

June 2022

RESCHEDULED: DMC-ODS Residential Documentation Training



- Please note the DMC-ODS Residential Documentation Training (announced in the May 2022 UTTM) will no longer take place on June 15, 2022
- The DMC-ODS Residential Documentation Training has been rescheduled to Monday, June 13, 2022, from 9:30 a.m. to 1:00 p.m.

DMC-ODS Residential Documentation Training

- The County of San Diego HHS Behavioral Health Services SUD Quality Management team is pleased to announce the next training for DMC-ODS Residential Documentation. Targeted population is all DMC-ODS residential treatment providers: Program Managers, LPHAs, Counselors, Case Managers, and Quality Assurance staff involved in providing SUD treatment services.
- A review of DMC-ODS residential treatment, documentation standards and billing requirements.
- Due to limited available seating for the trainings, registration is required, and we are capping the registration to 75 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, June 13, 2022**
 - Time: 9:30 a.m. to 1:00 p.m.
 - Where: via WebEx – [Please click here to register!](#)

DMC-ODS Licensed Practitioner of the Healing Arts (LPHA) Meeting

- The County of San Diego HHS Behavioral Health Services SUD Quality Management team is pleased to offer an LPHA skill building workshop as an opportunity for discussion and sharing of ideas on the role of the LPHA, including documentation of medical necessity.
- 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, June 22, 2022**
 - Time: 1:00 p.m. to 3:00 p.m.
 - Where: via WebEx – [Please click here to register!](#)

New: Upcoming Trainings for July 2022

- Please look out for future notice to register for the following virtual trainings:
 - ❖ DMC-ODS Outpatient Documentation Training
 - Thursday, July 14, 2022, from 1:00 p.m. to 4:30 p.m.
 - A review of DMC-ODS outpatient treatment, documentation standards and billing requirements.
 - ❖ Treatment Planning Skill Building Workshop
 - Friday, July 29, 2022, from 9:30 a.m. to 11:30 a.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.

SUD Quality Improvement Partners (QIP) Meeting

The QIP is a monthly meeting for all DMC-ODS Providers to get the most up to date information on all things Quality Management, Management Information Systems and Performance Improvement. The expectation is that this meeting is attended by all DMC-ODS contracted providers. The program manager and quality assurance staff monthly attendance is expected as part of your contract. If you are unable to attend, please send a designee to cover.

- Date: **Thursday, June 23, 2022**
- Time: 10:00 a.m. to 11:30 a.m.
- Where: via WebEx - Participation information sent by email prior to the meeting.

Save the Date: Annual 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 – *Registration information coming soon!*



All Behavioral Health Services Providers | Quarterly Tele-Town Hall

- Due to public health guidelines, the SUD Treatment Providers meeting will be on hold until further notice.
- In the meantime, all providers are encouraged to attend the All BHS Providers COVID-19 Tele-Town Halls, which will be scheduled to occur quarterly.
- Look for a separate invite/email to be sent prior to the tele-town halls.

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

- DHCS will review, validate, and certify the provider network of each DMC-ODS County. They must ensure adequate access to appropriate service providers in accordance with Title 42 of the Code of Federal Regulations parts 438.207, 438.68 and 438.206(c)(1), commonly known as the Mega Regs.
- DHCS will use this information to ensure compliance with CMS network adequacy requirements. In order to demonstrate network adequacy, DMC-ODS Counties must submit a completed Network Adequacy Certification Tool (NACT).
- The SOC Application is a web application designed as a one-stop shop for providers to access and submit all documentation required by the Mega Regs. The data from the SOC Application is used to complete the NACT to demonstrate San Diego's DMC-ODS network adequacy.
- Providers are expected to **frequently** update their current profile (community-based locations, cultural competency hours, etc.) in the SOC application **as changes occur** to show accurately on the provider directory.
- Providers are expected to attest to all SOC information **monthly**.
- Program managers are expected to visit the SOC to review program's information and attest to information **monthly**.
- New hires and transfers are expected to register **promptly**, and attest to information once registration is completed.
- For **tips, FAQs, and other resources** on how to complete the registration and/or attestations, visit the [SOC Tips and Resources](#) website.
- If you have any questions regarding registration, login, or the SOC Application, please reach out to the Optum Support Desk at 800-834-3792, Option 2, or email sdhelpdesk@optum.com.

