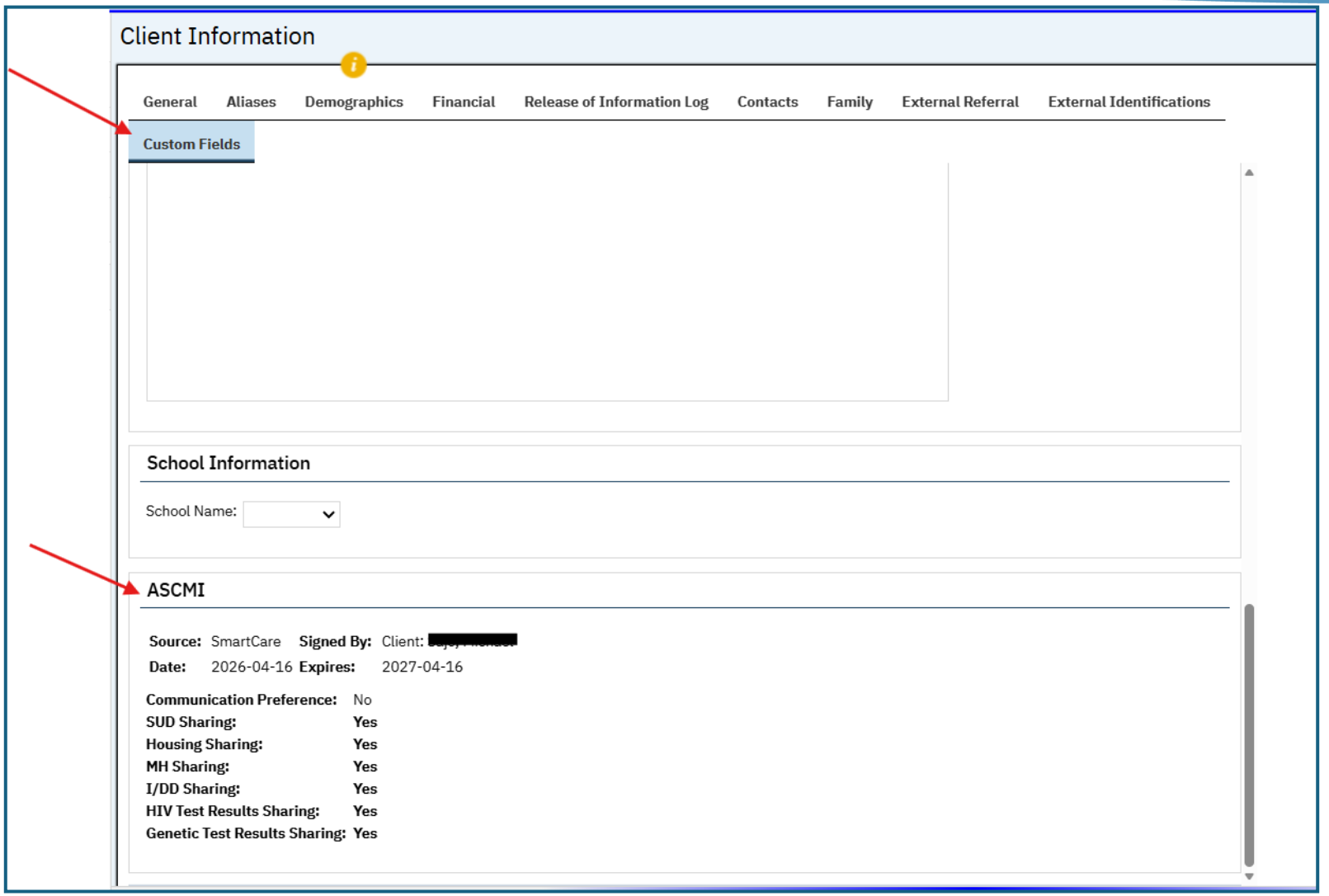
- Verbal Consent option should not be used for client/guardian signature
  - Electronic signature or signature on hard copy/paper form required
  - Use ASCMI Completion Report to review signature methods
  - Client signature triggers CDAG rules and impacts data sharing within Connex
- ASCMI is a client-level document and does not need to be completed at each new enrollment.
  - verify if there is a current ASCMI for client and review client preferences
    - If client confirms consent preferences remain, no new ASCMI required.
    - If client changes consent preferences or revokes consent, complete new ASCMI to reflect changes

ASCMI Reminders, continued

- You should still document your Client's consent preferences, even if they decline the disclosure of any data authorized by the Form by selecting the "No" checkbox.
  - Signing the Form is optional, and your Client may decline to complete the Form.
- Refusal to complete an ASCMI can be documented in a progress note – do not submit an ASCMI on behalf of a client
- Program responsibility to ensure understanding of when ASCMI can replace an ROI and when it can't.
  - Reduce duplicate efforts
  - Ensure information sharing aligns with HIPAA, 42 CFR Part 2 and applicable law

