

MENTAL HEALTH SERVICES



Updates

QM would like to share our warmest and sincerest Holiday wishes with our SOC Providers. We appreciate all of the hard work you have done this past year. We hope everyone enjoys a well-deserved break and enjoys their holidays!

Triennial Findings:

Program are advised of the following updates resulting from the FY 20/21 SMH Triennial Review Findings:

Assessments: States finding that services cannot be claimed prior to an assessment being completed.

- Programs must document ongoing/completed assessment has occurred prior to claiming services. Compliance.

Screening for provision of ICC and/or IHBS: all beneficiaries must have an eligibility screening for ICC services completed during intake.

- The CYF BHA has been updated to include a radio question indicating an ICC/IHBS Screening, which must be completed for all youth, has been done.
- ICC may be indicated when a youth is:
 - At risk of psychiatric hospitalization
 - Recently discharged from hospitalization (generally within last 90 days)
 - Recently discharged from Emergency Screening Unit/ North County Crisis, Intervention and Response Team (generally within last 90 days)
 - At risk of needing crisis stabilization (Emergency Screening Unit or North County Crisis, Intervention and Response Team)
 - Placed in, being considered for, or recently discharged from an STRTP, CTF, or PHF
 - Receiving intensive services from programs such as:
 - Crisis Action Connection
 - Therapeutic Behavioral Services (TBS)
 - Wraparound
 - Comprehensive Assessment and Stabilization Services (CASS)
 - Foster Family Agency Stabilization and Treatment (FFAST)

Medication consent: there must be a current written medication consent form signed by the beneficiary for **each** prescribed psychiatric medication with all required elements documented as reviewed with the client or that the client was accompanying written materials containing all required elements.

Optum Website Updates MHP Provider Documents

OPOH Tab:

- **Section D:** pgs D.49, D.51 update to language re: ICC service eligibility to reflect determination of screen of strengths/needs and criteria for ICC.

UCRM Tab:

- CYF BHA and CYF 0-5 BHA updated to include ICC/IHBS screening question

References Tab:

- Update to language to service code definition for ICC 82 in Service Code Definitions – Appendix III rev12.10.21

Use of the most current Informed Consent for Psychotropic Medication form signed by the beneficiary agreeing to the administration of each prescribed psychiatric medication is up to date to include all currently prescribed medications and is stored in the client's hybrid chart.

For clients prescribed psychotropic medications, written medication consents shall include, but not be limited to, the following required elements and evidence documentation that they have been reviewed with the beneficiary and/or provided in accompanying written materials to the beneficiary:

1. The reasons for taking such medications.
2. Reasonable alternative treatments available, if any.
3. Type of medication.
4. Range of frequency (of administration).
5. Dosage.
6. Method of administration.
7. Duration of taking the medication.
8. Probable side effects.
9. Possible side effects if taken longer than 3 months
10. Consent, once given, may be withdrawn at any time.

OPOH Updates

Section D: pgs D.49, D.51 Updated language re: ICC/ISBS services for child/youth under the age of 21 who are eligible for the full scope medical services as determined by screening of the child/youth's strengths and needs; removed language re: medical necessity.

Knowledge Sharing

E-Prescribing Reminder: New Requirement Begins January 1, 2022

The Medical Board of California is reminding prescribers of the upcoming e-prescribing requirements established by [Assembly Bill \(AB\) 2789 \(Wood, 2018\)](#).

Beginning January 1, 2022, most prescriptions (including but not limited to prescriptions for controlled substances) issued by a licensed healthcare practitioner to a California pharmacy must be submitted electronically. For more information on this law and its requirements, please see the [Board's AB 2789 webpage](#).

E-prescribing is available through Doctors Homepage (DHP) in the Cerner electronic Health Record. However, in order to e-prescribe controlled substances, an EPCS Token is required.

- For prescribers currently utilizing Cerner and Doctors Homepage (DHP) to e-prescribe who also have received an EPCS token, there are no further actions needed.
- For prescribers without an EPCS Token, please contact MISHelpDesk.hhsa@sdcounty.ca.gov immediately to begin the process.
- For prescribers who do not use Doctors Homepage in Cerner and prescribe via paper or telephone, please enroll in the Doctors Homepage training through Optum as soon as possible to meet the upcoming requirement.
- For prescribers who use a different e-prescribing platform, other than Cerner, there are no further actions needed.

MIS is working with Optum Training and Cerner to help facilitate immediate training and access to e-prescribing for all new staff after January 1st. **Please see Training/Events below for newly added training dates.** New information will be posted regarding these changes.

