

August 2022

Care Coordination & Discharge Skill Building Workshop

- The County of San Diego HHSA Behavioral Health Services SUD Quality Assurance team is pleased to announce the next Skill Building Workshop for Care Coordination & Discharge.
- Due to limited available seating for the trainings, registration is required, and we are capping the registration to 35 attendees. If you register and become unable to attend, please cancel your registration via WebEx so that others on the waiting list may be able to register.
 - Date: **Wednesday, August 10, 2022**
 - Time: 1:00 p.m. to 4:00 p.m.
 - Where: via WebEx – [Please click here to register!](#)

Progress Notes Skill Building Workshop

- The County of San Diego HHSA Behavioral Health Services SUD Quality Assurance team is pleased to announce the next Skill Building Workshop for Progress Notes.
- Due to limited available seating for the trainings, registration is required, and we are capping the registration to 35 attendees. If you register and become unable to attend, please cancel your registration via WebEx so that others on the waiting list may be able to register.
 - Date: **Monday, August 15, 2022**
 - Time: 1:00 p.m. to 4:00 p.m.
 - Where: via WebEx – [Please click here to register!](#)

New: Upcoming Trainings for September 2022

- Please look out for future notice to register for the following virtual trainings:
 - ❖ Recovery Services Skill Building Workshop
 - Friday, **September 9, 2022**, from 9:30 a.m. to 12:30 p.m.
 - ❖ Peer Support Specialist Skill Building Workshop
 - Tuesday, **September 20, 2022**, from 9:30 a.m. to 12:30 p.m.
- An opportunity to build and develop a SUD Treatment provider's skill set in documentation by reviewing the County required forms and instructions, reviewing documentation examples, providing an opportunity to practice documentation skills, and discussing among peers best practices on various documentation topics.
- If you are in need of an ASL interpreter, please let us know at least 7 business days in advance so that we may secure one for you. We will be unable to guarantee accommodations for requests made later than 7 business days.

RCA Documentation Training

- Date and Time: Thursday, **September 29, 2022**, from 9:00 a.m. to 12:00 p.m.
- Where: via WebEx. *Registration will be required.*

Annual Quality Assurance DMC-ODS Training

The fourth Annual DMC-ODS Training will take the place of the August SUD Quality Improvement Partners (SUD QIP) meeting. The presentation will review data from the fourth year of DMC-ODS implementation, areas for quality improvement in the new Fiscal Year, and DMC-ODS and CalAIM requirements. Intended audience is Program Management and Quality Improvement/Assurance Staff.



- Date: **Thursday, August 18, 2022**
- Time: 9:00 a.m. to 12:00 p.m.
- Where: via WebEx – [Please click here to register!](#)

Reminder: DHCS Reviews/Audits

When a program is contacted by DHCS for any type of review/audit, be it a scheduled or unannounced visit, it is expected that the programs will immediately notify the assigned COR and SUD QA.

- QA will attempt to make staff available to participate in the review or exit interview.
- If a corrective action plan (CAP) is required for any type of review, QA will work with programs directly and will submit finalized CAP(s) to DHCS on behalf of the program.
- QA can be notified of reviews/audits at QIMatters.HHSA@sdcounty.ca.gov.

Reminder: Medical Record Review (MRR)

- The new fiscal year is upon us and MRR season has begun.
- Keep a look out for communications from your QA Specialist to schedule your program's MRR.

Update: Adolescent SUD Best Practices Guide replacing Youth Treatment Guidelines

- Youth Treatment Guidelines was replaced by the Adolescent SUD Best Practices Guide in 10/2020.
- The Adolescent Substance Use Disorder Best Practices Guide is designed to help counties develop specialized treatment for adolescents with substance use disorders and best serve the complex needs of this population.
- It is available on the DHCS website at: <https://www.dhcs.ca.gov/services/MH/Pages/Operations-Branch.aspx>.
- We are in the process of adding the guide to the Optum site under the "Manuals" tab.
- DHCS is in the process of updating SABG policy manuals to reflect this change. We will share more information when it becomes available.