ASCMI Preferences Visibility in Client Information Screen

- Client's ASCMI consent preferences can be viewed in Client Information (Client) Screen in the Custom Fields tab
  - Summary of the client's ASCMI data sharing preferences for each data type
  - Date of signature
  - Form expiration date
- This will automatically update with any new ASCMI data captured within SmartCare on per-client basis

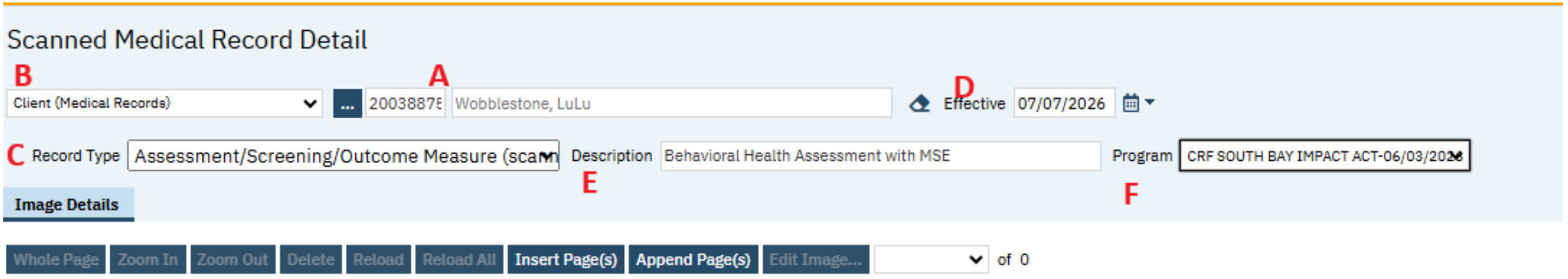

Client Information
General
Aliases
Demographics
Financial
Release of Information Log
Contacts
Family
External Referral
External Identifications
Custom Fields
School Information
School Name:
ASCMI
Source: SmartCare Signed By: Client: [redacted]
Date: 2026-04-16 Expires: 2027-04-16
Communication Preference: No
SUD Sharing: Yes
Housing Sharing: Yes
MH Sharing: Yes
I/DD Sharing: Yes
HIV Test Results Sharing: Yes
Genetic Test Results Sharing: Yes

Scanned Document Errors – Not Associated to client/clinical record

- Critical issue identified with My Scan Documents
- 6,411 out of 536,198 scanned documents not attached to the client record
  - Provided workflow/steps to scan a document into client record not followed
  - EHR Team and MIS reviewing report and will be providing communication and required correction process to programs identified with scanned document errors for “Not Associated” documents.

Scanning & Associating Documents In SmartCare - Reminders

- When scanning or uploading any documents into the client's record in SmartCare – providers **must** associate the document(s) to the Client's Medical Record
  a. Ensure you have selected the correct client
  b. Select Client (Medical Records) from drop-down
  c. Select Record Type from drop-down
  d. Enter Effective Date
  e. Enter description in Text Field
  f. Ensure you have selected the correct client program
- How to Scan or Upload Documents into the Client's Record - 2023 CalMHSA


Scanned Medical Record Detail
B
A
D
Client (Medical Records)
...
2003887E
Wobblestone, LuLu
Effective
07/07/2026
C
Record Type
Assessment/Screening/Outcome Measure (scan
Description
Behavioral Health Assessment with MSE
Program
CRF SOUTH BAY IMPACT ACT-06/03/2026
E
F
Image Details
Whole Page
Zoom In
Zoom Out
Delete
Reload
Reload All
Insert Page(s)
Append Page(s)
Edit Image...
of 0

Consent to Use AI Documentation

- The Consent to Use AI Documentation was deployed to PROD on July 6 2026.
  - Counties implementing Eleos SmartScribe will use this consent form to educate client regarding the use of AI transcription and to obtain written client consent for use of AI documentation
  - Providers should **not** utilize the Consent to Use AI Documentation at this time – use of this consent will go into effect upon roll-out of Eleos SmartScribe.
  - BHS will provide additional guidance on documentation and consent requirements to county-operated and county-contracted programs that opt-in to Eleos.

Travel and Documentation Time Tracking Update

- Testing in QA environments – will be deployed to PROD on August 3, 2026
- CalMHSA will be updating configurations in SmartCare to require travel and documentation time to be entered in order to sign/complete service notes
  - Supports fiscal year reporting
  - Supports evaluation of Eleos solution
  - Not a DHCS requirement – not reimbursable, included in FFS rates

Home Medication Date Entry (*SmartCare Rx/Medication Mgmt Rx only*)

- Issue has been identified when entering home medications (self reported) medications prescribed elsewhere
  - entering a value in the Date Initiated Field can overwrite the Start Date when an End Date is not entered which may result in inaccurate medication date information
- Workaround– do not populate the Date Initiated field for home (self-reported) medications.
  - Document using only the Start Date and End Date fields
- *This only applies to permissioned providers utilizing the Home Medication/Medication Prescribed Elsewhere workflow*

