

Avatar Process Improvement - CalAIM Workgroup

Meeting Agenda

6/29/2023

9:00 AM - 10:00 AM

Meeting Purpose: The Avatar CalAIM Workgroup is a subcommittee of the Avatar Process Improvement Meeting, to address CalAIM related changes to Avatar forms, reports, and workflows. The workgroup reports back to the larger Avatar Process Improvement Meeting.

Mission: Make recommendations and decisions about CalAIM updates to Avatar, with representation from County Behavioral Health and Contract Partners, including line staff, supervisors, and management.

Webpage: Click here for meeting agendas and minutes. [Avatar CalAIM Webpage](#)

CalAIM References: [CalMHSA CalAIM Main Webpage](#)

CalAIM LPHA manual: <https://www.calmhsa.org/wp-content/uploads/CalMHSA-MHP-LPHA Documentation-Guide06232022.pdf>

CalAIM trainings: <https://www.calmhsa.org/wp-content/uploads/CalMHSA-LMS-Instructions-5.24.22.pdf>

Get Involved!

- To add agenda items, contact is nancy.mast@santacruzcounty.us
- During the meeting, please use the raise hand function or the chat box if you have questions, comments, concerns.
- Review guidance documents on the [Avatar Webpage, CalAIM Subpage](#). New documents are being added weekly.
- 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. You may also fill out and “Avatar Improvement Change Request Form” where you can provide details about your requested project.

<https://www.santacruzhealth.org/HSAHome/HSADivisions/BehavioralHealth/AvatarProjectRequestForm.aspx>

AGENDA ITEMS / MINUTES>>>

Announcements

1. **Next meeting – July 13, 2022, 9 AM – 10 AM;** (We meet every other Thursday morning at 9 AM.)
2. **Agendas, meeting minutes and QI Guides are posted on the [Avatar Webpage, CalAIM Subpage](#)**
3. **During the meeting, please use the raise hand function or the chat box if you have questions, comments, concerns.**
4. **Is there anyone that should be invited to this meeting? (Or should be removed from the invite list?) (If you don't tell us, we don't know!)**

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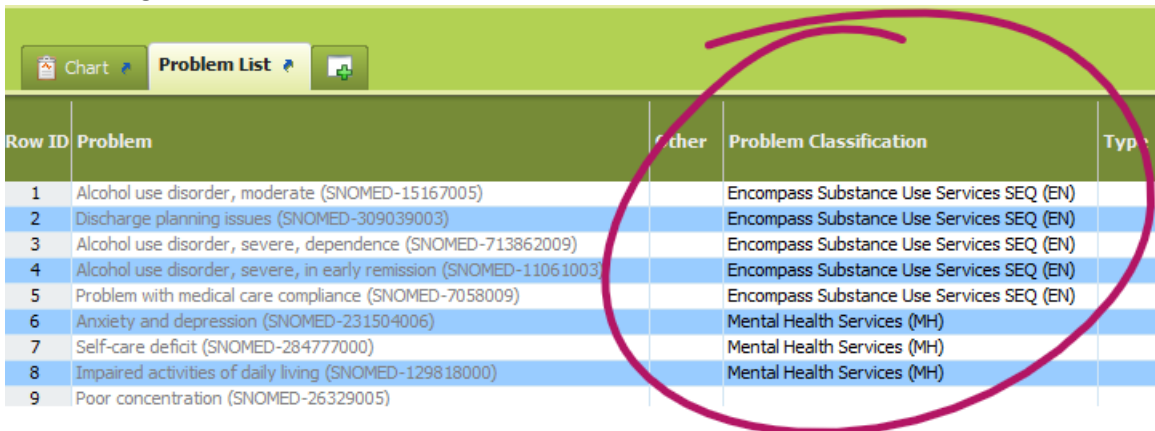
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Agenda Items

1. CalAIM Service Code Trainings and Avatar Changes

- a. Trainings are completed and you should have received written materials and a link to videos in an email. Sent to all County BH staff and contractor supervisors.
- b. IT department is working hard on updating service codes, which we will see beginning 7/1/23.

