



BHS SUD Treatment Provider Meeting

Meetings are held monthly, on the 3rd Tuesday of every month, 10:00 a.m.-11:30 a.m.

- Next meeting: Tuesday, March 19, 2019
- Location: **Marina Village (BAYVIEW ROOM) 1936 Quivira Way, San Diego, CA 92109**

FIRST MEETING: SUD Provider Quality Improvement Partners (SUD QIP) Meeting

Date: Thursday, March 28, 2019

Time: 1:30 P.M. to 3:00 P.M.

Where: National University (9388 Lightwave Avenue, Room 114, San Diego, CA. 92123)

- The intent of the meeting is to have a regular place for County QI and program quality assurance staff to discuss processes and practices related to continuous quality improvement within the DMC-ODS.
- Intended audience is QI/QA staff and program management. Space is limited to 50 attendees, please plan accordingly for who will attend from your program.



Documentation Skill Building Workshops on ASAM Assessments in March

- Documentation workshops are an opportunity to build and develop a SUD treatment provider's documentation skill set and will focus on ASAM Assessments in March.
- Groups will be limited to 30 participants and reservations are required by emailing: BHS-QITraining.HHSA@sdcounty.ca.gov
- County Operations Center (Training Room 124, 5530 Overland Ave., San Diego, CA 92123)
 - Wednesday, March 20, 2019 at 1:30 P.M. to 3:30 P.M.
- North Inland Live Well Center (Grand Ave Room A, 649 W. Mission Ave., Escondido, CA 92025)
 - Tuesday, March 26, 2019 at 1:30 P.M. to 3:30 P.M.

DMC-ODS Residential Documentation Training for March and April

Date: **Friday, March 15, 2019**

Date: **Monday, April 22, 2019**

Time: 1:00 P.M. to 5:00 P.M.

Time: 1:00 P.M. to 5:00 P.M.

Where: 2-1-1 San Diego (Haimsohn Community Rm., 3860 Calle Fortunada, #101, San Diego, CA 92123)

- To register, please email the following to: BHS-QITraining.HHSA@sdcounty.ca.gov
 - Name of Person(s) Attending
 - Program Name
 - E-mail Address for each individual

DMC-ODS Outpatient Documentation Training for April

Date: Monday, April 8, 2019

Time: 1:00 P.M. - 5:00 P.M.

Where: County Operations Center (5560 Overland Avenue, 1st floor, Rm. 171, San Diego, CA. 92123)

- To register, please email the following: Name of Person(s) Attending, Program Name, and E-mail Address for each individual to: stthomas@mhsinc.org

Root Cause Analysis (RCA) Training is recommended for PM and QI staff

- An interactive training to introduce Root Cause Analysis (RCA), a structured process to get to the “whys and hows” of an incident, without blame; and learn effective techniques for a successful RCA, along with Serious Incident Reporting requirements.
- To register, please RSVP to: BHS-QITraining.HHSA@sdcounty.ca.gov
- County Operations Center (Training Rm. 171, 5560 Overland Ave., San Diego, CA 92123)
 - Thursday, April 4, 2019 at 1:00 P.M. to 4:00 P.M

Learning Collaborative: “Addiction Treatment Starts Here: Behavioral Health”

- The Center for Care Innovations (CCI) announces funding availability to address the opioid crisis in California.
- A 15-month learning collaborative dedicated to working with outpatient behavioral health clinics in California to design MAT programs. Tools, one-on-one coaching, and tailored technical assistance provided to facilitate implementation.
- \$50,000 in funding provided to each participating organization. Follow the links: **Informational Webinar:** March 15, 9:00 a.m. PT
Application Deadline: April 5, 5:00 p.m. PT



ASAM Training for LPHAs and Medical Directors

- Staff providing screening/intake, assessment and treatment planning services must be fully trained in ASAM prior to providing those services in one of these ways:
 - Completed 2 e-learning modules through the Change Companies (ASAM Modules I & II)
 - Completed all three CIBHS trainings (ASAM-A, ASAM-B and ASAM-C)
- In order to adequately supervise staff, develop clinical policies and procedures consistent with the DMC-ODS, and assure quality of level of care assessment and recommendations, LPHAs and MDs are required to complete ASAM training as well.
- ASAM training counts toward the annual continuing education requirements (5 hours) for both LPHAs and Medical Directors.

