Meeting Minutes

9/21/2023 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: <u>https://www.calmhsa.org/wp-content/uploads/CalMHSA-MHP-LPHA Documentation-</u> 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 <u>nancy.mast@santacruzcounty.us</u>
- 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. H

AGENDA ITEMS / MINUTES>>>

Announcements

- 1. Next meeting October 5, 2023, 9 AM 10 AM; (We meet every other Thursday morning at 9 AM.)
- 2. Agendas, meeting minutes and QI Guides are posted on the <u>Avatar Webpage, CalAIM Subpage</u>
- 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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Agenda Items

1. New Announcements:

- Cannot Open Charts (Nancy): There is a new problem with Avatar where certain charts cannot be opened at all. We have found two charts with this problem so far. Netsmart has ID'd a solution which will be applied to LIVE next week hopefully. If you find another chart that will not open, please let Nancy know. Workarounds:
 - i. Create a new chart. Once the problem is fixed, the two charts can be combined.
 - ii. Use the Clinical Document Viewer to view historical documents. You will see any scanned documents, and any "DR" documents. If you need help on using the Clinical Document Viewer, send a message to <u>nancy.mast@santacruzcounty.us</u>
- b. The Service Activity Report has been updated to reflect billing changes related to CalAIM (Nancy).
 - i. Added to LIVE last night. Please look at it and test it.
 - ii. Daniel Crews (programmer):
 - There are two SAR reports: one for pre-CalAIM (prior to July 1st, 2023) one for post-CalAIM called "Service Activity Report (post CalAIM). Pre and post CalAIM bc logic is different for these reports. We may need to add some refinements as the state clarifies what is and is not allowable per CalAIM. There was also discussion about what level of rounding these numbers need.
 - 2. Report now shows allowable minutes that can be claimed to Medi-Cal (units that can actually be billed).
 - 3. If you find problems with the report, or you have questions, contact Daniel. Sarah Tisdale reports a finding that the new report is not showing numbers in the Total Duration column. It appears there is not enough space and numbers show up as "########." Dylan will work on formatting to see if we can fix this.
- 2. Assessment Tool "Children's Behavioral Health Intensive Support Services Eligibility Form" (ISS Screening Form) Form is completed, along with a "report" (printout) in UAT for review. Once approved, it can be moved to LIVE.
 - a. Children's BH wants to launch soon in LIVE but needs to work out how to introduce the new form and report, as well as finalize workflows. There may be some minor changes to the form related to the aforementioned. Dylan Jones (IT), Nancy Mast (QI) and Meg Yarnell (CBH) have been meeting to discuss changes to the form.
 - b. See UAT to review the form.
 - c. Aggregate data reports Need for Spreadsheet View type report
 - d. Minutes/Discussion today
 - i. Demo in UAT (Dylan)
 - ii. Report out from Meg Yarnell (County Children's BH) who have been discussing workflow for this form and possible refinements related to. In addition, the next Children's UR meeting will discuss.
 - iii. Dylan Jones has taken over programming on the form, is working on updates, and is waiting on final feedback from CMH so that the form can be finalized.

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- 3. (Dave) Discussion of adding text templates (automatic text users can add to forms) to the SC General Purpose Progress Note for TCM care plan progress notes. Minutes/Discussion today:
 - We have a template that Monterey
 County uses for this purpose, that we
 can use as a starting point for what we
 want in our template.
 - b. Group was in agreement to start building template in UAT, please provide input of what you would like to have for template. Nancy can add once the text of this template has been finalized.
 - Nancy-if you have thoughts about a different template your program would need, please let QI know.

Text of proposed template:

V	PROGRESS NOTE		
Note	туре 💡		
MHP	P - TCM Care Plan	-	
Clien	t Presentation (Optional)	0	
		•	
Narra	ative Description of Service	s /	S / S / S
- (Cut	Ctrl+X	
	Сору	Ctrl+C	
Clier	Paste	Ctrl+V	₽ ∕
	Delete	Delete	
	SpellCheck	F7	
Н	Select All	Ctrl+A	
Refe	System Templates	/	DMC-ODS Assessment Template
	User Defined Templates	- (•	Summary of ASAM Dimensions
	Widget Templates		Orientation/Follow-Up Assessmnt Template
Follov	w-up Care / Transition Plan	/ Other Rela	SUD Res Weekly Summary
			2

"Client is receiving mental health treatment in hopes of achieving their goal to [add goal]. Writer will continue to support [client and/or client's caregiver/support person] through case management services to address the multi-dimensional needs identified in the assessment until the service goals are met or when there is no longer a need. Writer met with [client and/or client's caregiver/support person] to provide case management related to [add identified need]. Writer supported [client and/or client's caregiver/support person] by [add service activities/specific interventions]. Upon achievement of the service goals, writer will provide care coordination and/or discharge planning to assist client in sustaining their gains. [Client and/or client's caregiver/support person] agrees with this plan.