- #### 2. ALMOST DONE! Problem List Changes and Classification of Historical Problems
- County has completed the project for adding problem classification to problem lists for you. Problems associated with currently open SUD programs were updated. Please continue to update lists as you add new problems, or when you find older problems that should be classified. Also, if you find a problem that you think has been misclassified, please feel free to change the classification.



| Row ID | Problem | Other | Problem Classification | Type |
|--------|--|-------|---|------|
| 1 | Alcohol use disorder, moderate (SNOMED-15167005) | | Encompass Substance Use Services SEQ (EN) | |
| 2 | Discharge planning issues (SNOMED-309039003) | | Encompass Substance Use Services SEQ (EN) | |
| 3 | Alcohol use disorder, severe, dependence (SNOMED-713862009) | | Encompass Substance Use Services SEQ (EN) | |
| 4 | Alcohol use disorder, severe, in early remission (SNOMED-11061003) | | Encompass Substance Use Services SEQ (EN) | |
| 5 | Problem with medical care compliance (SNOMED-7058009) | | Encompass Substance Use Services SEQ (EN) | |
| 6 | Anxiety and depression (SNOMED-231504006) | | Mental Health Services (MH) | |
| 7 | Self-care deficit (SNOMED-284777000) | | Mental Health Services (MH) | |
| 8 | Impaired activities of daily living (SNOMED-129818000) | | Mental Health Services (MH) | |
| 9 | Poor concentration (SNOMED-26329005) | | | |

- #### 3. SOLUTION IDENTIFIED - Problem List Duplicate Problem Error
- ticket out to Netsmart for cleaning up duplicate problems in problem list as it is making the problem list glitchy. [Update from NetSmart 5/1/23: NetSmart still working on problem. No solution yet.] NetSmart provided a solution for this problem, this week, which will be applied soon. Please test the problem list in UAT, to see if you can duplicate the error. So far, testing has been positive, but it's difficult to test an error that only occurs intermittently. **Discussion Today:**

4. Potential Problem List Updates - Pending exploration with NetSmart

- a. Prior Discussion
 - i. Add Date Identified to dx form so you don't have to then open Prob list to add this after completing a dx form. (Veronica)
 - ii. Make Date Identified question required (Dave)
 - iii. Sarah Tisdale: Have date identified populate back to Diagnosis form from Problem List.
- b. "Date Identified" Field and Problem List
- c. Field is required per CalAIM. Problem: There is no equivalent field on diagnosis form to populate this question. Is there a way to add this to the diagnosis form? Nancy: if field cannot be added to the diagnosis form, the submit date/time on the diagnosis form might suffice as a data point, at least in terms of audit compliance.

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- d. Date of Onset field: per recent feedback from state at our most recent audit, Date of Onset is not required. Please add the state if desired, but it is not required.

5. Assessment Tool “Children’s Behavioral Health Intensive Support Services Eligibility Form”

- a. Nancy has finished the test version of the form, which can be tested in UAT.
- b. Please take a look at it and provide feedback to Nancy.
- c. Gian working on a printout (report) of the form for printing, etc. Unfortunately, because some of the questions are fairly long, we will not be able to print this form directly from the chart view, thus we need a report.
- d. Please test in UAT.
- e. Need a plan for notifying staff to use the form.

6. Supervisor Reports - Need updating to reflect CalAIM Changes

- a. Supervisor Reports are less relevant because of CalAIM changes. Assessments and other items are no longer due on specific dates, but are to be done “as clinically indicated.”
- b. SUD Supervisor Report still not complete. (Maya Jarrow)
 - iv. Says “test” on the label and in the report printout.
 - v. Janus to send markup to Dave with changes needed. Did this happen?
- c. Possible organization of subcommittee to discuss.
- c. Discussion Today

Parking Lot

- 1. Combining “SMHS Assessment” with Residential Referral Form - What information is needed to fulfill the needs for residential programs? Dave - This is part of QI work plan and tracking authorized services. Would like to have a workgroup. This can be moved to parking lot items.
- 2. Added in meeting - Avatar update projects: Need to look at all avatar projects and do appraisals of skill sets in order to see who can best do the projects, or what projects need to be delayed.

CalAIM Overview and recap

- 1. CalAIM has ushered major regulatory changes to the California Medi-Cal system.
- 2. CalAIM is designed to streamline documentation and auditing practices by focusing on Fraud Waste & Abuse (FWA) to alleviate the excessive administrative burden and focus more on clinical best practice.
- 3. CalAIM employs a person-centered approach to improve access and coordination among the delivery systems.
- 4. Minor documentation infractions resulting in recoupments will no longer be deemed priority through the lens of FWA.
- 5. With CalAIM, providers can bill for legitimate collaboration of staff members in the same agency who hold different roles for the same client. This has been an area of lost revenue and staff frustration.

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