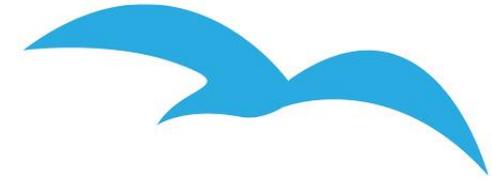


# SanWITS Quarterly User's Group



Outpatient, OTP, and Residential Providers

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July 17, 2023



# Housekeeping Guidelines



All attendees will be muted upon entering the meeting.



If calling from a phone line, please DO NOT place the call on hold. If you need to take another call, please hang up and call back.



To help with connectivity issues and to easily be able to see the ASL interpreter, video will be turned off upon entering the meeting.



Please use the 'Raise Hand' feature or send a 'Chat' to All Panelists to ask a question.



Attendance will be taken from the username listed. If your name does not appear, please send your name and the name of your program through Chat or Email [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov).



# AGENDA



- State Reporting
- System Administration
- System Reminders, & updates, Demonstration
- Quality Assurance (QA)
- Billing
- Training
- Q & A



# State Reporting

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ASAM

CALOMS

DATAR

CAPACITY



# ASAM Monthly Reporting

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**ASAM Assessments and Brief Initial Screening results must be reported to Department of Health Care Services (DHCS)**

**MIS team generates a data extract from SanWITS which is uploaded to the state website**

- ASAM and Brief Screening results data must be entered on the SanWITS ASAM Summary Screen to be included in the extract
  
- Currently this is happening in two ways
  - Through the SanWITS Adolescent ILOC Assessment
  - OR**
  - Manually entering the data – this is to be done when Assessments or Brief Initial Screenings are completed in paper form
  
- If Facility is using their own EHR or using paper forms for ASAM assessments and Brief Initial Screenings, the results data must be manually entered on the SanWITS ASAM Summary Screen



# CalOMS

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## Admission –

- **Days Waited to Enter Treatment** – How many days was the client on a waitlist before being admitted to treatment program
  - Should only include days waited due to unavailable slots in a particular program or modality
  - Should not include days waited due to a client’s unique circumstance such as incarceration
  
- **Number of Prior Treatment Episodes** – What is the number of prior episodes in **any** SUD Treatment program
  - This encompasses all agencies



# CalOMS

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## Admissions –

- **Medication Prescribed as Part of Treatment** – This field is intended for OTP providers who dispense SUD treatment medications such as Methadone
  - Non OTP providers should answer NONE
  
- **Current Living Arrangements** – Client’s living status at time of Admission
  - Three new more specific values added for Homeless
    - Homeless/In Shelter
    - Homeless/Out of Shelter
    - Homeless/Living w Other(s)
  - If Homeless, use five zeros (0) as the zip code 00000



# CalOMS Email Reminders

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Complete All Open Admissions and Correct the Errors in Red by the Due Date.

After Completing Corrections, [Please Respond to the Email.](#)

In order to prevent re-submission errors, please contact SUD MIS Support when correcting or updating an Admission, Annual Update, or Discharge record that has previously been sent to the state. It is important to make sure the record is properly resubmitted to the State.



# DATAR Training

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## Submitting a DATAR report:

- Monthly reports are submitted through the Data Management tab on the DATAR website
- Reports are submitted per CalOMS# (facility site)
- Reports consist of a set of questions (1 page) for each Level of Care the facility is approved to provide (listed on DHCS's Master Provider File (MPF))
  - Such as OS, IOS, Residential, Withdrawal Management, OTP
- Each submission can be exported as a pdf or excel file from the submission screen

## Updating an Existing Report

- Edit / Correcting is available for two months after the submitted date of the report (make sure to review each entry carefully)
- Edits are done through the Data Management tab

## How do I get access to OR deactivate a user from DATAR?

- **DATAR access and deactivations** are requested by your County approvers
- Send an email request to the SUD Support desk at [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov)