Reminder: Daily Admissions

- Outpatient and residential programs shall have capacity to conduct daily admissions for all days they are open.
- Outpatient programs are expected to be open and offering admission appointments five (5) days a week at minimum.
- Residential programs are expected to be open and offering admission appointments 24 hours a day.

New: Quick Guide - Priority SDOH codes for problem lists

- Now on the [Optum SUD website under the toolbox tab](#)
- What are these codes and why are they important?
 - The priority Social Determinants of Health (SDOH) codes are an important component of treating and diagnosing the clients we serve with a client-centered and whole person treatment approach.
 - Utilizing these codes during the assessment process is designed to strengthen rapport building with clients while providing a clearer clinical picture of the individual's quality of life and access to resources. A client's behavioral health and substance use recovery can also be negatively impacted by these social and economic factors.

Reminder: Clients with Other Health Coverage (OHC)

- Providers are responsible for billing BHS client's private insurance, when applicable.
- It is recommended that providers request the client obtain an EOC or letter of non-coverage from their insurance company.
- If the EOC cannot be obtained, providers shall have the client sign an AOB and 42 CFR Part 2 ROI.
- For residential authorizations, programs shall submit either the EOC or letter of non-coverage or a signed AOB and 42 CFR Part 2 ROI for clients with OHC.
- See [BHS Information Sharing Notice – BHS 2020-02](#) for more information.

Reminder: National Suicide Prevention Hotline number change

- In July 2022, the National Suicide Prevention Lifeline (800-273-8255) transitioned to 988—an easy to remember three-digit dialing, texting, and chat code for anyone experiencing a suicidal or mental health crisis.
- The system is online and will route seamlessly into the ACL.



UTTM Tip of the Month: Telehealth services

- May still be provided to clients in DMC-ODS.
- Consent to telehealth services does not need to be documented in every progress note.
- Consent to telehealth services must be documented at least once in client file, prior to initiating the service.
- For more details related to telehealth service provision, see [BHIN 22-019](#)

BHS Health Plan Administration

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

- Don't forget to attest to your profile in the SOC application this month! By September 2022, DHCS requires all County BH Plans to submit mental health services provider data using 274 reporting requirements on a monthly basis. Reporting requirements are still being developed for SUD.
- 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.



Scholarship Opportunity: Medi-Cal Peer Support Specialist Certification

County Behavioral Health Services (BHS) is identifying individuals for scholarship opportunities for certification as Medi-Cal Peer Support Specialists. The scholarships cover all costs related to the application, training, and examination. Individuals who would like to apply for the initial certification scholarship must [fill out the online interest form](#) to be considered. Visit the [Q&A page](#) for a list of commonly asked questions and corresponding responses on Peer Support Services in BHS.

MAT Performance Improvement Project (PIP)

The proposal for the new MAT PIP was approved by the EQRO representative in early March 2022. This PIP will focus on implementing a standard protocol at admission to increase the proportion of clients with an opioid use disorder (OUD) who are dual enrolled in SUD treatment and medication assisted treatment (MAT).

The team at HSRC met virtually with the DMC-ODS CORs in early June to begin an initial discussion around current eligibility for MAT and barriers to access within the DMC-ODS that will help inform the next steps of the PIP and future interventions. During June, the team at HSRC learned of a CalAIM PIP [Pharmacotherapy for Opioid Use Disorder (POD)] with potential overlap with the proposed MAT PIP. When additional information about the POD CalAIM PIP is available, the team will assess feasibility of combining intervention implementation efforts.

Next steps include:

- Determine the degree of overlap between the proposed MAT PIP and the CalAIM POD PIP.
- Assemble a stakeholder workgroup to help guide the PIP project and interventions.
- Begin intervention design.

Proposed Study Question:

1. Will implementing a standard protocol in the DMC-ODS at admission for clients with OUD for referral to MAT increase the proportion of clients with MAT who are dual enrolled in residential/outpatient treatment and OTP by 5%?
2. Secondly, will implementation of this protocol increase the proportion of dual-enrolled clients who receive MAT within 90 days of their OUD diagnosis by 5%?

