Avatar Process Improvement - CalAIM Workgroup
Meeting Minutes

10/5/2023
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. H

AGENDA ITEMS / MINUTES>>>

Announcements

1. **Next meeting – October 19, 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 *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!)**

Agenda Items

1. **Service activity Report:**
   a. Discussion today
      i. Daniel-New service activity report has been updated-put into LIVE last night and assigned roles to it. Please look at it and test it. Daniel Crews-there are two reports: one for pre-CalAIM (prior to July 1st, 2023) one for post-CalAIM called "**Service Activity Report (post CalAIM)".** Daniel still working on smoothing out a few things in new report. Report now shows allowable minutes that can be claimed to medi-cal (units that can actually be billed). Sarah-ran new report. Total duration reflecting CalAIM units, not all numbers are showing if number is too big. Gian working on this report. Dylan-still working on formatting.
   b. Minutes/Discussion today
      i. Daniel will be sending another email out soon re: post CalAIM SAR. M90785 reporting incorrectly on SAR. If you see anything that looks strange please forward these. Gian addressing the formatting.
      ii. Dave-suggestion that grouping by month be removed. Select date to date instead.
2. **Dave-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)-ready once feedback on form is given.
      ii. Workflow for form to be discussed innext Children's UR meeting, facilitator to have one agenda so contractor and county have agreement about how to do this form in avatar. Dylan Jones-working on updates waiting to hear back on final feedback for form.
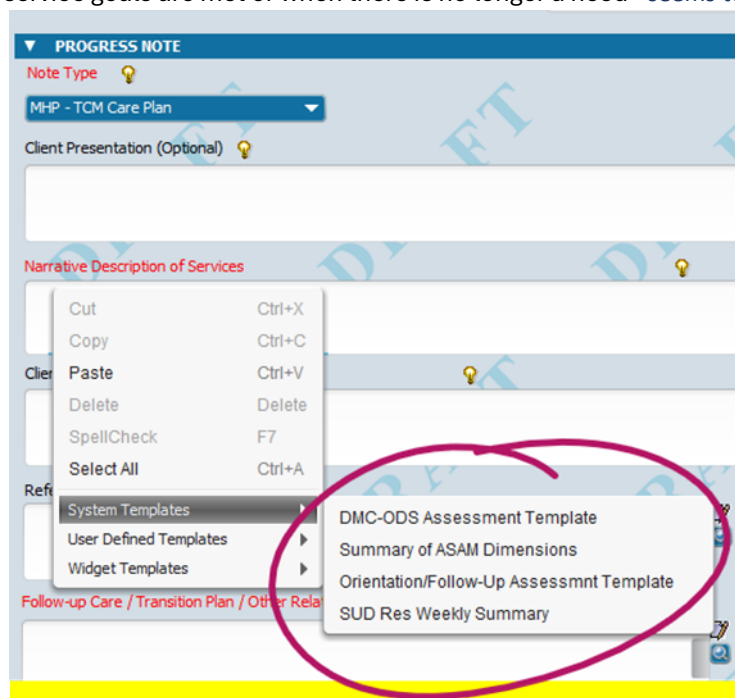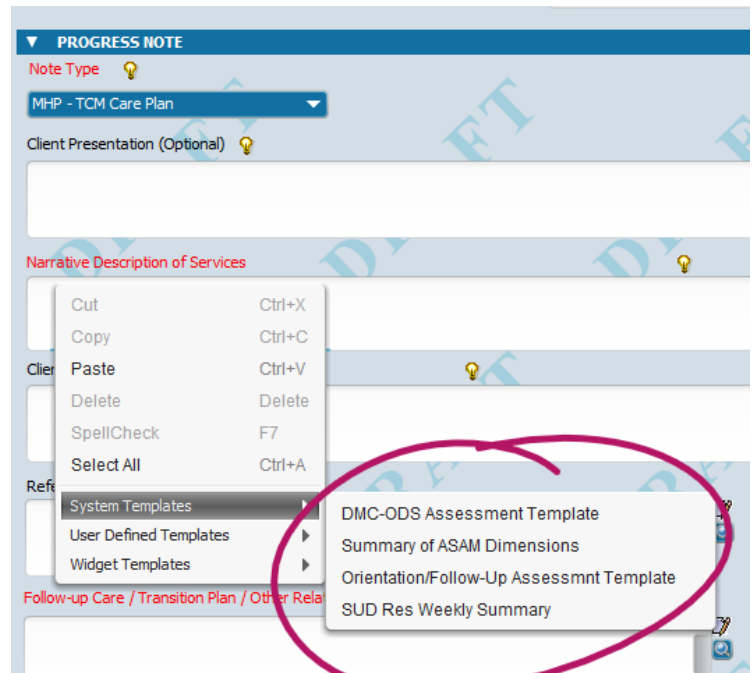

iii. <mark>Vince-shared several corrections need to the form. Nancy working on these as well as Dylan.</mark>
iv. <mark>Once form is finalized, in UAT do some data entry and see if the form and report function appropriately. Then move to LIVE & expand.</mark>