# DATAR – STEPS TO ACIEVE SUCCESS

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- Track DATAR during the month
- Report can be entered between the 1<sup>st</sup> thru the 7<sup>th</sup> of the month for the previous month. Don't wait until day 7.
- Have multiple staff trained and responsible for submitting DATAR
- Request Access two weeks in advance of reporting – must include:
  - **Staff name**
  - **Staff business address and phone #**
  - **CalOMS 6 digit # for facility 37XXXX**

Trouble accessing DATAR: [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov)



# DHCS – CAPACITY REPORTING

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- Providers are responsible to notify DHCS and COR upon reaching or exceeding 90% of its treatment capacity within 7 days via email to: [DHCSPerinatal@dhcs.ca.gov](mailto:DHCSPerinatal@dhcs.ca.gov)
- This is for both Perinatal and Non-Perinatal programs (DHCS Perinatal Address is where capacity is being processed and is not meant to identify the type of program such as perinatal)
- CORs can be cc'd on the email to DHCS vs a separate email
- **Important – Subject Line on the email should read “Capacity Management”**
  - **From:** (Provider)
  - **Sent:** (date sent)
  - **To:** [DHCSPerinatal@dhcs.ca.gov](mailto:DHCSPerinatal@dhcs.ca.gov)
  - **Cc:** (COR)
  - **Subject:** Capacity Management
- 90% capacity is reported per CalOMS#, Agency, & Facility. Be sure to include the CalOMS#(s) in the body of the email.
- If the program has reported reaching or exceeding 90% in the DATAR website, there should be emails to DHCS and COR for all days reported.



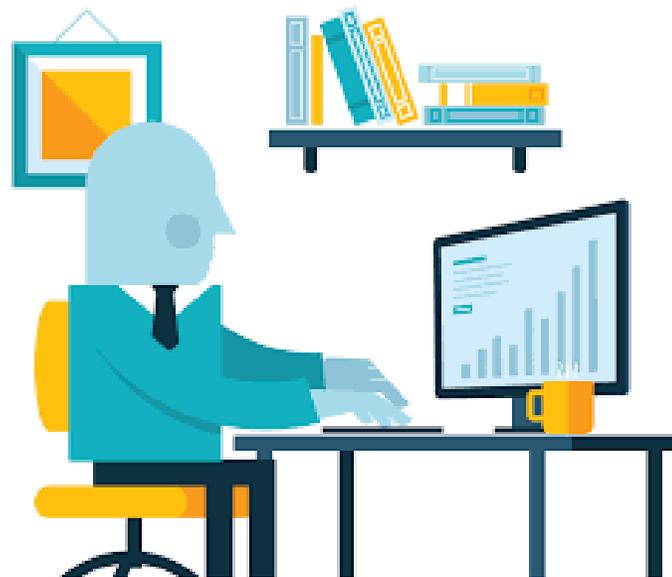
# PROVIDER CHANGES



- MUST report any modifications to information previously submitted to DHCS within 35 days from the date of the change. Most changes may be reported on the DHCS 6209 form.
- See [Medi-Cal Supplemental Changes DHCS6209](#) for further details
- MUST report through PAVE system so that it is reflected on DHCS Master Provider File (MPF)
  - **Legal Entity:** The name of the administrative /corporate office. This should match what is on file with the Internal Revenue Service (IRS)
  - **Doing Business as Name (DBA):** the name of the facility where services are provided. This name may or may not be the same as the Legal Entity.
  - **Director Name, Email, & Phone Number:** The name, email, and phone# for the director of the Legal Entity
  - **Program Contract Name, Email, & Phone Number:** The name, email, and Phone # for the program contact at the facility where the services are being provided (not administrative or corporate address).
- Reference the SUDPOH for additional Information and instruction
  - Provider changes must also be reported to:
    - [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov)
    - [QIMatters.HHSA@sdcounty.ca.gov](mailto:QIMatters.HHSA@sdcounty.ca.gov)
    - Assigned Program COR