Connections PIP

In June 2022, HSRC continued ongoing efforts toward finalizing the Connections PIP. The HSRC program analyst responded with some questions about the SanWITS data, and the PIP lead worked on gathering information for the query. A project summary draft was generated internally for distribution to workgroup members.

Next steps include:



- HSRC program analyst will analyze SanWITS data for differences in recidivism between clients who received the MEET intervention and clients who did not (from the same LOC and time frame). Results will be shared with BHS for review and discussion.
- HSRC project manager will send a summary of the findings presented to EQRO to the Connections PIP Workgroup members to close out the project.

Access Times PIP June 2022

In June 2022, HSRC began development of the Access Times Non-Clinical PIP. Research staff reviewed available BHAB dashboards to evaluate trends and assess the most up-to-date urgent access time compliance rates across the DMC-ODS. HSRC also met with a DMC-ODS program manager to gather information about current usage, workflow, and barriers to meeting urgent access time compliance rates from their perspective. Additional information was requested from BHS staff who monitor these rates. From each of these contacts, HSRC has determined a number of issues surrounding urgent access time compliance and can begin to move forward with planning for a PIP workgroup.

In parallel with these efforts, the BHS Population Health team was assigned three new required CalAIM PIPs (two related to SUD) and made plans to work with the UCSD research centers and others to meet these deliverables. It was determined that the Access Times PIP would be placed on hold until FY 2023-24, if a problem was still evident in the data, and the CalAIM PIP, “Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)” would be used for both the CalAIM and EQRO deliverable requirements (a strategy endorsed by EQRO). However, on June 29, HSRC attended an EQRO webinar regarding the CalAIM PIPs and learned that further discussion would be necessary before committing to this initial decision.

Next steps:

- HSRC and BHS representatives will revisit plans for the Access Times PIP or the FUA PIP for meeting EQRO requirements.
 - If the decision is to continue development of the Access Times PIP, HSRC staff will initiate planning for an urgent access time compliance PIP workgroup.
 - If the decision is to pursue the FUA CalAIM PIP as the deliverable for the EQRO PIP, next steps will be determined after the initial workgroup discussion hosted by BHS Population Health.

Management Information Systems (MIS)

Important - Staff Professional Credential/Licenses/Certifications



- Audits are showing large discrepancies in what is reported for the NACT and what is on the staff profiles in SanWITS.
- SanWITS should be the source of truth.
- Providers must report any changes in staff profile information using the SanWITS User Modification or Termination form as changes occur.

SanWITS Encounter Diagnosis Section Change – anticipated Oct 2022

- The diagnosis will populate the encounter screen from the diagnosis list, but remain editable.
- This change is in preparation of forthcoming Contingency Management pilot.
- In addition, Diagnosis will be assigned through either the Adolescent ILOC (when applicable) or through the Diagnosis List.
- This will be temporary change until the new problem list is added to SanWITS.

Reminder: Effective September 1, 2022, these four records will be Discontinued in SanWITS

1. Adult Initial Level of Care Assessment
 2. Level of Care Recommendation
 3. Treatment Plan
 4. Diagnostic Determination Note (DDN)
- SanWITS trainings for the above 4 records have been discontinued as of August 1, 2022
 - Diagnosis will need to be created through the Diagnosis List.
 - ASAM result for Adults will need to be entered on the ASAM screen.

CalOMS Education – “Source of Referral” on Contact screen/Intake screen

- Source of referral reflects the client’s **principal** source of referral.