Reminder: Persons with Disabilities (PWD) Accessibility Assessment Requirement

- New programs and programs relocating to a new location are required to complete the PWD Accessibility Assessment to determine if you can accept all persons with disabilities.
- The assessment form is posted on the Optum site under the SUDPOH tab titled [Appendix E.4](#).
- For more information about the PWD requirement, see SUDPOH page E.15-17.



New: CalAIM Training Plans

- QM is developing required training plans for CalAIM updates related to Screening Tools, Transition Tools and Documentation requirements.
- The training plans will need to include information about relevant staff required to attend training.
- QM will be proposing a minimum number of staff to attend with a recommendation for certain positions or roles to be included based on areas of focus.
- Training attendance will be monitored by QM for compliance, as DHCS is requiring the percentage of identified staff trained to be routinely reported.
- Programs will be able to identify specific staff based on QM recommendations.
- Additional communication is being developed that will include the proposed details, requirements, and timelines.

Update: Transitional Care Services (TCS)

- To align with CalAIM changes, the TCS program enrollment is being updated to remove restrictions previously in place and to provide some clarity about purpose.
- Currently TCS is a SanWITS program enrollment to allow billing before a CalOMS admission or after a CalOMS discharge for limited times and for care coordination only.
- Starting 7/1/22, the SanWITS program enrollment TCS will end, and the new SanWITS program enrollment will be available called “Before Admission/After Discharge”.
- The billable services for outpatient and residential remain the same and are not limited to care coordination:
 - Outpatient: individual counseling or case management
 - Residential: case management

New: Health Plan Administration Team

BHS has a new Health Plan Administration Team! For further CalAIM and/or Peer related Q&As, please email: bhs-hpa.hhsa@sdcounty.ca.gov



Reminder: Medication Monitoring for OTP programs and Extended MAT Services

- Medication Monitoring for the period of April-June (Q4) will be due by July 15, 2022.
- The tool has been updated to include a new question for OTPs regarding the testing requirement that was implemented on 1/1/2022 for Hepatitis C, Fentanyl and Oxycodone; it requires a yes or no response.
- The updated Medication Monitoring forms are posted to the Optum site under the “Monitoring” tab.
- Programs providing additional or extended MAT services will need to start the Medication Monitoring process. See SUDPOH G.8.
- Reminder – Ensure all the fields are completed, including contract number, DMC provider number, discipline (license designation such as MD or LMFT), and job title.
- For programs with nothing to report for the quarter, you must complete the required forms to submit indicating the status for the quarter. Emails without the forms will not be accepted.
- Submit to QIMatters.HHSA@sdcounty.ca.gov or fax (619) 236-1953.

Update: April Information Notices of interest

- 22-019: Outlines changes to DMC-ODS documentation requirements.
- 22-022: Provides guidance about advertising requirements for SUD treatment programs.
- 22-023: Provides guidance for liability insurance requirement for licensed residential SUD programs.
- 22-024: Gives direction regarding requirement to assess clients for tobacco use disorder, provide resources and include on a treatment plan; requirement is retroactive to 1/1/2022.
- 22-025: Provider guidance for DHCS licensed SUD programs to be compliant with new requirement to carry naloxone and train staff; requirement is retroactive to 1/1/2022.
- 22-026: Specifies the service components for claiming Peer Support Services.
- 22-031: Reminder that MC beneficiaries are entitled to transportation by their MC Managed Care Plans for behavioral health appointments.

Update: DHCS Coverage Ambassador

- **The COVID-19 PHE will end soon and the process of redetermining eligibility for millions of Medi-Cal beneficiaries will begin.**
- To minimize beneficiary burden and promote continuity of coverage for beneficiaries, DHCS has created a Coverage Ambassador role.
- DHCS Coverage Ambassadors will assist in providing critical information to beneficiaries so they know what to expect and what they can do to keep their Medi-Cal health coverage.

❖ **How you can help:**

- ✓ Become a **DHCS Coverage Ambassador**.
- ✓ Download the Outreach Toolkit on the [DHCS Coverage Ambassador webpage](#)
 - The toolkit includes social media, call scripts, noticing, and website banners.
- ✓ [Join the DHCS Coverage Ambassador mailing list](#) to receive updated toolkits as they become available.
- ✓ **Encourage Beneficiaries to Update Contact Information**
 - Multi-channel communication campaign to encourage beneficiaries to update contact information with County offices.
 - Flyers in provider/clinic offices, social media, call scripts, website banners.
 - Remind Beneficiaries to watch for Renewal Packets in the mail. Remind them to update their contact information with County office if they have not done so yet.