# SYSTEM ADMINISTRATION



# SYSTEM AND DATA SECURITY



- All Staff providing direct services must submit:
    - National Provider Identifier (NPI)
    - Professional Credential/License type and number
    - Taxonomy code
    - DEA# where applicable (any prescribing facilities and prescribing staff)
- 
- Staff are given SanWITS access to specific agency/facility based upon the programs where they work
  - Staff are also given access to specific menus based on their respective job functions (role based).
  - Staff must provide a SanWITS User Form with the signature of the contracted provider supervisor or program manager's signature
  - Staff must have the contracted provider's business email address



# SYSTEM AND DATA SECURITY

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- Employee is required to submit an [Electronic Signature Agreement \(ESA\)](#). It is important that each individual using an electronic signature actively maintain its security according to County requirements and not share their user id/password/pin.
- Employee and employee's supervisor must also read and sign the [County's Summary of Policies \(SOP\)](#) form. Before authorization of account setup, the end user must meet all County requirements to protect the County data.
- Program Manager/Supervisor shall immediately notify SUD MIS unit whenever there's a change in a staff's information such as demographics, name, email, job title, credential/licensure, job roles, facility assignment, or [termination](#).
- Under no circumstances shall a provider's staff who has terminated employment have access to the EHR (SanWITS). This would constitute a serious violation of security.



# STAFF TERMINATION PROCESS

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## Routine User Termination

- In most cases, staff employment is terminated in a routine way in which the employee gives advanced notice.
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- Within one business day of employee termination notice, the program manager shall fax to the SUD MIS Unit (855) 975-4724 or scan and email to [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov) a completed SanWITS User Modification or Termination Form with the termination date (*will be a future date*).
- The SUD MIS Unit will enter the staff expiration date in SanWITS which will inactivate the staff account at the time of termination.
- The user will also be added to the terminated staff log.



# STAFF TERMINATION PROCESS

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## Quick User Termination

- In some situations, a staff's employment may be terminated immediately. In this case, the program manager must immediately call the SUD MIS Unit at (619) 584-5040 to request the staff account be inactivated immediately (including weekends)
- Within one business day, the program manager shall fax a completed SanWITS User Modification and Termination Form to the SUD MIS Unit (855) 975-4724 or scan and email to [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov) .
- The SUD MIS Unit will enter the staff expiration date in SanWITS which will inactivate the staff account at the time of termination.
- The user will also be added to the terminated staff log.



# SYSTEM ADMINISTRATIVE REMINDERS

**NOTE: IAF training is a prerequisite to Encounters training**

**Roles for the Intro to Admin Functions (IAF) training :**  
**Access will include Full Access:** Admission, ASAM Profile, Client Diagnosis, Client Profile, Cross-Agency Waitlist Management, Discharge, Intake, Notes, Outcomes, Non-Treatment Team Access

**Roles for the Encounters training:**  
**Access for Outpatient and OTP will include Full Access:** Encounters, Release to Billing, Create Bulk Group Notes, Group Notes  
**Access for Residential will include Full Access:** Encounters, Release to Billing, Authorization, Inpatient Unit Dashboard, Inpatient Unit Management, Client Leave, Create Bulk Group Notes, Group Notes

**Roles for Billing Staff/Claim Batching will include:** Agency Billing, Billing Encounter List and Create Facility Claim Batches (Please contact [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov) to schedule Billing Training after completing IAF and Encounters training.)

**Roles for Assessments training- LPHA\***  
**Assessment Training Date:** [REDACTED]  
**Access will include:** Full Access to Assessments, Sign and Finalize Assessments; Read-only access for IAF and Encounters

**Roles for Assessments training- Counselor\***  
**Assessment Training Date:** [REDACTED]  
**Access will include:** Full Access to Assessments, Sign Assessments; Read-only access for IAF and Encounters