Recent DHCS Information Notices

- DHCS Information Notice 19-002 discusses the implementation of Senate Bill 1228 which prohibits specified persons, programs, or entities, including a licensed and/or certified alcoholism or drug abuse recovery and treatment facility, or an employee of that facility, from giving or receiving remuneration for the referral of a person who is seeking SUD recovery and treatment services. These prohibitions became effective January 1, 2019.
- DHCS Information Notice 19-003 discusses implementation of Assembly Bill 3162 and Senate Bill 992 which details new or updated regulations regarding certification and licensing. These laws went into effect January 1, 2019.
- To keep current with all Information Notices, it is recommended that you visit and bookmark the link below. The full versions of the Information Notices discussed above can be found there: <https://www.dhcs.ca.gov/formsandpubs/Pages/2019-MHSUDS-Information-Notices.aspx>

CAADE Recognized by DHCS as a Certifying Organization

- DHCS Information Notice 19-014, dated March 11, 2019, announced that CAADE has been approved once again as a Certifying Organization.
- CAADE certificates issued prior to issuance of the Information Notice are invalid.
- As of March 11, 2019, there are three DHCS approved Certifying Organizations: CAADE, CADTP and CCAPP. To read the complete Information Notice, click [here](#)
- For questions about the Information Notice, please contact Crystal Sanchez at 916-345-7482 or by email at crystal.sanchez@dhcs.ca.gov

SB992 Requires A Relapse Plan for Licensed Residential SUD Treatment Facilities

- A licensed residential treatment facility must develop and maintain a written plan to address resident relapses.
- A relapse plan is a written plan that addresses:
 - Resident relapse including when a resident is on the licensed premises after consuming alcohol or using illicit drugs;
 - How the treatment stay and the treatment plan of the resident will be adjusted to address the relapse episode;
 - How the resident will be treated and supervised while under the influence of alcohol or illicit drugs; and
 - Resident discharge and continuing care plan, including when a residential facility determines that a resident requires services beyond the scope of their license.
- Initial applicants for residential treatment facility licensure must submit a relapse plan with the Initial Treatment Provider Application (DHCS 6002).
- Applicants that submitted an application for licensure prior to January 1, 2019 but have not been approved for licensure will be required to submit a relapse plan prior to licensure.
- Existing licensees must submit a relapse plan to their assigned DHCS analyst no later than April 1, 2019.
- DHCS will review the submitted relapse plan to determine compliance with the statutory requirements. DHCS will notify the licensee within 30 working days whether the relapse plan is complete or incomplete.
- A copy of the relapse plan must be kept onsite, or at a central administrative location, provided that the plan is readily available to staff and DHCS upon request.
- For more information, refer to DHCS Information Notice 19-003. If you have questions about the relapse plan or Information Notice 19-003, contact Nadalie Meadows-Martin by email at Nadalie.Meadows-Martin@dhcs.ca.gov or Pelumi Abimbola at Pelumi.Abimbola@dhcs.ca.gov.



MAT Toolkit Available for Licensed Residential Treatment Providers

- DHCS, in partnership with Harbage Consulting & the California Health Care Foundation, published a toolkit aimed at informing and engaging licensed residential treatment facilities about medication assisted treatment (MAT).
- As of January 2019, clients in licensed residential treatment facilities are required to have access to MAT. This toolkit contains information about the benefits of MAT, the process and requirements for providing access to MAT in licensed residential treatment facilities, and information on how practitioners can apply for a Drug Addiction Treatment Act (DATA) 2000 waiver to prescribe buprenorphine.
- An electronic version of the toolkit is available [here](#) on the DHCS website. In particular, [Part #1 of the toolkit](#) might be helpful as it contains basic information about MAT & addresses stigma.
- Over the next two years, DHCS & Harbage will roll-out a number of other resources aimed at informing key stakeholders & providers about MAT which will be available on the DHCS website.

