



COUNTY OF SAN DIEGO
BEHAVIORAL HEALTH SERVICES

SmartCare User Group

**County of San Diego
Behavioral Health Services**

August 18, 2026

Meeting Goals



Transparency



Engagement



Inclusion

Meeting Agenda



- Meeting Goals
- Updates
 - Clinical
 - MIS
 - Data Sciences
 - Billing
- Q&A



Who to Contact?



Who to Contact	How to Contact
SmartCare System issues: i.e. glitches, functionality issues, pop-up errors	CalMHSA various options: 1. Connect via Live Chat (M-F 8:00am – 5:00pm) a. 2023.calmhsa.org b. Access when logged in to the SmartCare EHR 2. Submit a ticket (M-F 8:00am – 5:00pm) a. 2023.calmhsa.org b. Access when logged in to the SmartCare HER 3. After Hours support (only available for system outages) a. Call (916) 214-8348
Password Resets and Account Unlock	Call 1-800-834-3792 (Available daily from 4:30am – 11:00pm including weekends and holidays)
SmartCare ARF submission and any access related issues or questions	BHS_EHRAccessRequest.HHSA@sdcounty.ca.gov
SmartCare support questions that cannot be addressed by the CalMHSA Support Desk should be directed to MIS	BHS_EHRSupport.HHSA@sdcounty.ca.gov
For questions related to documentation guidelines, DHCS regulations or policy	QIMatters.HHSA@sdcounty.ca.gov
Billing Issues or Questions that cannot be addressed by the CalMHSA Help Desk	Mental Health: MHBillingUnit.BHS@sdcounty.ca.gov MH Billing Line: 619-338-2612 SUD: SUDBillingUnit.BHS@sdcounty.ca.gov SUD Billing Line: 619-338-2584
Reports and Data Questions	BHS-DataScience.HHSA@sdcounty.ca.gov

Clinical Updates

Jill Michalski,

EHR Team, Clinical Lead

Eileen Quinn-O'Malley,

EHR Team, Chief, Agency Operations



Group Services – Credential Validation Configuration Key Update



- Ensures the provider selected for a Group Service meets the degree/credential requirements defined for the associated procedure code selected.
- System will populate an error message preventing the creation of a group service if the credential isn't allowed to provide/bill for the selected procedure code.
- Runs when "Save" button is clicked – after facilitator signs note(s) and co-facilitator services are created
 - Validation will not run again unless a user re-saves the group service detail following further action
 - Key will not eliminate all billing errors tied to clinicians using service codes outside their license or degree but should reduce group-related billing errors overall

Calendar Scheduling



- Appointments should not be scheduled out further than 6 months
- Best practice – appointments should not extend beyond client's UM cycle
- Issues when there are recurring appointments for terminated staff remaining on calendar
 - Issues with services remaining on provider dashboards or supervisor dashboards for terminated staff
 - Will result in cost to BHS once patient portal and appointment reminder text feature is available

Independent Service Level (ISL) Data



- ISL = Individual Service Level data
- Under BHSA, DHCS will require County BHPs to report non-Medi-Cal person level data effective **January 1, 2027**.
- ISL will capture the gap between what is claimed in Medi-Cal and other county investments
 - Collection of services provided to an individual outside of Medi-Cal
 - Provides an accurate picture of the path each individual follows in the public behavioral health system
 - Includes supports such as Outreach & Engagement activities, Housing costs and other non-Medi-Cal services essential to helping individuals achieve stability and recovery.
 - Reflects the full continuum of support provided within the public behavioral health system.

Independent Service Level (ISL) Data, cont



BHS Preparation for ISL

Create groupings
aligned with
SmartCare
programs

Create ISL code
groups aligned
with SC program
groupings

Confirm
SmartCare
programs mapping
to ISL codes

Plan for SmartCare
build for ISL codes

TBD provider
training on ISL
codes

ISL transition of existing non-billable procedure codes

- Many current non-billable procedure codes are being transitioned to ISL codes
- BHS ISL workgroup will be mapping ISL codes to programs based on services/program contracts
- Current non-billable procedure codes which have been reassigned as ISL codes:
 - Client Non-billable Srvc Must Document → ISL Client Non-Billable Srvc Must Document
 - Counties are currently reviewing this change with CalMHSA – additional guidance re: this code will be forthcoming due to following concerns:
 - Impacts past services which may result in inaccurate/inflated count of services
 - Review of use cases for Client Non-Billable Srvc which may not meet ISL reporting criteria