**Roles for Assessments training- QA:** Read-only access

**Rendering Staff- No user roles assigned.** Only shows as rendering staff for encounters.

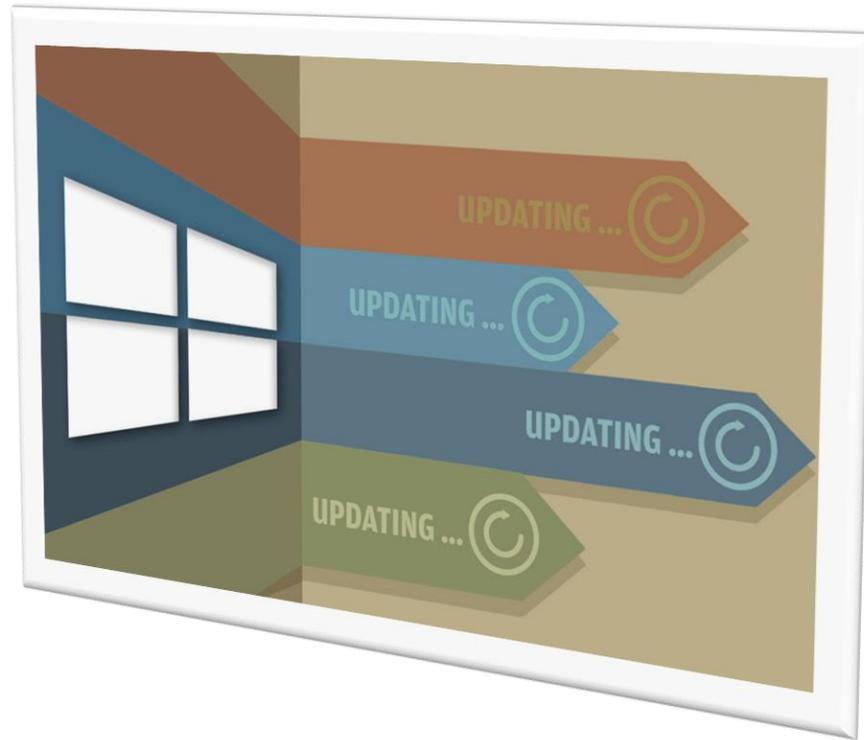
**Peer Support Specialist\***  
**Access will include:** Read-only data entry access for IAF and Encounters roles

\* Credentials are required

- SanWITS New User Form, or SanWITS User Modifications and Termination Form must be submitted to the SUD Support Desk at [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov)
- **New Forms** - must use the new forms, and must be complete, accurate, and submitted timely
- **Roles** - select the appropriate roles that staff require after completing IAF and Encounter training.
- **Credentials** - are required for all direct service staff.
- **Additional Optional roles** - unique to the staff's duties



# REMINDERS, UPDATES, DEMO



# NEW – DISCIPLINES

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Several noteworthy changes have been introduced to the user profile in SanWITS

- Discipline will now be displayed next to the rendering staff name along side their credentials
  - **Ex: Ramirez, Charles, SUDRC, AOD**
- Discipline will be in accordance with the state's discipline categories (DMC-ODS Billing Manual July 2023) and will determine the services a user can provide on the encounter screen
- Discipline will determine the rates to be billed per service



# DISCIPLINES

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- Alcohol and Drug Counselors (AOD)
- Licensed Clinical Social Worker (LCSW)
- Licensed Physician (LP – MD or DO)
- Marriage and Family Therapist (MFT)
- Licensed Professional Clinical Counselor (LPCC)
- Nurse Practitioner (NP)
- Certified Peer Support Specialist (Peer)
- Pharmacist (Pharma)
- Physician Assistant (PA)
- Psychologist (Psy)
- Registered Nurse (RN)



# NEW - SERVICES

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- To allow for providers to complete billing, FY 22-23 Services will remain active in the system until Sep 2023, at which time they will be expired
  
- Most new FY 23-24 services are based on 15 min increments = 1 unit
  - Exception: ASAM assessment service codes
    - ASAM assessment 5-14
    - ASAM assessment 15-30
    - ASAM assessment 30 + (over 30 min)
  - 24 hour service codes such as Residential Bed Days, WM, OTP dosing, AWM
  