OTP Providers – Encounters for Dosing

- Effective immediately (as of Feb 27, 2019), if you have a client that is receiving two doses of the same medication in the same day, create one encounter with one NDC# and add the quantities together.
- Currently the State system does not allow for multiple NDC# on the same claim and is working on enhancing their system to allow for multiple NDC#s on the 837. More to come...
- Reminder: Consecutive dosing encounters – you **Must** enter the Start Date **AND** End Date. The # of units must match the number of days between the start date and end date, or the claim will be denied.

New: Withdrawal Management (WM) Treatment Plan and Withdrawal Management (WM) Standards

- Effective **April 1, 2019**.
- However, programs may begin using this new WM Treatment Plan and Standards prior to April 1, 2019, if preferred.
- The new [WM Treatment Plan](#) and [WM Treatment plan Instructions](#) are posted on the Optum website, on the DMC-ODS page, under the SUDURM tab.
- The [updated WM Standards](#) are posted on the Optum website, on the DMC-ODS page, under the “Toolbox” tab.



Updated: Substance Use Disorder Providers Operations Handbook (SUDPOH)

- A reminder that the SUDPOH is incorporated by reference into the Statements of Work, so keeping informed of SUDPOH changes is vital as the DMC-ODS continues to evolve based on County policy decisions and/or guidance from DHCS.
- A [Summary of Changes](#) documents the new SUDPOH updates of 3/1/19
- The [updated SUDPOH](#) as of 3/1/19 is available on the SUDPOH Tab of Optum

Now Available: General Practice Guidelines for Clients in the County of San Diego Drug Medi-Cal Organized Delivery System (DMC-ODS)

- The new [Practice Guidelines](#) are posted on the Optum website, under the “Consumers & Families” tab, for clients to access
- The new Practice Guidelines can also be found on the County of San Diego website, on the BHS/Substance Use Disorder Services, under Treatment Services, on the Popular Services menu at the right at:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/alcohol_drug_services/dmc_ods_consumer.html

Reminder: Grievance and Appeal Information Posting

- Providers shall have posters, brochures, and self-addressed envelopes with grievance/appeal forms in all 6 threshold languages, to include interpreter services and toll-free numbers that have adequate TTY/TTD and interpreter capability.
- These materials shall be displayed in a prominent public place at the facility.
- Grievance and Appeal Form Envelopes
 - Self-addressed envelopes that must accompany the grievance and appeal forms for CCHEA and JFS must be stamped or have postage-paid
 - CCHEA and JFS will provide self-addressed, metered envelopes upon request.
 - The Beneficiary Materials order form is updated to direct programs to those agencies to request envelopes.
- [Beneficiary Materials order form](#) is available on the Optum website under the “Beneficiary” tab of the DMC-ODS page

Reminder: Physician’s Direction Form

- Although the form itself was made optional, it is still a requirement for the MD to review the clients’ health/medical information and drug history and to document their review along with any orders/recommendations.
- This documentation may be done on the Physician’s Direction Form or in a progress note.

Important Reminder - CalOMS Collection Guide

- Under the new state system BHIS, the Mother's First Name requires at least two characters with no spaces. If mother's name is not available enter Mom or Mother.
- Refer to the DHCS CalOMS Tx Collection Guide for reference on what are acceptable values.



Admission Issues Creating CalOMS Errors

- For corrections on admission date, please email the Unique Client ID (UCI) and Form Serial Number (FSN) to the support desk at SUD_MIS_Support.HHSA@sdcountry.ca.gov to prevent your admission date correction from being rejected by the State. Due to the State's new system BHIS, the process for making corrections has been changed.
- If a client was admitted under the incorrect facility, contact the SUD support desk at SUD_MIS_Support.HHSA@sdcountry.ca.gov to make the needed correction. Include the Unique Client ID (UCI) and Form Serial Number (FSN) along with the incorrect and correct facility information.
- **Do NOT make the correction** yourself. This can result in multiple admission records in the DHCS's Open Admission Report.