- Call Script Samples:

Beneficiary Caller	County BHS Response
Do I need to report any household changes to keep my Medi-Cal coverage?	Yes, you are required to report any changes in your household, such as income, if someone becomes pregnant, a new household member, and any changes to your address, to your local county office. This may help ensure that you continue to receive your Medi-Cal coverage after the end of the federal COVID-19 public health emergency. For more information call: 1-866-262-9881.
Are we required to fill out and return renewal packets when we receive them?	Yes, it is important that Medi-Cal beneficiaries respond to county requests for updated information, including renewal packets. This will make sure the county has the most current information it needs to renew your Medi-Cal coverage. It will also help the county see if you qualify for other no-cost or lower cost coverage. For more information call: 1-866-262-9881.
Will I be discontinued from Medi-Cal coverage if I got a raise during the COVID-19 public health emergency?	Please report income changes by calling 1-866-262-9881. If your income goes up or your household changes, as long as the COVID-19 public health emergency continues, you will not lose your Medi-Cal coverage.
I moved. Whom should I tell that I moved?	You may report this change by phone, online, mail, fax, or in person. Visit the County of San Diego Medi-Cal Program website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ssp/medi-cal_program.html or call 1-866-262-9881 for more information.
How do I sign up for an online account to access my Medi-Cal case or report changes?	You can access your Medi-Cal case, complete your annual renewal, or report changes to your case by creating an online account. You can create one today by going to benefitscal.com and selecting the "Create an Account" link in the upper right hand corner of the page. For more information call: 1-866-262-9881.

UTTM Tip of the Month

- We would like to remind all providers that your assigned QM Specialists are available for more than your annual Medical Record Review.
 - ✓ Questions about most things DMC-ODS
 - ✓ Technical Assistance/Training
 - ✓ Understanding regulations
 - ✓ Navigating NOABD's
- *You can always send general questions to QI Matters.*

Reminder: Serious Incident Reports

Please be advised the Serious Incident Reporting form (SIR) has been updated and will be available on the Optum website 7/1/22.

- Updates to form include:
 - ✓ “written and verbal” drop down selection for Type of Notification
 - ✓ Time of incident prompt box with “unknown” option check box
- As a reminder:
 - ✓ please ensure you answer/address all prompts, if something does not apply, mark N/A.
 - ✓ SUD **Residential** programs **only** (outpatient programs do not have this requirement) are required to contact DHCS for SIR’s related to: death, injury that requires medical attention, communicable diseases, poisoning, natural disaster and/or fires or explosions on premises.



Reminder: Residential and Counselor Complaints

- Certain incidents must be reported by residential SUD programs to DHCS. Outpatient programs are not required to report incidents but are able to if they would like to.
- Incidents include:
 - Death of any resident from any cause, even if death did not occur at facility.
 - Any facility related injury of any resident which requires medical treatment
 - All cases of communicable disease reportable under Section 3125 of the Health and Safety Code or Section 2500, 2502, or 2503 of Title 17, California Administrative Code shall be reported to the local health officer in addition to the Department
 - Poisonings
 - Natural disaster
 - Fires or explosions which occur in or on the premises
- Reporting methods include:
 - Programs must make a telephonic report to DHCS Complaints and Counselor Certification Division at (916) 322-2911 within one (1) working day.
 - The telephonic report must be followed with a written report to DHCS within seven (7) days of the event.
 - Death reports must be submitted via fax to the DHCS Complaints and Counselor Certification Division at (916) 445-5084 or by email to DHCSLCBcomp@DHCS.ca.gov.
 - [Form 5079 Unusual Incident/Injury/Death Report](#)

Reminder: DMC Recertification Requirements

- DHCS requires DMC providers complete a recertification process every five years in order to maintain their DMC certification.
- DHCS will notify providers in writing when they are required to submit a continued enrollment application.
- DHCS may allow providers to continue delivering covered services to clients at a site subject to on-site review by DHCS as part of the recertification process.
- Providers are encouraged to review recertification dates and requirements.
- NOTE – DHCS is issuing notices to providers who have not billed for a year, requesting status in order to continue as an active DMC provider. If your program receives this notice, please email QI Matters.
- NOTE – DHCS has resumed in person, unannounced recertification visits. If your program is notified of a visit, please email QI Matters.