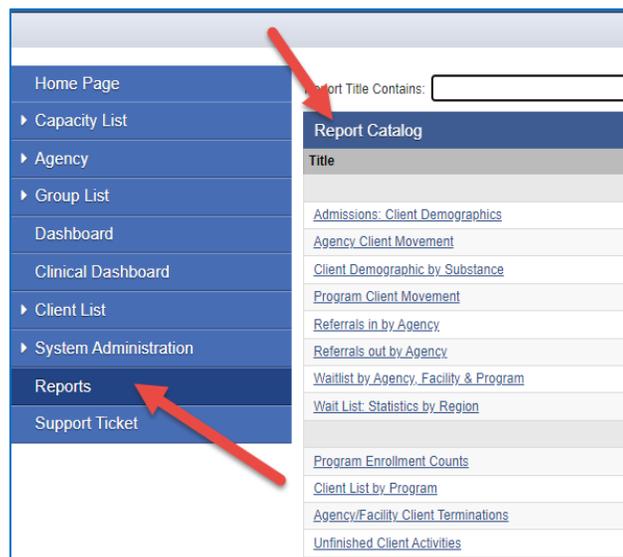
CODE	SOURCE	SOURCE DESCRIPTION
1	Individual	Includes self-referral, family member or friend. If a client reports themselves as “self-referred” but have been referred by another agency, use the client’s administrative paperwork as the referral source
2	Alcohol / Drug Abuse Program	Any program whose activities are primarily related to SUD abuse prevention, education, or recovery services
3	Other Health Care Provider	Physicians, psychiatrists or other licensed health care or mental health professionals, general hospitals, psychiatric hospitals, mental health programs, and nursing homes
4	School / Educational	School principals, counselors, teachers, a student assistance program, or any other educational agency
5	Employer / EAP	A supervisor, personnel officer, employee counselor, or an agent of an Employee Assistance Program (EAP)
6	12-Step Mutual Aid	Programs such as Alcoholics Anonymous, or Al-Anon
7	Probation or Parole	Any person that is sentenced under the law and is sent to treatment as a condition of probation or parole
8	Post-release Community Supervision (AB 109)	The realignment of Criminal Justice and Rehabilitation programs from the State to the counties
9	DUI / DWI	County or privately operated programs that provide counseling, education, and referrals for ancillary services for those individuals who have been mandated to complete a driving-under-the-influence program
10	Adult Felon Drug Court	Any Adult Drug Court client that is charged with, or convicted of a felony. Do NOT use this code for misdemeanants
11	Dependency Drug Court	Any adult client that is involved with the Child Protection Services (CPS) and referred to treatment by a Dependency Drug Court (Family Drug Court) Program. If the client is referred to treatment without the involvement of Dependency Drug Court (Family Drug Court), the referral should be coded as a CPS referral, see # 14 below.
12	Court / Criminal Justice	<ul style="list-style-type: none"> • Any referral from a police official, judge, prosecutor, probation or parole officer, or other person affiliated with a federal, state, or county judicial system, or is sentenced for a non-SUD related crime, • Is an Adult Drug court client charged with, or convicted of a misdemeanor, • Or is a juvenile charged with, or convicted of a crime and referred by a Juvenile Drug Court
13	Other Community Referral	Community and religious organizations or any agency that provides services in areas such as poverty relief, unemployment, shelter, or social welfare. Defense attorneys are included in this category
14	Child Protective Services	Any client that is referred into treatment by CPS and is NOT referred into treatment by a Dependency Drug Court (Family Drug Court) Program

NOTE: Source of Referral as it relates to the Criminal Justice Status field in the Admission record.

- If Source of Referral code values 7, 10, or 12 are entered, then Criminal Status field cannot equal 1-No Criminal Involvement, or the submission to the State will be rejected.
- If Source of Referral code value 8, (AB 109 clients) is entered, then the Criminal Justice Status must be a value 4, or the submission to the State will be rejected. The two fields – Source of Referral and Criminal Status, together, are used by DHCS to track AB 109.

SanWITS Report Catalog Changes

- Due to upcoming and previous SanWITS system changes, the Report Catalog has become out-of-date and contains some obsolete reports. MIS is conducting research into the usage and frequency of these reports to aid in the decision to eliminate the Report Catalog or limit the reports offered moving forward. Any reports deemed necessary will be developed to align with the system changes. Refer to email sent on Jul 21, 2022, titled [Action Required by 8/5/22 SanWITS Report Survey](#), and reminder email sent on Aug 2, 2022. We have requested providers to check with their staff to determine if any of the reports listed are readily utilized and the frequency of usage. Responses were due to MIS by Aug 5, 2022, in order to be considered in our decision.
- Reports can be found by clicking [Reports](#) on the left side navigation panel in SanWITS as seen below. Individual reports are listed by category.



SanWITS Quarterly Users Group Meeting – Let's Get Together!