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:

- CSU and Residential program staff are required to completed supplemental training via Optum in additional to the SmartCare Basics prior to ARF submittal.
  - Contact Optum at sdu_sdtraining@optum.com or 1-800-834-3792 Option 3 with any questions

- Clinicians MUST complete Section II of the ARF
  - NPI and taxonomy must match the NPPES Registry
  - License effective date and number must match the credentialing website

- All access inquiries and ARFs should be submitted to BHS_EHRAccessRequest.HHSA@sdcounty.ca.gov; any other email address is invalid

Staff Administration

Reminders Continued:

- Registered candidates must include the following supporting documentation with their ARF:
  - Proof of college graduation (diploma or official transcript)
  - Proof of associate application (post office receipt or canceled check from BBS)
    - Application must have been submitted within 90 days of graduation
- To avoid billing issues, Registered candidates must submit a modification ARF once they receive a registration number from BBS

CalOMS

CalOMS Cleanup Project:

- Started on June 5, 2026
- Working on corrections since migration, 9/1/24, to current date
- Records must be corrected and resubmitted to the State
- Error Types: Documents require signature, missing admissions, missing discharges, annual update sequence number is incorrect, etc.

Data Science (DS) Reports

Derek Kemble

SmartCare Reports:

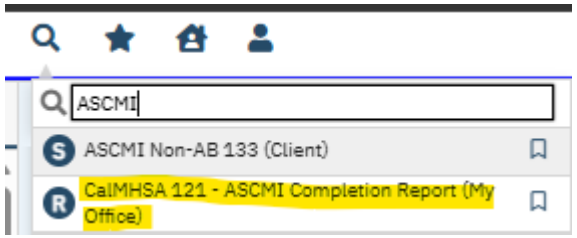
BHS-DataScience.HHSA@sdcounty.ca.gov

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

ASCMI Form Report



Currently only able to be ran by supervisory roles. County is in discussion to expand this option to other users.

CalMHSA 121 – ASCMI Completion Report

ASCMI Completion Report – Overview

- Identifies clients who are expected to have an ASCMI and whether one exists.
- Searches across all eligible programs (within CDAG rules), so an ASCMI completed by another program is recognized and does not need to be duplicated.
- Displays the **most recent** ASCMI, prioritizing:
  - Client/Guardian signed (Complete)
  - Staff signed (Awaiting client signature)
  - In Progress
  - No ASCMI on file
- Includes document author, staff signature status, client/guardian signature status, and signer relationship.
- Clients with no ASCMI are still listed to highlight missing assessments.
- Respects **CDAG and 42 CFR Part 2** privacy rules, so some ASCMIs may not be visible based on user access.

Date Range Options

- **Active Enrollment (Default):** Includes clients enrolled at any point during the selected date range.
- **Enrolled During Date Range:** Includes only clients whose enrollment began during the selected date range.

Sorting

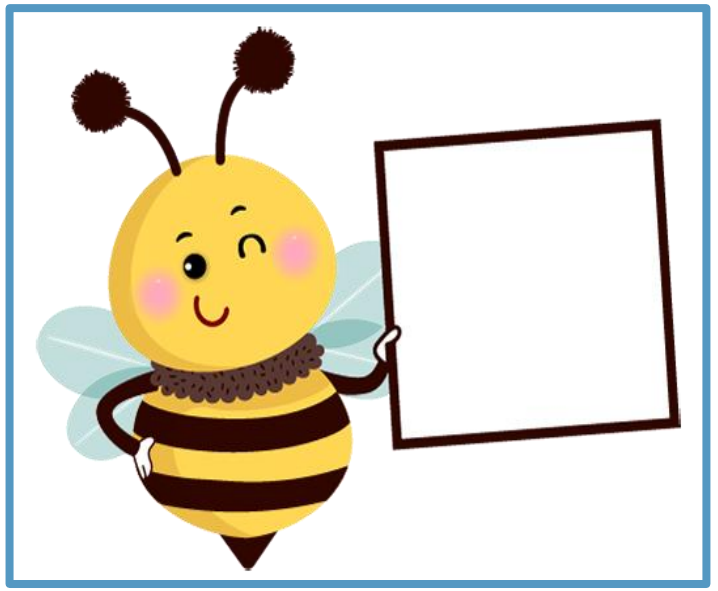
- Results are sorted by **Program**, then **Client**.
- Export to Excel for additional sorting or analysis.

BHS Billing Unit Announcements

Tess Bugay, Medical Claims Manager
Carmen Saline, Admin. Analyst III

BHS Billing Unit's Contact Information

The BHS Billing Unit - Mental Health and Substance Use Disorder has new email addresses. Effective immediately, please send the:



- ✓ **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**

The BHS Billing Unit's old email addresses will remain active and monitored until 08/31/2026.

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

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

Please refer to our contact details and updates in the business email signature.

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 and 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.

- 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: Tuesday, August 18, 2026, 10:00am -11:00am