

# Avatar Process Improvement Committee

Meeting Agenda: [CalAIM \(santacruzhealth.org\)](http://CalAIM.santacruzhealth.org)

4/4/2024

9:00 AM - 10:00 AM

## Mission:

The Avatar Process Improvement Committee is an established bi-weekly NetSmart Avatar user group with representation from County Behavioral Health and Contract Partners, including providers, supervisors, and management, with the intention of evaluating change recommendations and making programming decisions to improve the electronic health care system.

## AGENDA

### 1. Assessment Widget Updates

EP #	Program Name	Status	Psychosocial	MSE	Diagnosis	CANS ANSA	ALOC	ASAM RE	TX PLAN	CSI	CalOMS
5	County - Pre Admit Outpatient	Need Update	X	X	09-13-2023	X	✓	✓	X	X	✓
7	County - SUD Outpatient	Need Update	✓	✓	X	✓	01-23-2024	X	X	✓	X
2	County - SUD Pre-Admit	Need Update	✓	✓	X	✓	01-23-2024	X	X	✓	X
6	Janus - Peri Adult Long Term Res	Need Update	✓	✓	10-20-2023	✓	01-23-2024	X	04-10-2024	✓	10-20-2023

- a. Three new Widgets for Compliance Tracking: MH Children's, MH Adults, and SUDS
  - i. IT: Israel is the lead
  - ii. Committee has made recommendations for Widget fields

### 2. CalAIM Assessment Form

▼ SUD Risk Rating

SUD Risk Section Not Completed

Dimension 1 - Acute intoxication and/or withdrawal potential

None  Mild  Moderate  Severe  Very Severe

- a. Assessment Portion for Integrated Services determining SUD Risk Rating:
  - i. IT: Dylan is the lead
  - ii. Committee has made recommendations for a button to Enable or Disable section

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## 3. New “Medical Note” form (for County Prescribers only)

- a. Ensuring the new Medical Note services are known and located in the chart
  - i. IT: Dylan or Daniel? is the lead (NX Platform)
  - ii. Committee has made recommendations Medical Note services to appear on Service History Widget and the Location Code appears on the Progress Note

## 4. SUBG Care Plan Progress Note Type & Template

- a. SUDS will add a new Progress Note Type and Template for SUBG Care Plan
  - i. IT: Daniel w/ Nancy are the lead
  - ii. Committee has made recommendations for SUDS (Sara Avila, QI) to seek final approval of template text. Sent Friday 3/29/2024 – due by 4/5/2024.

## 5. Peer Support Specialist Services (Group Service Code Billing in SUDS)

- a. **Goal:** Ensure that Peer Support Specialist Group services are billed in Episodes
- b. **Clarify:** Issues with limitations to billing based on LOC enrollment:
  - i. Avatar Group note form/template **does** allow you to add client from multiple LOCs. (Example 3.5 Res and 2.0 IOP clients can be in one Peer group). **Needs testing.** *Janus has not launched groups for peers due to this.*
  - ii. When a client is discharged from an LOC, the Episode is closed; but Janus wants to provide continued Peer services after LOC discharge.
  - iii. There can be a standalone Peer level per DHCS.
  - iv. Possible workflow solutions:
    1. Client discharges from an LOC but keeps the Episode Open to bill Peer services.
    2. Create a new Peer Support Specialist Episode per County or CBO (for billing)
    3. Bill Peer services in the Recovery Support Services (RSS) Episode

### To SRDL Log Report

- v. IT: Dylan is the lead
- vi. DHCS audit has requested SRDL logs with full text boxes
- vii. Recommendation from Dave (QI) to have printable record of an individual SRDL

## 6. ISS/ICC Form and Report

- i. IT: Dylan is the lead
- ii. **Clarify** Requested change “psychiatric medication” to “psychotropic medications” because not all kids are on medications. Change from “antipsychotics”? See below

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-C: Which of the following factors are currently true for the child/youth?

- 2+ Inpt Hospitalizations in 12 months
- 2+ Crisis Stabilizations in 12 months
- 2+ placement changes in 24 months
- 2+ meds at same time, past 3 months
- Age 0-5, 1+ antipsychotics OR 2+ dx
- Age 6-11, 2+ antipsychotics OR 3+ dx
- Age 12-17, 3+ antipsychotics OR 4+ dx
- 2+ ER visits, for MH, past 6 months
- Unstable housing within past 6 months
- Eating Disorder, + 1 related hosp.
- 10+ days Absent, suspended, expulsion
- Multiple child-serving systems
- Runaway or missing in the last 2 mos
- Physical and substance use comorbidity
- None Identified

- iii. Recommendation to add name of person submitting form on the report; should be the user who submitted the form last.

## 7. ASAM Brief tool

- a. Spanish language version needed.
  - i. IT: Dylan is the lead
  - ii. **Clarify:** Is this request to add English/Spanish labels to the form or report?

## Parking Lot

- 8. **AVATAR Managed Care Authorization form & report** - Some services require authorizations; this form would be used to authorize times of service. Report includes pre-auth for EDC, Telos, Casa Pacific. Need to add authorization for TBS, ICC, IHBS, SUDs Residential (RTARs), inpatient stays to this as well.
- 9. **New Forms in Avatar – future projects**
  - a. IHBS referral form. Separate from ISS form. Still on paper. Vince to send form to Madea.

## Get Involved!

- Review test documents in [UAT](#).
- To request new projects, innovations or updates to Avatar, please feel free to share your ideas and suggestions in the Avatar meeting. [Avatar Project Request Form \(santacruzhealth.org\)](#)

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## Next Meeting

1. Next meeting is scheduled for 4/11/2024, 9 AM – 10 AM. (every other Thursday morning at 9 AM.)