Mental Health Services - Up To The Minute

General Updates

Home Medication Entry in SmartCare

- A new non-billable procedure code is available for use in SmartCare to add "home medications" to SmartCare – **Home Medications Note** – as of June 30, 2025
- The Home Medications Note is to be used by programs who do not have an RN or Prescriber with access to CalMHSA Rx
- Procedure code will have a "generic" template attached
- Treating providers should review clinical documents to determine if a Home Medication Note has been completed
  - *Coordination of Care should occur when multiple providers are involved*.
- For those who have access to CalMHSA Rx (RN & Prescribing Staff) – all medications should be entered via the CalMHSA Rx Module
  - Medications are visible to all with clinical access in the Psych/Med Note as well as visible via the Active Medications widget or within CalMHSA Rx

Multi Factor Authentication Updates for Cerner - DUO

DUO is a new multi-factor authentication (MFA) application that external users will utilize in order to maintain security when accessing Cerner applications. Affected user groups: any users that continue to access CCBH, which includes Next Steps and External Pharmacists. User accounts will be created within DUO; however, each user will need to activate their registration via the link provided in their targeted email. Users will then have the opportunity to decide how they would like to complete their multi-factor authentication: application, text, etc.

  - The use of Duo will begin on July 14th
    - Additional details will be provided via email to affected user groups.
    - If there are any issues or questions following Go Live, please reach out to the **Cerner Help Desk** at 619-415-1141

New SMH Provider Type: Certified AOD Counselors- SMHS

Providers may notice that within the Specialty Mental Health Fee Schedule, rates are now included for Certified AOD Counselors following SPA 24-0042. There are outstanding issues to be addressed before this credential can be incorporated into SMHS Programs. BHS is currently awaiting guidance from DHCS to move forward with integrating this role into contracts and rate schedules moving forward. A formal communication was released **July 3, 2025**, addressing these issues. In the interim, the County FY25/26 Rate Schedule posted on Optum has been revised to remove the Certified AOD Counselor as a provider type until further direction can be provided. Programs should **hold** on adding Certified AOD Counselors as provider type at this time.

New SMH Provider Type: Enhanced Community Health Workers

A new benefit for Medi-Cal members—Enhanced Community Health Workers (CHWs)—has been added to the FY 2025–26 fee schedules and BHS Invoice/Budget documents. Additional guidance on this role, including requirements and implementation details, will be shared with providers soon. Programs should hold on adding or implementing E-CHW staff as a provider type until further guidance has been provided.

"Unable to Find Matching Rate" Service Errors

Currently, the CoSD Service Error Report is pulling the "unable to find matching rate" error associated with certain staff and procedures due to the FY 25/26 rates not being published in the SmartCare Live environment yet.

On 7/28/25, when the rates are published in SmartCare, the current errors seen in this report, which are associated with this issue, will be resolved. Communication email was distributed on 7/9/28

CPT Crosswalk Location

As mentioned in the June QIP Meeting, QA will no longer be putting out updates to the CPT Crosswalks. The crosswalk can be accessed on the CalMHSA Website at this link: Procedure Code Definitions - 2023 CalMHSA through the "Procedure Codes Definitions" hyperlink at the bottom of the page. This grid is updated periodically via this page, so please ensure that you are accessing this link directly each time you need to reference the definitions. Additionally, information on service codes including minimum/maximum times per unit, allowable disciplines, lockout codes, and other information for each code in the FY25-26 Specialty Mental Health Service Table linked here in the DHCS MedCCC site.

Medi-Cal Provider Portal Implementation Delayed – July Office Hours to be Provided

DHCS is moving the migration date of the Medi-Cal Provider Portal for Specialty Mental Health, Substance Use Disorder Health, Behavioral Health Providers and Non-Provider Users to **July 21, 2025**. Four more Open Office Hour sessions have been added in July to address questions.

- Use link Upcoming Medi-Cal Provider Portal Office Hours for July 2025 to register for July Office Hours.