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.**
   - <mark>a.</mark> Nancy can add once the text has been finalized.
   - b. Discussion from last meeting
     - i. TCM care plan template. Nancy put in UAT. Dave show example of template for TCM care plans.
     - ii. Meg, Robert, Leah gave input on template content.
     - iii. From Leah: I personally think the sentence for when goal is met should be more individualized. "until the service goals are met or when there is no longer a need " seems too vague to me.
   - <mark>c.</mark> Minutes/Discussion today
     - i. Right click on narrative box and select "TCM care plan template" to use template.

    ii. Vince-agree with individualizing "until service goals" are met. Add: "related to a problem list item" (name problem).

    iii. Jennifer-like having it there, print out and share TCM care plan and problem list. Additional feedback: second paragraph – what assessment are you speaking to? Give people options on kinds of assessments to include. Last sentence: "Client/caregiver agrees with or does not agrees with this plan"

    iv. Sarah-problematic to state "assessments" in template, as sometimes people will have services prior to TCM care plan. Simplify template so it is customizable.

    v. Dave-bare bones template is ok? Group agrees with this. **Final Recommendation: Keep template as is. Move to LIVE.**

    vi. **Dave-Need another template for problem list review and update. Problem list update template content to be updated. Next meeting: Dave will produces a starting template for problem list update/review, also discuss in QI team meeting.**

4. **CalAIM coding changes (progress note service codes)**

    a. Dave: Advice on cleaning the page up?

    b. Need organize materials better.

    c. Minutes/Discussion today

        i. Not discussed in meeting.

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
- Fee for Service **DMC**-ODS CPT Coding 6.28.2023
- Fee for Service **DMC** LPHA Service 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

MHP SERVICE CODE GUIDES: Mental Health Programs

- **NEW MHP QUICK GUIDE** MHP CPT CalAIM Coding 8.4.2023
- Fee for Service **MHP** LPHA Service codes 6.23.2023
- Fee for Service **MHP** Non-LPHA codes 6.23.2023
- Fee for service **MHP** CPT Coding 6.23.2023
- Fee for Service **MHP** Peer Services codes 6.23.2023

    a. Discussion from last meeting
- 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. Discussion in last meeting
- i. Has the subcommittee met yet? (Dave)-subcommittee on Dave's to do list, compliance report will have field's swapped out. Date TBD for subcommittee.
- ii. Robert: issues with chart not showing most recent note in widget-this is coming up as we are addressing inactive clients with open LE44's. As we move to close those LE episodes.
- iii. Kayla Gray-Last service date does not shuffle in chronological order, have to go into document viewer to see last date of note, not in widget. Any progress notes in chart not shuffling in chronological order.
- iv. Nancy-need to clarify problem and then send ticket to Netsmart.
- v. Nancy-Brian Whiteside-using new med note called "medical note", it is a web based med note, only used by medical providers at the County. In beta testing.
- vi. Sarah T-not able to add this form in search forms, Nancy to work on this.
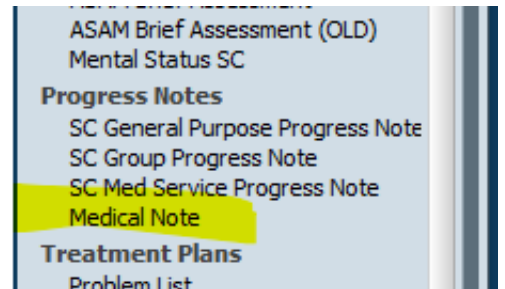
6. **Managed care authorization form -**
    a. **new Managed Care Authorization form & report (Dave)**
    b. Minutes/Discussion today
- i. Dave demo'd form in meeting. Form would be used to authorize times of service.
- ii. Dave-Report includes pre-auth for EDC, Telos, Casa Pacific. Need to add TBS to this as well. Dave demo'd the report to show when the authorization period ends.
- iii. Vince-will this send reminders in avatar when authorization is due (auth end date on report). Does clinician need to fill out ICC/IBS?TBS form?
- iv. Dylan-yes reminder are possible in avatar for auth end dates and would notify entered by person. Dylan to look into this.
- v. Dave-form & report in LIVE. ICC/TBS/IHBS managed care form would need to be added by clinician.

    c. Discussion from prior meetings:

        i. 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.

       ii. Dave-Some services require authorizations, this could be managed by a "Managed care authorization report"-Dylan constructing this report. Looking at all MC authorizations, form can see all active authorizations in a timeframe for programs TBS, ICC, IHBS, SUDs Residential (RTARs), inpatient stays, and Encompass included. Still in UAT testing. Need more follow up meetings for Children's programs.

7. **Items from last meeting (Other items):**
   a. Robert Annon: Can we add library in avatar from discharge form of all inpatient places in CA so CSP/PHF can use this when discharging person? Nancy- Discharge form cannot be used for this. Maybe can populate a dictionary but will need to be discussed more.

8. **Other items:**
   a. Minutes/Discussion today
      i. Vince- Can we have clinician's be able to print out scanned ROI forms in avatar? This is a permissions thing. **Dave-follow up for QI team meeting to discuss.-can we give permission to providers to print out?**
      ii. Vince-can we Enable sending client reminders in upcoming appts in scheduling calendar?
      iii. Jennifer-can we print out care plan data set from avatar to show who of clients have care plans and by date? Dave-if progress note is tagged by TCM care plan you can run progress note aging report, on top right corner of report link that shows all client s and all note types in grids and date of last one.

Parking Lot

1. x

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

Not available.