Discharge Issues

- For withdrawal management clients who have gone through detoxification, as planned by the provider, and who are being referred for additional treatment services, providers must use discharge status 3 - Left Before Completion, with Satisfactory Progress (not discharge status 1 or 2). Neither discharge code 1 nor discharge code 2 can be used for withdrawal management discharges.
- Administrative discharge status 4 or 6, providers should be using 99901 – Unknown under the individual's primary drug since providers will not be able to obtain information about the client at discharge.
- After completing the Discharge record, the case/episode should be left open until the following circumstances have been completed:
 1. Billing – cannot be completed if the case is closed.
 2. Recovery Services (if applicable).
 3. Prop 47 aftercare (if applicable).

SSRS Reporting

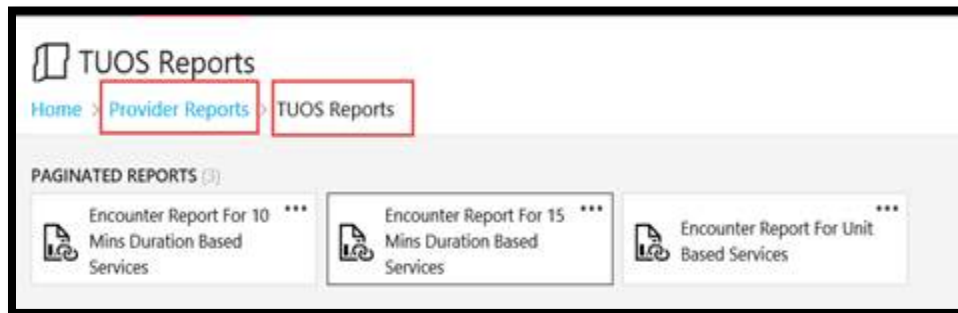
- The Provider Folder has been moved to the opening page/screen.
- Folders can be created within the Provider Reports folder only – If your facility does not have a specific folder and you would like one, contact the SUD support desk.



- Do not create/add any folders on the opening page/screen.

Required Reports Needed for Data Integrity

- Unfinished Client Activities (any records that are still “in progress” are not sent to the state and non-compliant).
- Encounter Report
- Active Census Report (clients need to be discharged or an annual update completed by 11 months)
- TUOS Reports - 3 new reports have been created and placed in the TUOS Reports folder within the Provider folder as seen in screen shot below. Report #4 is still in development.
 1. Encounter Report for 10 mins duration-based services is for OTP services that are in 10 min increments = 1 unit – counseling services.
 2. Encounter Report for 15 mins duration-based services is for any services that are in 15 min increments = 1 unit and can be in fractional units – counseling services, case management, and recovery services.
 3. Encounter Report for unit-based services is for any services that are unit based – Dosing and Residential Bed Days.
 4. Encounter Report for group services is soon to come (still in development).



Residential

- Census must be completed daily, and Bed Day encounters created through the Census.
- Each Residential Bed Day encounter must be reviewed to update the “Bed Management Census Note” note type to either 1) DMC Billable, 2) County Billable, or 3) Non-Billable.
- If Case Management is provided, these services are created through the encounter screen – not through the Census.
- Billable services are to be claimed after the client is discharged. Leave the case open to complete the billing.
- Authorizations are closed when the client’s case /episode is closed – not upon completing a Discharge record. The authorization must remain open to complete billing.
- Case Management services do not require authorization. DMC billable Case Management service should have the billable indicator marked “yes”, and Medi-Cal billable indicator marked “no.”

Program Enrollment – “Perinatal” field

- Perinatal field – this field is directly linked to DMC Certified Perinatal Service Rates.
- This field should be answered “no” for all female clients that are not receiving DMC Certified Perinatal Services.
- This field does not indicate that the client is pregnant.
- DMC Perinatal Services are only for clients that are pregnant or 60 days postpartum.
- Additionally, DMC Perinatal Services are only for programs who are certified by DHCS to provide Perinatal Services and have it in their county contract to provide Perinatal Services.

Update: Contact Screen

- Contact Reason field has a new value added – “Urgent”

Update: Encounter Screen

- Contact Type field has a new value added – “In the Community”
- This should be utilized when a service is provided somewhere other than at the program where the client is enrolled.