- Office Hours will be virtual via Microsoft Teams. Pre-enrollment on the Medi-Cal Learning Portal (MLP) is not required to participate in Office Hours.

Office Hours	Dates	Microsoft Teams Registration Link
10-11a.m.	July 1, 2025	Medi-Cal Provider Portal Office Hour
10-11a.m	July 8, 2025	Medi-Cal Provider Portal Office Hour
10-11a.m	July 15, 2025	Medi-Cal Provider Portal Office Hour
10-11a.m	July 22, 2025	Medi-Cal Provider Portal Office Hour

DHCS Fee Waivers for Peer Support Specialist Certification Renewals and Specialization Training

CalMHSA, in partnership with DHCS, is offering fee waivers to support the expansion of the Peer Workforce. Opportunities are available through Sept. 15, 2025, or until all fee waivers have been distributed.

- Trainings in Areas of Specialization
  - 1,000 fee waivers available for training in one or more areas of specialization for Certified PSS
  - Register for training with a CalMHSA-approved training agency. CalMHSA will submit information for individuals who are registered for eligible specialized trainings. Waivers are distributed on a first-come, first-served basis.
  - List of training providers offering specialist training is available on the CalMHSA website.
- Certification Renewals
  - 1,000 fee waivers available for Certified PSS currently eligible for renewal and/or individuals whose certification has expired.
  - Individuals request a fee waiver directly through their certification application by clicking the request option on their application.

Questions? PeerCertification@calmhsa.org   Website: www.capeercertification.org

Training and Events

*Save the Date! 12th Annual Mental Health Quality Assurance Knowledge Forum *
- Tuesday August 26, 2025, from 9:00 am to 11:30am
- This live session will be held virtually
- Intended audience: SOC Program leadership, Program QI/Compliance staff, front line staff

Quality Improvement Partners (QIP) Meeting
- Wednesday, July 30, 2025, from 1:00 pm to 3:00 pm.

SmartCare User Group Meeting
- Wednesday, July 16, 2025, from 9:00 am to 10:00 am
  Link: **Join the meeting now**

QA Office Hours

July Sessions:

- Tuesday, July 15, 2025, 9:00 am – 10:00 am: **Click here to join the meeting**
- Thursday, July 24, 2025, 3:00 pm – 4:00 pm: **Click here to join the meeting**

Technical Support Hours
Technical Support Hours: Technical Support Hours are virtual sessions where users can "drop in" based on role. These are intended for program staff who know what function they want to perform in SmartCare and would like a refresher on how to do it. Optum staff won't be advising program staff what they should do in the system, nor will they resolve live access issues or elevate system issues. Please visit the Optum website for

the schedule and any updates: SmartCare Training.
Users can drop in by joining this MS Teams Link: Join the meeting

QA Staffing Updates:

Please join us in congratulating Makenna Lilya on her Temporary Assignment to a Higher Class to a Behavioral Health Program Coordinator position managing the Mental Health Quality Assurance Team!

Makenna joined BHS and the Mental Health (MH) Quality Assurance (QA) team in April 2023 as a UR/QI Specialist and was quickly promoted to a UR/QI Supervisor in October 2023. Over this time, Makenna has contributed to the implementation of various DHCS initiatives within BHS, ensuring knowledge of the requirements and regulations to support compliance while working collaboratively to update processes for monitoring the quality of services provided. She has served as the lead supervisor over Critical Incident Reporting and played an integral role in developing streamlined processes and sharing information with the System of Care through the regular Quality Improvement Program (QIP) meetings. Makenna is excited to step into the Behavioral Health Program Coordinator role, building on her commitment to quality and collaboration!

Outside of work, Makenna enjoys spending time with her husband restoring their 1970 VW bus, going to the San Diego Zoo, relaxing on the beach and spending time outdoors. Gallup Strengths: Achiever, Strategic, Relator, Activator, Input

Please join us in congratulating Jill Michalski on her new Behavioral Health Program Coordinator role in the Health Plan Operations Unit as an EHR Clinical SME!