Reminder: CalFRESH Benefits for Residential Clients

- Residential SUD programs cannot require clients to apply for CalFRESH.
- Residential SUD program must be identified by DHCS as an authorized food retailer to use a client’s CalFRESH benefits for food purchases on behalf of the client while they are in treatment at the program.
- Using a client’s CalFRESH benefits for food purchases on behalf of a client without having the DHCS designation as an authorized food retailer may result in residential SUD programs being held liable for misuse of client benefits.
- Unless identified as an authorized food retailer, residential SUD providers shall purchase food for clients using allocated budgets.
- See [All County Letter 19-51](#) for more information.



Reminder: Annual Addiction Medicine Training Requirement

- Medical Directors and LPHA staff must complete 5 hours of addiction medicine training per **calendar year**.
 - Physicians shall receive a minimum of five hours of continuing medical education related to addiction medicine each year.
 - Professional staff (LPHA) shall receive a minimum of five hours of continuing education related to addiction medicine each year.
- BHS is required to monitor compliance of this requirement for all LPHA and MD staff. SUD QM will be providing support for COR teams monitoring this requirement.
- A [web-based submission form](#) is now available to report trainings.
- Evidence shall be submitted to QI Matters for review to confirm the training meets the requirement. Evidence must include CEU/CME information to be accepted.
- Contract monitors will be reviewing reported trainings regularly and discussing compliance of the annual requirement with programs during annual site visits/desk reviews. Non-compliance may result in corrective action.
- Tip sheet is in the process of being posted to the Optum site under the “Monitoring” tab.

Reminder: Record Retention

- Per [WIC 14124.1](#), records are required to be kept and maintained under this section shall be retained:
 - by the provider for a period of 10 years from the final date of the contract period between the plan and the provider,
 - from the date of completion of any audit,
 - or from the date the service was rendered, whichever is later, in accordance with Section 438.3(u) of Title 42 of the Code of Federal Regulations

Reminder: Client Contacts, Timely Access Monitoring, and Urgent Requests

- All client requests for services shall be documented as an initial contact with the first, second and third available appointment dates regardless of date requests made by clients. This includes when clients are asked to call back daily to check availability.
- Client contacts documenting requests for services shall include if the request is ‘urgent’.
 - Requests for WM shall be considered ‘urgent’.
 - Clients referred to outpatient due to limited residential capacity, shall be considered ‘urgent’.
- Urgent care is defined as a condition perceived by a beneficiary as serious, but not life threatening. A condition that disrupts normal activities of daily living and requires assessment by a health care provider and if necessary, treatment within 48 hours.
- For programs not open 24/7, consider whether or not you can provide a service within 48 hours and whether the client’s condition would be worse if services were not provided within 48 hours.
- Client contact data is required for clients admitted and those not admitted to programs.
- Capturing this data is important to ensure our access time data is accurate.
- Client addresses shall be obtained from clients in order to issue NOABD(s) for non-compliance with outpatient and OTP timely access standards.
- Access times should be measured as the phone call/in-person request to the clinical service that determines next steps for treatment.

Management Information Systems (MIS)

Upcoming SanWITS Promotion 21.1.6

- In mid to late August, we anticipate updating the SanWITS system. The new SanWITS will include features such as a new user interface, enhanced architecture, CalOMS outcomes measures, and a diagnosis rewrite. The overall optics and functionality will shift significantly.
- Resources: To support existing users, training manuals and video tutorials for Assessments and Treatment Plans have been uploaded to the Optum website: [SanWITS Training \(optumsandiego.com\)](http://optumsandiego.com). The resources can be identified by the acronym “OM”, for Outcomes Measures, which differentiates them from the resources that apply to the current SanWITS processes. Resources pertaining to Intro to Admin Functions, as well as Encounters, are expected to be available in early July. Existing users have the option to re-attend training after the mid to late August promotion if they would prefer a hands-on opportunity.





- For new staff, the recommendation is that they postpone SanWITS training until after the August promotion because they will gain the most value learning the system in the format of the future. Attending training that will evolve significantly shortly thereafter would likely not be the best use of their time. However, if it is not possible to defer SanWITS training until after mid to late August, limited classes will still be available for registration through the standard RegPack link: [Online Registration Software for SanWITS User Training \(regpack.com\)](https://regpack.com). An example would be if a program is unable to meet its operational needs with its current staff and their individual system access levels, and urgent training is necessary.