DMC-ODS Updated Guidance for TRC Sites (CYF Memo: # 06-18/19)

- Emailed on January 18, 2019
- Clients admitted to a TRC school site may receive services at the TRC primary site, on occasion, when the TRC school site is not available due to school closures, holidays, summer breaks, or other reasons as indicated by documentation in progress note (such as school suspension or expulsion). **Group services may not be mixed with clients who are admitted to the TRC primary site and the TRC school site.**
- When a service is provided to a client admitted to the TRC school site at the TRC primary site, the service location shall be documented as “in the community.” As with all services that are provided in the community, documentation shall explain how program staff maintained the client’s privacy in accordance with 42 CFR.
- “In the community” should be selected as the contact type for the SanWITS encounters when the services are provided at the primary TRC, as opposed to the HS site.

New Changes to SanWITS Quarterly Users Group

- SanWITS Users Group will meet monthly starting in April 2019. The meetings will be specific to modality.
 - Outpatient programs will meet – Apr, Jul, Oct, Jan
 - Residential programs will meet – May, Aug, Nov, Feb
 - OTP programs will meet - Jun, Sep, Dec, Mar
- RSVP will be required to ensure we are able to accommodate participants due to room requirements.
- Meetings will be held the 3rd Monday of the month and locations announced two weeks prior to meeting.



Clinical Staff Documentation Training

- To assist new or returning staff to be more successful in understanding of the clinical assessments, QM has developed both live and webinar documentation trainings.
- It is highly recommended to have newly hired staff complete Documentation Trainings prior to their SanWITS training, if possible.
- This will allow for newly hired staff to focus more fully on learning the functionality of SanWITS during the training on that software (which is the sole intent of SanWITS training – it is not to be a replacement for training in Documentation Standards).
- If staff is unable to participate in documentation trainings, the Program Manager may be able to assist with guiding/training staff on documentation standards.
- Documentation training webinars are available on the Optum website, under the QM Training tab at: <https://www.optumsandiego.com/content/sandiego/en/county-staff---providers/dmc-ods.html>

SanWITS and SSRS Trainings

- Register online with RegPacks at:
https://www.regpacks.com/reg/templates/build/?g_id=100901152
- Registration will close 14 days prior to the scheduled class date in order to allow time for individual staff account setups and other preparation needed.
- Types of Training Classes:
 - SanWITS Basic – Fundamental SanWITS functions that are applicable to All program types
 - Residential Facilities - Bed Management & Encounter Training
 - Outpatient / OTP Facilities – Group Module & Encounters Training
- All required forms are located on the “Downloadable Forms” tab, and must be completed and returned to SUD Support at SUD_MIS_Support.HHSA@sdcounty.ca.gov at least 14 days prior to scheduled training. If the 3 forms are not submitted, you will not be able to attend training regardless of receiving training confirmation.
- Upon completion of training, **competency must be shown in order to gain access to the system.** If competency is not achieved another training will be required before access is given.
- If you are unable to attend class, cancel the registration as soon as possible so that staff on the waitlist are able to attend.

SanWITS Billing Classes

- Register with BHS Billing Unit ADSBillingUnit.HHSA@sdcounty.ca.gov
- Prerequisite required: SanWITS Basic training

Tobacco Cessation Benefits

- Tobacco use is one of the leading preventable causes of death while tobacco cessation services are proven to be effective to counter this threat.
- Medi-Cal managed care health plans (MCPs) are required by DHCS to implement and cover payment for the following tobacco cessation services:
 - Initial and annual assessment of tobacco use for each adolescent and adult beneficiary;
 - FDA-approved tobacco cessation medication (for non-pregnant adults of any age);
 - Individual, group, and telephone counseling for beneficiaries of any age who use tobacco products;
 - Tailored services for pregnant tobacco users;
 - Prevention of tobacco use in children and adolescents;
 - Identifying tobacco users;
 - Tracking treatment utilization of tobacco users.
- Options and specific requirements for these issues can be found in DHCS’s All Plan Letter 16-014

which can be accessed at:

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2016/APL16-014.pdf>



**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**