Eleos Updates



- Tentative Go-Live mid-October
- Continued implementation planning with CalMHSA and Eleos:
 - MFA functionality
 - End-to-End User testing
 - Baseline service times, pre- and post- Go-Live survey development
- Upcoming communications to Providers:
 - Programs who submitted an Eleos Expression of Interest form will receive email confirming Eleos approval status:
 - List of staff with approved access
 - List of staff not approved due to missing/lack of documentation in SmartCare
 - Confirmation of AI Policy Attestation Submission or reminder for LE to submit AI Policy Attestation (required for Eleos Access)
 - Communication outlining available options for required Eleos User Training will also be forthcoming in next few weeks

Coming Soon! Client Present/Collateral Contact Field in Progress Notes



- Service Note & Group Service Details configuration to reflect “Client Present” and “Other Person(s) Present” and will display on PDF header

The screenshot shows a web application window titled "Individual Service Note (C)". The interface includes a top toolbar with various icons and a "Save" button. Below the toolbar, there are fields for "Effective" (06/29/2026), "Status" (Signed), and "Author" (Yogendra, Kiran). A "Document" tab is active, showing a preview of the service note on the left and a form on the right. The form contains the following fields:

Individual Service Note (C)			
Client Name:	Lkg2 Lkg1	Client ID:	2107329
Clinician Name:	Kiran Yogendra	Service:	Test ISN Procedure
Date Of Service:	06/29/2026	Start Time:	3:15 AM
Team:	Test & prog	End Time:	3:16 AM
Location:	429997	Duration:	1.00 Minutes
		Specific Location:	

At the bottom of the form, there are two radio buttons: "Client was present" (which is selected) and "Other Person(s) Present". To the right of these buttons is a text field containing "ABCD Test, @#\$% Name ABCD, Tester".

Optum Training Reminders

Justin Terrell,

Optum Public Sector San Diego



Management Information Systems (MIS)

Becky Ferry-Rutkoff

SmartCare Support:

BHS_EHRSupport.HHSA@sdcounty.ca.gov

SmartCare Access/ARFs:

BHS_EHRAccessRequest.HHSA@sdcounty.ca.gov



Staff Administration Reminders



- Required LMS trainings must be completed before submitting an ARF
 - Training information can be found on the Optum website
- Support for login issues or password resets includes:
 - 'Forgot your password' feature on the SmartCare Login Screen
 - CalMHSA Help Desk Live Chat Support 8am-5pm M-F
 - Optum (800) 834-3792 430am-11pm daily
- Rendering staff are those who do not need to log in to SmartCare; select "Rendering Staff (No login for user)" on the ARF to avoid account deactivation due to inactivity

Staff Administration Announcement

- To ensure PDMP reports continue to display properly, ensure your browser is up to date:
 - Google Chrome, Microsoft Edge, Mozilla Firefox, and Safari– current version + one prior version
 - Internet Explorer is no longer supported

Reports Available:

- **CoSD CalOMS 331/342 Error Report** – “If the client’s treatment services are being delivered on behalf of another county, what is the code of the county for which the services are being performed?” The only acceptable value is “None or not applicable.”
- **CoSD CalOMS and Program Assignment Dates Mismatch Report** – The client program assignment dates do not correspond with the CalOMS admission and/or discharge documents.
- **CoSD CalOMS Signed Admission Missing Report** – An admission has not been entered in SmartCare, or the admission is In Progress status.
- **CoSD CalOMS Annual Update Due Date Report** – Shows clients that have been active for 10 months and require an annual update.
- **CoSD CalOMS Data Report** – Displays key CalOMS admission and discharge fields for review, similar to the SANWITS report.

Data Science (DS) Reports

Derek Kemble,

SmartCare Reports:

BHS-DataScience.HHSA@sdcounty.ca.gov



Report Training and Resources



Current Efforts

[Optum SmartCare Training](#)

[SmartCare Help Desk Support](#)

[SmartCare ARF: Treatment Programs](#)

Centralized E-mail support:

BHS-DataScience.HHSA@sdcounty.ca.gov

SmartCare Reports New or Enhanced



- CoSD CalOMS Data Report
- CoSD Staff License, NPI and Taxonomy Report
- CoSD Authorization Report
- CoSD UMDAP Financial Assessments Report
- CoSD-CalOMS Missing Signed Admission Report
- CoSD Open Enrollments and Last Date of Service
- CoSD Active Client Report
- CoSD Reported Error

- CoSD Charges and Claims Report
 - For clients who have multiple coverage plans, the report was sometimes showing an older charge instead of the most recent one. A particular scenario involves a report showing a charge/claim remains with the primary plan even though the charge has already been transferred to another payer or Medi-Cal. The logic has now been updated so the report consistently displays the latest charge.
 - The Place of Service is added a parameter to the Report.