Reminder - CalOMS Errors

- In the Admission, Annual Update and Discharge records, section Substance Use – The state only accepts letters or numbers in the field for the drug names.
- **Do Not** use special characters such as commas or dashes, etc., as this will cause an error and the record will be rejected (not accepted).

Reminder – Disallowed Services

- Encounters are for billable services rendered and **should not** be used for “never billable” services
- For disallowed service, mark the encounter as seen below
 - Note Type = Non-Billable
 - Billable= NO
 - Disallowed = Yes
 - Disallowed Reason = select appropriate reason from drop down menu
- Coming soon - an SSRS report is being developed to help identify encounters that need be corrected for disallowed services.

The screenshot shows the SanWITS encounter form interface. At the top, it indicates 'Encounter 1 of 2'. The form contains several dropdown menus and checkboxes:

- Note Type:** A dropdown menu with 'Non Billable' selected, highlighted by a red box.
- ENC ID:** A text input field.
- Program Name:** A dropdown menu.
- Service:** A dropdown menu.
- Disallowance Reason:** A dropdown menu, highlighted by a red box.
- Start Date:** A date picker.
- End Date:** A date picker.
- Billable:** A checkbox set to 'No', highlighted by a red box.
- Disallowed:** A checkbox set to 'Yes', highlighted by a red box.

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 & QM updates, and address User concerns.

- Next meeting: Monday, July 18, 2022, at 9:00 am – 11:00 am
- 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



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 Diagnostic Determination Note (DDN), Level of Care (LOC) assessments, Discharge Summary, and Risk and Safety Assessment
 - 5) SanWITS Treatment Plan (STP) -designed for direct service staff who complete and/or finalize Treatment Plans (prerequisite SWA training)
- **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 Unit

To All Providers:

- Prior to May 1, 2022, only Undocumented Immigrants 0 to 25 years old are eligible to full scope Medi-Cal. As of May 1, 2022, the age limit has been expanded to include Undocumented Immigrants 50 yrs. and older who are now eligible to State Funded full scope Medi-Cal.
- Undocumented Immigrants between 26 to 49 years old are not eligible except when pregnant.
- The county will see a denial CO/96/MA43 if the beneficiary is not eligible under the over 50 expansion.

To OTP Providers:

- CO-24: Charges are covered under a capitation agreement/managed care plan.
- CO-24 is not a denial that we can use to bill the services to Medi-Cal. The OTP provider must bill the “capitated plan” first to get the proper adjudication of the claims. Make sure to re-verify the Medicare eligibility on Noridian and bill the correct private insurance.



PPSDS (Primary Prevention Substance Use Disorder Data Service)

The State of California administers the Primary Prevention SUD (substance use disorder) Data Service (PPSDS) system for counties and providers to report substance abuse primary Strategic Prevention Plans (SPP), programs, and service activities funded by the Substance Abuse Prevention and Treatment Block Grant (SABG) primary prevention set-aside. The CA Department of Health Care Services (DHCS) utilizes prevention data for the annual SABG report and application as well as other national, state, and local data requests. SUD prevention contractors are required to enter activity data into PPSDS as they occur (or at least monthly).

For more information regarding the DHCS SUD Primary Prevention Data Collection and Reporting Service, please see [DHCS SUD Primary Prevention Data Collection and Reporting Service \(ca-cpi.org\)](https://www.ca-cpi.org/dhcs-sud-primary-prevention-data-collection-and-reporting-service):

- The PPSDS Data Use Entry Guide can be accessed at: [PPSDS-Data-Entry-User-Guide.pdf \(ca-cpi.org\)](https://www.ca-cpi.org/ppsds-data-entry-user-guide.pdf)
- Data review requirements can be accessed at: [Quality Prevention Monitoring Desk Guide \(ca-cpi.org\)](https://www.ca-cpi.org/quality-prevention-monitoring-desk-guide)
- Data quality standards which define such standards to ensure counties and sub-contractors enter quality data into the prevention data system are available at: [PPSDS-Pv-Data-Quality-Standards.pdf \(ca-cpi.org\)](https://www.ca-cpi.org/ppsds-pv-data-quality-standards.pdf)
- For technical assistance requests or other questions, please contact David Lee at david.lee@sdcounty.ca.gov.

For additional information regarding DHCS Primary Prevention resources, please visit [Primary-Prevention \(ca.gov\)](https://www.ca.gov/primary-prevention).

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: 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: 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**