Jill started her career with BHS on the Mental Health (MH) Quality Assurance (QA) team as a UR/QI Specialist in 2018. She advanced within the MH QA team, promoting to UR/QI Supervisor in 2021 and then into the Behavioral Health Program Coordinator role in 2023, managing the MH QA Team. During this time, she has been able to use her knowledge to support QA and the BHS System of Care through significant CalAIM/Medi-Cal Transformation requirements including documentation reform, CPT procedure code implementation, payment reform, and the Electronic Health Record transition to SmartCare. Jill has worked to build strong relationships with providers and BHS teams ensuring effective communication, collaboration and alignment to meet County and DHCS requirements and goals, and this foundation will carry forward in her new role!

In her free time outside of work, Jill enjoys cooking elaborate dinners for friends, spending time with her husband and dog, and travel and food adventures. Gallup Strengths: Strategic, Individualization, Adaptability, Intellection, Input

Management and Information Systems (MIS)

System Administration and Access – Managed by Cheryl Lansang
Contact: Cheryl.lansang@sdcounty.ca.gov or 619-578-4111

Program Integrity (PI) & Reporting is managed by Dolores Madrid-Arroyo.
Contact: Dolores.Madrid@sdcounty.ca.gov or call (619) 559-6453.

SmartCare Access

- LMS required trainings should be completed **prior** to sending the ARF for access request to avoid having your access request from being rejected
- For password resets and login issues, please use the "Forgot your password" feature in SmartCare, contact CalMHSA help desk from 8am-5pm, M-F or call Optum at **(800) 834-3792** from 4:30am–11pm, 7 days a week, including Weekends & Holidays
- To avoid your claims being rejected, MHRS taxonomy must be updated to the following taxonomy or any taxonomy accepted by the State for MHRS: 2242, 2254, 246Z and 2470
- To avoid your claims from being rejected, Other Qualified Provider taxonomy must be updated to the following taxonomy: 171R, 3726, 373H, 374U and 376J
- Once taxonomy is updated, please email access inbox bhs_ehraccessrequest.hhsa@sdcounty.ca.gov so we can update the taxonomy in your account

Resources

System of Care (SOC) Application
- Behavioral Health Information Notices (BHINs) – DHCS notifies County BH Plans and providers of P&P changes via BHIN's as well as draft BHIN's for public input. Feedback can be sent directly to DHCS or BHS-HPA.HHSA@sdcounty.ca.gov.
- System of Care (SOC) Application – Reminder for required monthly attestation in the SOC application. See SOC Tips & Resources Optum page for more information.
- Medi-Cal Transformation **(**aka CalAIM**) –** info also available at the Optum CalAIM Webpage for BHS Providers for updates on Certified Peer Support Services implementation, CPT Coding, Payment Reform, Required Trainings, and relevant BHINs from DHCS. For general questions on local implementation of Medi-Cal Transformation, email BHS-HPA.HHSA@sdcounty.ca.gov.

Email Contacts

• ARFs and Access questions?- Contact: BHS_EHRAccessRequest.HHSA@sdcounty.ca.gov
• EHR questions?- Contact: BHS_EHRSupport.HHSA@sdcounty.ca.gov
• Billing questions?- Contact: MHBillingUnit.HHSA@sdcounty.ca.gov
• CalAIM Q&As?- Contact: bhs-hpa.hhsa@sdcounty.ca.gov
• SMHS Documentation Standards/OPOH/UCRM questions?- Contact: QIMatters.HHSA@sdcounty.ca.gov

QI Matters Frequently Asked Questions - July

Q: What should we do if an employee leaves our program before the TADT is closed – is it the expectation that the PM take over all TADTs if someone leaves before the TADTs are closed/completed?