- LOC Brief Screening is based on 15 min increments
  
- Duration based services that are in 15 increments must meet a threshold of 8 min to be billed as a unit
  
- <https://www.dhcs.ca.gov/Documents/DMC-ODS-Billing-Manual-v-1-4.pdf>



# NEW – SERVICE LOCATIONS

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- Service Location field – dropdown updated (select based on client’s location at time of service)
- Telehealth or Telephone Services
  - Location – must be **Telehealth provided in the patient’s home OR Telehealth provided other than in patient’s home**
  - Contact type – must be **telehealth** or **phone**
- Service locations will be different depending on the encounter service date and program/facility



# SERVICE LOCATIONS

CODE	LOCATION	DESCRIPTION
02	Telehealth Provided Other than in Patient's home	Telehealth (synchronous video audio OR audio only)
03	School	Facility whose primary purpose is education
04	Homeless shelter	Facility – primary purpose is to provide temporary shelter e.g. emer shelter, family shelter
10	Telehealth Provided in Patient' Home	Telehealth (synchronous video audio OR audio only)
12	Home	Location other than hospital or other facility where patient receives care in a private residence
16	Temporary Lodging	Short term lodging e.g. hotel, campground, hostel, etc.
55	Residential Substance Abuse Tx Facility	Residential Facility
57	Non Residential Substance Abuse Tx Facility	Outpatient Facility (Not OTP)
58	Non Residential Opioid Tx Facility	OTP Facility Only
99	Other Place of Service	Other Place of Service not Identified Above



# SUD BILLING UNIT



BILLING QUESTIONS AND ASSISTANCE: [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov)



# SUD BILLING TRAINING

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- The billing training is on a per request basis or as needed.
- We also prefer providing training per Agency/Facility to ensure the curriculum fits the unique needs and objectives of your program, and that the confidential handling of all protected health information (PHI) is observed.
- Please remember to complete the prerequisite training prior to scheduling/attending the billing training:
  - SanWITS Intro to Admin Functions (IAF)  
**AND**
  - Res – Encounter & Bed Mgmt  
**OR**
  - OS/OTP – Group Module & Encounter

# SUD BILLING TRAINING

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## THE CURRENT VIRTUAL BILLING TRAINING COVERS THE FOLLOWING TOPICS:

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- SanWITS billing workflow (from releasing encounters to billing to submitting Provider Batches to the Clearing House or Government Contract).
- Troubleshooting billing errors
- Medi-Cal eligibility verification review and examples
- Review of claims in “hold” status.
- Post-billing processes (claim denials review, required actions, and service replacement overview)
- Void or disallowance process, including instructions on how to complete the Payment Recovery Forms
- Late billing (Delay Reason Code, additional paperwork, and more)

**Note:** Please send an email to the [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov) if you have a specific billing training request that is not listed above.



# Medicare Advantage FFS-Equivalent Coverage Certification Outpatient & Res Programs (**EXCEPT OTP**)

## MEDICARE PART C INSURANCES (BLUE SHIELD PROMISE -PART C, HEALTH NET-PART C, MOLINA-PART C)

- The Medicare Advantage FFS-Equivalent Coverage Certification have been approved by the state thru Dec 2023.
- Any claims on hold from January 2023 to current for clients with these insurances should be released to billing and batches should be submitted to the SanWITS clearing house.

**Note:** Please prioritize January 2023 claims (if available) as we only have until the end of July to bill the State without the required Delay Reason Code (DRC).

- Any claims after the six-month billing deadline (from the date of service) must be addressed to the ADS Billing Unit.
- Please contact us at [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov) as soon as possible so that we can request a late billing pre-approval from the State.



# OHC COVERAGE RULES OUTPATIENT & RESIDENTIAL

*The attached emails (below) were sent to both Outpatient and Residential providers on 07/08/2022*

OHC Coverage Rules for Outpatient  
2022.07.08

OHC Coverage Rules for Residential  
2022.07.08

Please continue to hold the claims with OHC or Medicare Advantage and wait until 90 days and send any acceptable proof of private insurance to [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov). One of my team members will contact you to provide the next steps (e.g., batch using the OHC PGE).