4. CalAIM coding changes (progress note service codes)

- a. Cheat sheets, FAQs and videos published by QI and are on the Avatar CalAIM Webpage.
- b. Minutes/Discussion today Please utilize these resources for training new staff. <u>https://www.santacruzhealth.org/HSAHome/HSADivisions/BehavioralHealth/AvatarResources/CalAIM.a</u> <u>spx</u>

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c. If you have questions, think that there is a code you should have that you don't, or see a code that you think should not be there, contact the QI department.

CalAIM Resources									
Home Training Resources Forms & Reports Information Notices Meetings CalAIM									
As the California Department of Health Services rolls out the CalAIM initiative, we will make changes to our Avatar system to reflect that. This page has resources relevant to those changes.									
County QI Department CalAIM Information and Guidance -									
FEE FOR SERVICE CPT CODING FREQUENTLY ASKED QUESTIONS (FAQ)									
Fee for Service DMC and MHP FAQ #1 6.27.2023									
NEW Fee for Service DMC FAQ #2 8.4.2023									
NEW Fee for Service MHP FAQ #2 8.4.2023									
DMC SERVICE CODE GUIDES (Drug Medi-Cal or Substance Use Treatment Programs)									
NEW DMC QUICK GUIDE DMC CPT CalAIM Coding 8.4.2023									
<u>Fee for Service DMC-ODS CPT Coding 6.28.2023</u>									
<u>Fee for Service DMC LPHA Service codes 6.27.2023</u> Ser for Service DMC Mod Surgest LDUA codes 6.27.2023									
Fee for Service DMC Med Support LPHA codes 6.27.2023 Fee for Service DMC Non-LPHA codes 6.27.2023									
Fee for Service DMC Peer Services codes 6.27.2023									
· Tee for Service DMC Peer Services codes 0.27.2025									
MHP SERVICE CODE GUIDES: Mental Health Programs									
NEW MHP QUICK GUIDE MHP CPT CalAIM Coding 8.4.2023									
<u>Fee for Service MHP LPHA Service codes 6.23.2023</u>									
<u>Fee for Service MHP Non-LPHA codes 6.23.2023</u> Fee for service MHP COT Coding 6.22.2023									
Fee for service MHP CPT Coding 6.23.2023 Fee for Service MHP Dear Services ender 6.22.2023									
<u>Fee for Service MHP Peer Services codes 6.23.2023</u>									

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5. Update for Last Assessment Date Widget – Widget needs updating because of CalAIM changes.

Last Assessment Date										Φ = ₹	
EP #	Program Name	Status	Psychosocial	MSE	Diagnosis	CANS ANSA	ALOC	ASAM RE	TX PLAN	CSI	CalOMS
7	Charis - Child Outpatient	Need Update	02-02-2023	x	05-06-2020	05-31-2019	×	×	10-05-2020	х	× 1
10	Encompass - Pre-Admit SEQ	Need Update	×	×	х	×	х	х	х	×	x
8	LE - 00044 MH COUNTY OUTPATIENT	Need Update	02-02-2023	x	07-01-2022	05-31-2019	×	×	09-25-2022	07-01-2022	×
3	LE - 00440 MH ENCOMPASS OUTPATIENT	Need Update	02-02-2023	x	09-19-2017	05-31-2019	×	×	08-14-2019	02-01-2018	× 1
5	LE - 00442 MH FRONT STREET OUTPATIENT	Need Update	02-02-2023	x	12-16-2019	05-31-2019	×	×	03-15-2021	x	×
9	Pacific Clinics - Children Outpatient	Need Update	02-02-2023	x	01-14-2023	05-31-2019	×	×	x	x	×
6	Sobriety Works - Adult IOT	Need Update	×	×	х	×	х	х	10-01-2021	×	x

a. Discussion from prior meetings:

- i. New ISS Screening form needs to be added. Form is done at intake and then clients are reassessed periodically. Need to understand what the timeframes are to add to widget.
- ii. Discussion of including PSC-35, but this form is external, web-based and run by a different agency. It might not be possible. Need to check.
- iii. Even if certain items are no longer done on a routine basis, it might be good to leave the item on the widget and have the last date completed, as items like psychosocial assessment still need to be done when there has been change. (If assessment is not done when needed, then how can we know that services are still necessary and targeted toward the right things?)

b. Minutes/Discussion today

- Has the subcommittee met yet? (Dave) Subcommittee on Dave's to do list, compliance report will have fields swapped out. Date TBD for subcommittee.
- ii. Brian Whiteside and a few other County test users are using a brand-new progress note form, for County psychiatric providers only. The new note is called simply, "Medical note," and can be viewed just like any other progress note in the chart, and in the progress note widget.

ASAM Brief Assessment (OLD) Mental Status SC Progress Notes SC General Purpose Progress Note SC Group Progress Note SC Med Service Progress Note Medical Note Treatment Plans Problem List

iii. If you do not see this new form in your chart view, you can add it.

6. Reports - Need updating to reflect CalAIM Changes

- a. SUD Supervisor Report
 - i. There are two supervisor compliance reports, one for DMC & one for MH. MH does not have annual psychosocial assessment due date any longer (psychosocial is due "as needed" per CalAIM). Are there documents that also no longer have a specific due date for SUDS?
 - ii. Reports can be changed, including fields, so they are functional for staff & supervisors.
 - iii. Janus sent Dave items about SUD report changes that are needed. Encompass SUD supervisors will provide feedback on changes that are needed.

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- iv. Four residential programs, ALOC must be done 72 hours of residential admission. Hours are harder for Avatar to calculate vs. days on reports. Would looking at 3 days or 2 days instead, work? Or possibly this might need a separate report.
- v. For items that no longer have a specific due date, we might want to have the report at least provide the last date that assessment was done.
- b. MH User Compliance Report (Dave)
- c. "Adult MH Report" (Dave)
- d. Request for new Managed Care Authorization Report (Dave)
 - i. Report includes pre-auth for EDC, Telos, Casa Pacific. Need to add TBS to this as well.

TODAY:

- e. Managed Care Authorization Form (Dave)
 - i. Dave demo'ed interface.
 - ii. Meg-service authorization requests and presumptive transfer would be great to add to this report, Psych testing, eating disorder referrals eventually would be great to add.
- f. Other Discussion today
 - Dave discussing future "Managed care authorization report" Programming by Dylan. Form looks as all MC authorizations, and can provide helpful information on all active authorizations with a timeframe for programs like TBS, ICC, IHBS, SUDs Residential (RTARs), inpatient stays. Still in UAT testing. Need more follow up meetings for Children's programs.
 - ii. Meg Yarnell: Could we also ask if they have anything happening pushing CANSA 2s and 3s into the problem list? Nancy - Unlikely, since the problem list and diagnosis form are "proprietary" and we don't have a lot of ability to change these forms. However, we could discuss some sort of alert for this.

7. Use of "SMHS Assessment" to replace current Psychosocial Assessment SC

- a. This form is in UAT and can be viewed there. It is much more streamlined than the current Psychosocial Assessment SC. Note that it can be updated, questions added, etc. if desired.
- b. The Clinical Practice Standards Committee has been meeting for the past several months and one of the items on the committee's agenda is to discuss replacing our current Psychosocial Assessment with the new SMHS Assessment.

8. New Items/Other items:

Robert Annon: Discussion of tracking discharge information from CSP, using the Avatar Discharge form.
 Nancy- Discharge form cannot be used for this. It is proprietary to NetSmart and cannot be altered.
 There may be another way to meet this need, but will need to be discussed more.

Parking Lot

1. No current items in parking lot.

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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.

Attendance

Mary Zinsmeyer (New Life), Meg Yarnell (CMH), Nancy Mast (County QI), Robert Annon (County AMH), Sarah Tisdale (Encompass QI), Vince Stroth (County CMH), Amanda Engeldrum Magana (PVPSA), Cynthia Nollenberger (County Adult MH), Dagny Blaskovich (Volunteer Center), Daniel Crews (County IT), Dave Chicoine (County QI), Dylan Jones (County IT), Israel Balderas (County IT), Jace Freyman (Encompass), Joel Stiles (New Life), Julie Krokidas-Wooden (Sobriety Works), Kayla Gray (County HTS), Madea Owen (County QI)