Purpose of the Users Group - review and educate State Reporting for CalOMS, ASAM, DATAR, and Capacity, SanWITS updates, changes in system requirements, Billing & QA updates, and address User concerns.

- Next meeting: Monday, Oct 17, 2022, at 9:00 a.m. – 11:00 a.m.
- RSVP please, Webex invite will be sent
- At least one representative from each facility is highly recommended
- Quarterly meetings are expected to occur on the 3rd Monday each quarter (adjusted for holidays)
 - Jul, Oct, Jan, Apr
- ASL Interpreters have been requested for each meeting

We welcome and encourage you to send us agenda items to be covered during our User Group Meetings

[SUD MIS Support.HHSA@sdcounty.ca.gov](mailto:SUD_MIS_Support.HHSA@sdcounty.ca.gov)

Billing Unit - SanWITS Billing Classes

- As most of us are still adjusting to remote work, we're also learning new ways to continue servicing our customers. The SUD Billing Unit will continue conducting the billing training online.
- Our team will send an email to all programs to inquire what web conferencing platform or application you use for audio and/or video conferencing or training. Currently, the Billing Unit uses the Microsoft Teams application.
- Also, to schedule your billing training or if you have billing questions, please call our main line: 619-338-2584. You can also email us at ADSBillingUnit.HHSA@sdcounty.ca.gov.
- Prerequisite required: SanWITS Intro to Admin Functions training and one of the following encounter trainings – 1) Residential -Bed Management & Encounters training, or 2) Outpatient/OTP Group Module & Encounters training.

SanWITS Virtual Trainings Provided

- Register online with RegPacks at: <https://www.regpack.com/reg/dmc-ods>
- Registration will close 7 days prior to the scheduled class date to allow time for individual staff account setups and other preparation needed.
- Attendees for Virtual Training will receive an email on the morning of training between 8:30 AM – 8:45 AM
 - Trainer email with training materials, resources, and specific instructions for virtual class
 - If staff do not receive emails by 9:00 AM, email sdu_sdtraining@optum.com to get the issue resolved.
- Type of Training Classes:
 - 1) SanWITS – Intro to Admin Functions (IAF) – SanWITS functions that are applicable to All program types
 - 2) Residential Facilities - Bed Management & Encounter Training
 - 3) Outpatient / OTP Facilities – Group Module & Encounters Training
 - 4) SanWITS Assessments (SWA)– designed for direct service staff who complete Adolescent Initial Level of Care (LOC) assessments, Discharge Summary, and Risk and Safety Assessment
- **All required forms are located on the “Downloadable Forms” tab.**
Note: If the 3 forms are not fully processed by MIS 7 days prior to the scheduled training, staff will not be able to attend training regardless of receiving training confirmation.
- All credentials and licenses will be verified with the appropriate entities for SanWITS access.
- Upon completion of training, competency must be shown to gain access to the system. If competency is not achieved, further training will be required.
- **Staff are highly recommended to read the training packet thoroughly before entering information into the Live environment**
- Please remember, if unable to attend class, cancel the registration as soon as possible.



SUD Billing Announcements/Reminders

- A. Copies of the OHC and Medicare Advantage emails sent to the SUD Providers on 07/08/2022 are now posted on the Optum website- BHS Resources- Billing folder. [Drug Medi-Cal Organized Delivery System \(optumsandiego.com\)](http://optumsandiego.com)**

SUD Billing Announcement: Medicare Advantage Plan Rules for OTP Providers (msg)	Email announcement regarding Medicare Advantage billing rules
SUD Billing Announcement: Other Health Coverage Rules for Outpatient Providers (msg)	Email announcement regarding OHC Rules
SUD Billing Announcement: Other Health Coverage Rules for Residential Providers (msg)	Email announcement regarding OHC Rules

B. For Outpatient and Residential Programs

- Please review all the claims on hold (service dates from January 2022 to current) that may have been impacted by the Medicare Advantage certification delay for clients with dual coverage (those with Medicare Part C plans: Blue Shield Promise Part C, Health Net Part C, and Molina Health Part C). These claims should be released, batched, and billed to DMC while waiting for the 2022 Medicare Advantage Coverage certification.