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Please note that different rules apply to these 4 Medicare Advantage plans: Blue Shield Promise Part C, Health Net Plan C, Aetna Better Health of CA, and Molina Part C.



# BILLING REMINDERS

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## OTP PROVIDERS

- OTP Providers must continue billing Medicare – including Medicare Part C / Medicare Risk Plans / Medicare Advantage/Cal Medi-Connect risk insurance.
- The Medicare Advantage (Medicare Part C) notice is available on the Optum website under the BHS Provider Resources, Billing tab.

### [SUD Billing Announcement: Medicare Advantage Plan Rules for OTP Providers \(msg\)](#)

- Methadone and counseling services (individual and group) even if the client is out of county should be billed to DMC. Please note that we can bill DMC for these services; do not put them on hold unless there are other valid reasons to do so. Please continue to assist the client with the transition should they intend to live in San Diego.



# OUT-OF-COUNTY (OOC) ALL PROGRAMS

- The out-of-county billing tip sheets have been updated and can be accessed through the Billing and Communications tabs on the Optum BHS Resources site.

[Drug Medi-Cal Organized Delivery System \(optumsandiego.com\)](https://optumsandiego.com)

Name	Description	Date
<a href="#">OTP OOC Medi-Cal Tip Sheet (pdf)</a>		2023-03-28
<a href="#">Outpatient OOC Medi-Cal Tip Sheet (pdf)</a>		2023-03-28
<a href="#">Residential OOC Medi-Cal Tip Sheet (pdf)</a>		2023-03-28



# ADDITIONAL BILLING ANNOUNCEMENTS

## ALL PROGRAMS

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- Please review all the claims on hold and bill to DMC if applicable. Contact the Billing Unit if you require additional assistance.
- The billing team will send an email if the claim batch has more than 5000 claims, giving you time to reject and split the batch into two. We do this to prevent the State from rejecting our batch submission, as their claim system only accepts up to 5,000 claims at a time.
- Please respond to billing unit emails as soon as possible or, if you are unable to do so, have a member of your team respond to our e-mail.



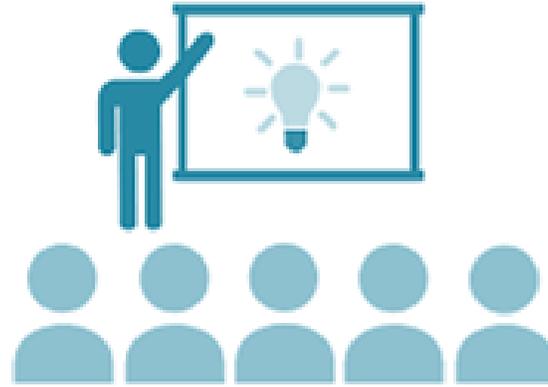
# H0038: Self-Help/Peer Services

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- Currently, the H0038 claims are getting denied due to setup or technical issue. The Department of Health Care Services (DHCS) is currently working on the resolution.
- Meanwhile, the SUD Billing Unit will continue to submit H0038 claims to the State. We will also replace and rebill the denied claims for proper adjudication once the issue is resolved.
- E-mails will be sent directly to providers impacted by this denial.
- Please contact the [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov) if you have any questions.



# SANWITS TRAINING



**MIS  
OPTUM  
BILLING UNIT**



# VIRTUAL TRAINING CLASSES



## Courses

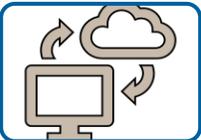
- SanWITS Intro to Admin Functions (IAF)
- RES Enc & Bed Management
- OS/OTP Group Module & Encounters
- SanWITS Assessments (SWA)



Register for training at [www.regpacks.com/dmc-ods](http://www.regpacks.com/dmc-ods).