Medi-Cal Rx effective January 1, 2022

Beginning January 1, 2022 Medi-Cal pharmacy benefits will be transitioned to the fee-for-service delivery system for all Medi-Cal beneficiaries (referred to as “Medi-Cal Rx”). This transition will create a uniform process for pharmacy providers and prescribers and applies to everyone in Medi-Cal FFS and managed care. All benefits that are billed on a pharmacy claim will be transitioned to Medi-Cal Rx and all Prior Authorizations (PA) will be reviewed by Medi-Cal Rx starting on January 1, 2022.

Please note, prescribers are **not** required to register to use the Medi-Cal Rx portal if they are currently using CoverMyMeds.com to submit PAs. As well you will still have access to the CDL from your current view and from Medi-Cal Rx portal.

Registration for the Medi-Cal Rx Provider Portal will allow for improved access and communication/timeliness when submitting PA’s, patient views, provider specific data and provide greater access to important contacts and resources. Medi-Cal Rx is designed to improve your experience with Medi-Cal. Medi-Cal Rx has created a uniform and searchable Contracts Drug List (CDL) for all beneficiaries, it opens up the network to include all pharmacies and has a robust [Transition Policy](#) which includes exemption for previously approved PAs and a 180-day period where DHCS will not require PA for existing prescriptions in order to provide a seamless beneficiary experience. Medi-Cal Rx also has 24-hour a day, 365 days a year customer service center available to assist prescribers, pharmacy providers, beneficiaries, our managed care partners and others.

Medi-Cal Rx is **not** a prescription service and does not replace the e-prescribe system providers are currently using; any prescription services used before the transition can continue to be used.

Additional details can be found at the DHCS [Medi-Cal Transition](#) site or the DHCS official [Medi-Cal Rx](#) site. **Providers may also reference the Medi-Cal RX 2021 BHS IN 11.5.21**

QI Staff Updates!

Please join us in congratulating Elaine Mills in promoting to QM Supervisor! Elaine has been working with the County of San Diego in the Quality Management Mental Health unit as a Utilization Review Quality Improvement Specialist since February of 2020. Elaine has experience in the CYF System of Care with New Alternatives and with adults working for the Department of the Navy at Navy Base North Island in Coronado. In her spare time, Elaine is an avid hockey fan, and enjoys being part of an all-women’s fantasy football league. Elaine is a new “empty-nester” with three grown children, Hannah, Noah, and Emma. She now enjoys going to visit them and letting them pick up after HER for a change!

QI Matters Frequently Asked Questions

Q. Is there a deferred diagnosis code we can use when we do not have a clear diagnosis and will be continuing to assess the client?

A. Programs may use diagnosis code Z03.89 during the initial assessment period for up to 30 days from the date of assignment when continuing to assess and determine the appropriate diagnosis for a client.

Management Information Systems (MIS)

Submission of DHP ARF’s for prescribers needing to use E-prescribe after 1/1/22:

Due to the new regulation for prescribers needing to use e-prescribing only after 1/1/22, please try to submit DHP ARFs for new staff before their date of hire. MIS will be able to create the new account and have Cerner set up the e-prescribing so that the prescriber can get the DHP packet first thing when they onboard. They will be able to self-train for e-prescribing and then can take the other required trainings. All ARFs are found on the RegPacks website: www.regpack.com/reg/optum. MIS staff will assist the prescriber with the EPCS Token, which will take the usual time for acquisition and activation. Contact MIS for any questions: MISHelpDesk.hhsa@scounty.ca.gov.

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

- 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.
- 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.

MIS Questions?

MIS manages all things related to the system, including authorizations for all trainings/skills assessments/reactivations, account management. Our email is: MISHelpDesk.HHSA@sdcounty.ca.gov

Cerner Reminder

For questions regarding Cerner products or functions, please call or email the Optum Support Desk at 800-834-3792 or email SDHelpdesk@optum.com. Please do not call Cerner directly!

Training and Events

Quality Improvement Partners (QIP) Meeting: QIP Meetings will be dark for the months of November and December and will resume **January 25, 2022, from 2:00-4:00p** via WebEx.

DHP Training – Additional Trainings Added!

Pursuant to the January 1, 2022 mandate that all prescriptions issued by a licensed prescriber will need to be done electronically (<https://www.mbc.ca.gov/Resources/Medical-Resources/e-prescriptions.aspx>), additional Doctor's Homepage classes have been added to RegPack. Upcoming class dates are as follows:

- December 29, 2021
- January 3, 2022
- January 13, 2022
- January 31, 2022

These are self-paced, virtual classes and you may enroll through the standard RegPack link: www.regpack.com/reg/optum.

If you have any questions, or if you are having difficulty with registration, please reply to this email or contact BHS-QITraining.HHSA@sdcounty.ca.gov. We hope to see you there.

Resources and Links

BHS COVID-19 Resources and Links

Remember, for the most current and updated information regarding COVID-19 as well as QM updates and memos, including provider FAQ's, please access the [COVID-19 tab](#) on the Optum Website.

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