Sample eligibility response: with Medicare Part C Molina

Eligibility Message: SUBSCRIBER LAST NAME: [REDACTED] EVC #: [REDACTED] CNTY CODE: 37. PRMY AID CODE: 6H. 1ST SPECIAL AID CODE: 80. MEDI-CAL ELIGIBLE W/ NO SOC/SPEND DOWN. HEALTH PLAN MEMBER: PHP-COMMUNITY HLTH GRP; MEDICAL CALL (619)422-0422. PART A, B AND D MEDICARE COV W/MEDICARE ID [REDACTED] MEDICARE PART A AND B COVERED SVCS MUST BE BILLED TO MEDICARE BEFORE BILLING MEDI-CAL. MEDICARE PART D COVERED DRUGS MUST BE BILLED TO THE PART D CARRIER BEFORE BILLING MEDI-CAL. OTHER HEALTH INSURANCE COV UNDER CODE F - MEDICARE PART C HEALTH PLAN. CARRIER NAME: MOLINA HEALTHCARE. COV: OIM DVR.

Subscriber Name: [REDACTED]	Subscriber ID: [REDACTED]
Subscriber Birth Date: [REDACTED]	Issue Date: 07/19/2022
Primary Aid Code: 6H	First Special Aid Code: 80
Second Special Aid Code:	Third Special Aid Code:
Responsible County: 37-San Diego	Medicare ID: [REDACTED]
Primary Care Physician Phone:	Service Type: OIM DVR
Service Date: 02/01/2022	Trace Number/Eligibility Verification Confirmation Number: [REDACTED]

- Please follow the OHC Rules (please see item A) if the OHC has not responded nor provided a suitable response to your submitted claims after 90 days.

C. For OTP

- For clients with dual coverage (Medicare or Medicare Part C), please bill the primary plan first, do not bill straight to DMC.
- Please follow the Medicare Advantage rules (please see item A) if the Medicare Part C plan has not responded nor provided a suitable response to your submitted claims after 90 days.
- Please remember to submit the Medicare or Medicare Part C EOB to the adsbillingunit.hhsa@sdcounty.ca.gov as soon as it becomes available.

D. Justice Override

- Clients who are identified as justice override must be billed as county billable.
- In SanWITS, please release to billing, place on hold, and use the hold reason county billable.

Reminder: For general information on COVID-19

Including the current case count in San Diego County, preparedness and response resources, and links to information from the California Department of Public Health (CDPH), Centers for Disease Control and Prevention (CDC), and the World Health Organization (WHO), please visit the [County of San Diego COVID-19 webpage](#).

For local information and daily updates on COVID-19, please visit www.coronavirus-sd.com. To receive updates via text, send **COSD COVID19** to **468-311**.



Reminder: COVID-19 | Behavioral Health Services (BHS) Provider Resources

- Behavioral Health Services (BHS) is committed to keeping our providers updated with emerging information related to the Coronavirus Disease 2019 (COVID-19) response.
- Follow the link to access the [BHS Provider Resources Page](#) which is updated regularly with the most recent communications and resources that have been sent to BHS providers.

Reminder: DHCS COVID-19 Response Resources

The California Department of Health Care Services (DHCS) has frequently updated resources regarding provision of Behavioral Health Services during the COVID-19 crisis. For more information, visit the DHCS COVID-19 Response page at: <https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-response.aspx>

Communication

- Billing questions? Contact: ADSBillingUnit.HHSA@sdcounty.ca.gov
- SanWITS questions? Contact: [SUD MIS Support.HHSA@sdcounty.ca.gov](mailto:SUD_MIS_Support.HHSA@sdcounty.ca.gov)
- DMC-ODS Standards/SUDPOH/SUDURM questions? Contact: QIMatters.HHSA@sdcounty.ca.gov
- CalAIM and/or Peer related Q&As? Contact: bhs-hpa.hhsa@sdcounty.ca.gov



**Is this information filtering down to your counselors, LPHAs, and administrative staff?
Please share the UTTM – SUD Provider Edition with your staff and keep them *Up to the Minute!*
Send all personnel contact updates to QIMatters.hhsa@sdcounty.ca.gov**