A: A TADT note can be signed by someone else (other than the original author if you pull up the note that is in progress and change the "Author" from the original to the new name. This will allow the new author to complete the timely access record and removes the note from the original author's dashboard as well and is a solution if the original author is not available. The TADT is not a clinical document, it does not have an impact if the original author is changed, so long as the document/data is entered and completed.

Q: How should our program address the situation when a referral changes from one of our program locations to another. For example, a "requested" program assignment is created for "Central Program" and the TADT is associated with "Program Central". However, by the time the intake/enrollment occurs, the referral has been

shifted to "Program South". Should we reach out to the MIS Support Desk to have the requested program assignment and the TADT "moved" in SmartCare from "Program Central" to "Program South"?

A: We would still need both programs to report to the TADT on the referral.   The program needs to remember that DHCS does not recognize their separate locations as connected in anyway, so while you (program) see it as the client "moved", the state sees it as the client was referred out to a new program. They are treated as different programs/facilities, so the expectation is that reporting/data is happening for both. So "Program Central" should be documenting the initial contact and a disposition that closes the record indicating no appointment scheduled because the client was referred to another program. Then "Program South" starts a brand-new record for the client and uses the initial contact date for when *they* received the "referral" for this client vs using the date the client contacted the central location.

Optum Website Updates: MHP Provider Documents

<u>SMH and DMC – ODS Health Plans Site</u>
OPOH Tab:
- On 06/04/25 the following were updated:
  - OPOH Section C replaced entire section "Network Adequacy" and "Required Actions on the SOC Application", updated contacted information for ARF submission.
  - OPOH Section D there was an update to the Veteran Verification link.
- On 06/12/25 the following were updated:
  - OPOH Section B removed statement that program service verification includes claims reimbursed by Medi-Cal as this cannot be verified in the new EHR.
  - OPOH Section G added information about update to BBS Notification needed as of 07/01/25, and updated program's responsibility for error correction process.
  - OPOH Section J modified billing process and error correction processes for programs to follow.
- On 06/26/25 the following were updated:
  - OPOH Section N was updated due to changes in CANS discharge information being client level vs program level.
  - The OPOH and Table of Contents were updated 06/26/25 to account for the most recent OPOH changes.

MH Resources Tab:
References Section –
- On 06/17/25 there was an update made to the Billing SMHS for Sibling Sets Guidelines to account for changes in wording/processes per SmartCare.

Recent Communications
- 06/26/2025 – MHP Providers: Member Handbook Effective July 1, 2025
- 06/26/2025 - BHS Memo: SmartCare Update – Home Medication Entry
- 07/03/2025 - BHS Memo: Certified AOD Counselor Provision of Specialty Mental Health Services

Q4 MH PIPs – Network and Quality Planning/Population Health

Access Times PIP
Improve timely access from first contact from any referral source to first offered appointment for any specialty mental health service (SMHS).
The University of California at San Diego (UCSD) Child and Adolescent Services Research Center (CASRC) team submitted a draft for the PIP design submission to Behavioral Health Services (BHS) for review. The Spring 2025 Youth Services Survey (YSS) was disseminated in May, which included questions regarding timely access. UCSD gathered responses from the Timely Access Questionnaire for community mental health providers in San Diego County, which will be used as the interventions are developed for this PIP.

Follow-Up After Emergency Department Visit for Mental Illness (FUM)
Increase the percentage of adult, Medi-Cal-eligible beneficiaries from pilot emergency departments (EDs) who connect to Mental Health (MH) services within 7 and 30 days after an ED visit by 5%.
The UCSD team submitted a draft for the PIP design submission to BHS for review. UCSD received the CalMHSA HEDIS rates for MY 2023 and MY 2024 to include as pre-baseline data for the PIP design report. The UCSD PIP team continues to attend the Healthy San Diego Behavioral Health Quality Improvement Workgroup with the goal of learning and sharing what each Health Plan is doing for the State-mandated PIP topics and interventions.

For more information go to HSAG PIP

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