In Progress



- CalMHSA 121- ASCMI Completion Report
- CalMHSA 814- Claims Denial Contractor Report
- CoSD Special Populations Report
- CoSD Locus Assessment Completion Report

BHS Billing Unit Announcements

Tess Bugay,

Medical Claims Manager

Carmen Saline,

Admin. Analyst III



BHS Billing Unit's Contact Information



The BHS Billing Unit - Mental Health and Substance Use Disorder has new email addresses. Effective immediately, please send:

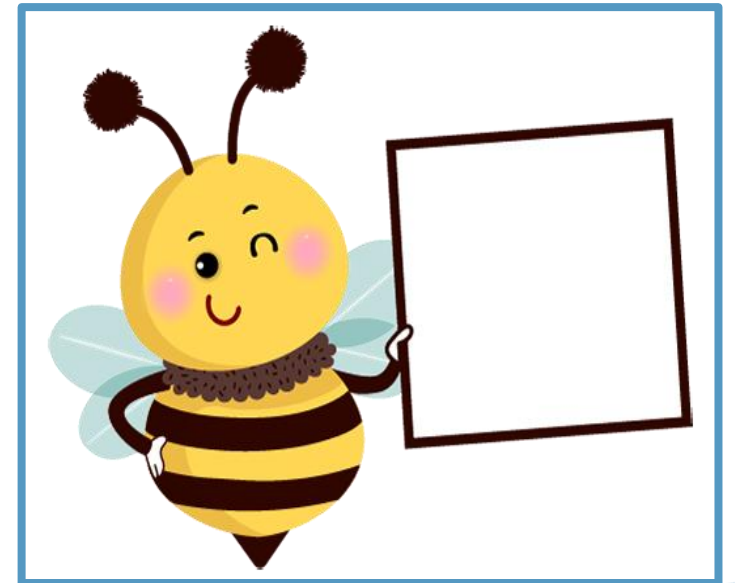
- ✓ **MH billing and billing-related emails**
to: MHBillingUnit.BHS@sdcounty.ca.gov
- ✓ **ADP or SUD billing and billing-related emails**
to: SUDBillingUnit.BHS@sdcounty.ca.gov

The BHS Billing Unit's old email addresses will remain active and monitored until 08/31/2026.

MHBillingUnit.HHSA@sdcounty.ca.gov (MH)

ADSBillingUnit.HHSA@sdcounty.ca.gov (SUD)

Please refer to our contact details and updates in the business email signature.



Medi-Cal Eligibility



- Mental Health and Substance Use Disorder Programs must continue to verify client's Medi-Cal eligibility manually via the [DHCS Medi-Cal Provider Portal](#) before rendering or billing for services.
- Manual verification is essential for handling the four fundamental eligibility criteria outlined below:
 - 1) Continuity or status of eligibility
 - 2) Medi-Cal Share of Cost (SOC)
 - 3) Other Health Coverage/OHC (commercial plans, Medicare Advantage, or Medicare)
 - 4) Special aid codes

Medi-Cal Claim Denials



- Currently, denial lists are emailed to programs until a provider version of the denial report becomes accessible for use in SmartCare.
- If you receive an email denial from your program, it's recommended to review and validate the denial.
- Please respond to the BHS billing team via email if you agree or disagree with the state determination.
- Claims that are eligible for service replacement or rebill will be processed by the BHS Billing Unit.

CARC and RARC



- The CARC (Claim Adjustment Reason Code) and RARC (Remittance Advice Remark Code) are standardized codes provided by insurance companies to explain why a medical claim was denied, reduced, or paid differently than billed.
- CARC and RARC are included in the electronic remittance advices (ERAs) or explanations of benefits (EOBs) that the BHS Billing Unit posts to SmartCare.
- The CARC and RARC tables are posted on the BHS Optum Billing resources website for your reference.

CARC and RARC



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[MH CARC and RARC](#)

[SUD CARC and RARC](#)

For further questions: contact QIMatters.HHSA@sdcounty.ca.gov
Or go online for more information at:
OptumSanDiego.com → SMH&DMC-ODS Health Plans →
SmartCare Tab

Next Meeting: Tuesday, September 22, 2026, 11:00am - 12:00pm