Submit required forms to SanWITS Support at least seven days prior to the scheduled training at [SUDEHRSupport.HHSA@sdcounty.ca.gov](mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov)



Attendees for virtual training classes will receive an email on the morning of training, between 8:30-8:45am. If staff do not receive an email by 9am, email [sdu\\_sdtraining@optum.com](mailto:sdu_sdtraining@optum.com) to resolve the issue.



For additional assistance with registering and training availability, please email [sdu\\_sdtraining@optum.com](mailto:sdu_sdtraining@optum.com) or call 800-834-3792, Option 3.

# COURSE DESCRIPTION



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**Introduction to Admin Functions (IAF) Training** covers basic functionality of SanWITS, such as searching clients, adding clients into the System, documenting client contacts, intake, payor group enrollment, CalOMS Admission, and program enrollment. It is intended for staff who perform administrative functions. *Examples are Receptionist, Admin/Data Entry Staff, QA Staff, and SUD Counselors who perform dual Admin/Counselor roles.* **This class is a prerequisite to the Encounters Training and Billing Training classes.**

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**Encounters (Residential or Outpatient/OTP) Training** is specific to program type and covers entry of individual and group encounters into SanWITS. **This class is a prerequisite to the Billing Training.**

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**Assessments (SWA) Training** covers a working navigation of SanWITS, such as accessing client records using the Clinical Dashboard and creating assessments through finalization. It is intended for staff who provide direct services to clients. Staff who review clinical records may also attend this training.

# HELPFUL TRAINING HINTS

- Review/print the training resources prior to training.
- Watch the video tutorial prior to training.
- The resources are located on the SanWITS Training page of the Optum website; click [HERE](#)
- **Please note:** This is only for the purpose of reviewing/printing the training materials; please do not attempt to complete the training early.

**Staff are highly recommended to read the training packet thoroughly before entering information into the LIVE environment**



# COMMON MISTAKES IN TRAINING



- 
- **False Start:** The Trainer's initial email and the practice document include important details, such as specific instructions and expectations. Starting the practice without reading thoroughly the initial email and attachments leads to mistakes and confusion.
  - **Skipped Steps:** Numbered steps on the training practice are in sequential order. Skipping and combining steps result in errors which take time to correct. Some attendees are assigned new fake clients to re-start the practice from the beginning (Step 1).
  - **Incorrect Dates:** Client Contact, Intake, Payor Group Enrollment, Admission, Program Enrollment, Authorization, Encounter, Diagnosis, Assessments

**Special Note:** Please schedule an uninterrupted time to complete the training. Review the training materials and watch the training video tutorial before completing the training practice.

# EXPECTATIONS FOR CLINICAL STAFF



- Counselors and LPHA's are expected to start entering Assessments in SanWITS once they receive access. Access will be given within one to two business days after successful completion of training.
- A finalized LOC assessment automatically generates an ASAM Summary screen. Data entry staff may enter an ASAM Summary only when the ASAM Criteria Assessment was completed in paper form.
- Confirm that the correct Assessment Type and Assessment date have been selected before completing the assessment.
- **Review the SUDPOH, SUDURM, and QA instructions prior to entering assessments into the LIVE environment.**

# RESOURCES



TOPIC	LINK
Billing Questions and Training	<a href="mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov">ADSBillingUnit.HHSA@sdcounty.ca.gov</a>
Clinical and Documentation Questions	<a href="mailto:QIMatters.HHSA@sdcounty.ca.gov">QIMatters.HHSA@sdcounty.ca.gov</a>
Forms and Tip Sheets	<a href="http://www.optumsandiego.com">www.optumsandiego.com</a>
Training Registration Assistance	<a href="mailto:sdu_sdtraining@optum.com">sdu_sdtraining@optum.com</a>
SanWITS Technical Assistance	<a href="mailto:SUDEHRSupport.HHSA@sdcounty.ca.gov">SUDEHRSupport.HHSA@sdcounty.ca.gov</a>
CalAIM and/or Peer Q & A	<a href="mailto:Bhs-hpa.hhsa@sdcounty.ca.gov">Bhs-hpa.hhsa@sdcounty.ca.gov</a>

# Q & A

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