

Avatar Process Improvement - CalAIM Workgroup

Meeting Agenda

1/25/2024

9:00 AM - 10:00 AM

Announcements

1. Next meeting is scheduled for 2/8/24, 9 AM – 10 AM. (We normally 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 / MINUTES>>>

1. Assessment Widget Updates – For most items, there is not a due date anymore. How to update?
 - a. Example: Psychosocial needs to have the last assessment date rather than the next due date since there isn't a specified due date anymore.
 - b. Forms to be added:
 - i. CalAIM Assessment
 - ii. Others?
 - c. Minutes/Discussion today
 - i. Dave - We need to add the "last recorded date" of the new CalAIM assessment into the "last assessment update" widget. Dave – also purposes that the "last recorded date" of the psychosocial date stay in the widget. All other items (i.e. Diagnosis, MSE, CANS, ANSA, ALOC, etc.) should have the last recorded date. Nancy - Currently in the widget the "X" means that it was never done and missing from the chart & a green check mark means it was done within the time frame.
 - ii. Nancy -There is no timeframe requirement now for the psychosocial assessment.
 - iii. Dave – we don't need to worry about color coding in the widget, but just put dates last recorded. For DMC-ODS – in widget it is ALOC/ASAM & CalOMS. Nancy – age of client determines which ALOC/ASAM should have been done for the current widget date. Action item: Dave we need to double check this and see what age it is using for children's adolescent ALOC/ASAM. Dave- we should look at adding the screening tool into the widget too because there is a submitted date. There is also the ASAM brief screening tool.

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- iv. Action item: Vince- Children's would like PSC 35 assessment added into the widget, there is a date submitted for the PSC 35.
- v. Mary – DMC-ODS there is a new thing called a “care plan” for SUDs that has time frames. Dave - when we are trying to find items in the chart such as care plans, we are leaning towards progress note types to find them.
- vi. Action item: Dylan – can help with modifying the widget. Israel can help with this as well. Need to nail down the requirements to load into dev opps. Nancy can help meeting with Dylan to review the requirements in the widget – meeting needs to be set up.

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

2. CalAIM Assessment Form

- a. Type of Services Question Needs Updating. Need to add “Peer Support Specialist” as a list item.
- b. Link needs to be added to charts.
- c. Providers cannot see the form. This needs to be added as read-only form for them. Currently the form has been added for licensed and non-licensed clinicians. Should prescriber support people (MA, RN) have it?
 - i. Minutes/Discussion today
 - I. Dave - We need to update the default chart view so the new CalAIM assessment is viewable, some people can not see it in the chart.
 - a. Action item: Nancy - need to add CalAIM assessment form to user role using the user definition form so it shows up in chart view for people, Nancy can show Dylan this.
 - II. Action item: Dave - CalAIM assessment needs to have links added into the form: “CANS” & “ANSA” links needs to be added (Nancy/Dylan to add these).Need to have “risk assessment” link added to CalAIM assessment as well (Dylan will do).
 - III. Under “Types of services” in CalAIM assessment – need to add “peer support services” (Dylan will do)

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▼ Type of Services

Specialty Mental Health Services

<input type="checkbox"/> Mental Health Services	<input type="checkbox"/> Medication Services
<input type="checkbox"/> Day Treatment Intensive	<input type="checkbox"/> Day Rehabilitation
<input type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Crisis Stabilization
<input type="checkbox"/> Adult Residential	<input type="checkbox"/> Crisis Residential
<input type="checkbox"/> Psychiatric Health Facility Services	<input type="checkbox"/> Intensive Home-Based Services
<input type="checkbox"/> Therapeutic Behavioral Services	<input type="checkbox"/> Therapeutic Foster Care
<input type="checkbox"/> Psychiatric Inpatient Hospital Services	<input type="checkbox"/> Case Management Servi..
<input type="checkbox"/> Intensive Care Coordination	

- d. Form needs to be added to chart view for medical staff. Was it added to the chart view for other staff? Who can view it now?
 - e. Minutes/Discussion today
 - i. Action item: Dave – we need to add “medical note” to chart view. Nancy - form has been added to user group “licensed clinicians” and “non-licensed clinicians” to have view privileges for the note. Prescribers and med support people need medical note added to their chart view.
 - ii. Only County prescribers will use medical note. Not contractors.
3. Other chart view forms – Are these in charts or do they need to be added? “New ANSA,” adolescent and adult ALOC, MSE and Dx (Shelly/Dylan/Dave)
 4. Progress Note Templates
 - a. In progress
 - i. Enhancements for SUDS
 - ii. Feedback on billing codes
 - iii. Peer Support Text Template
 - b. Complete but need to send out info notice
 - i. NEW *Problem List, Review, Add or Remove* Template
 - ii. NEW *MHP – TCM Care Plan Goal Statement* Template
 5. SRADL – Continue discussion of SRADL updates and potential ability to revert to draft. Discussed at last meeting:
 - a. Add a new question and,
 - b. Add a new list item for an existing question - Screening Tool Outcome
 - i. Minutes/Discussion today
 - ii. Dave - Youth screening tool (non-episodic) form – when you get to the referral question part of the form the total score gives you the referral outcome.
 - iii. Action item: Dave – Screening tool outcome (for MHP use only) needs to have more options added “declined services.
 - iv. ADD box: “declined services” under “screening tool outcome” in the clinical disposition section (Dylan to do - add dictionary item and a box here).

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6. Adult Screening Tool Update
7. Peer Support Specialist Care Plans - Shelly will schedule a meeting to review and seek feedback on the recently drafted Peer Support Specialist guidance, including the Peer Support Text Template.
8. ISS/ICC Form Updates (Vince/Dylan)
 - a. How to enter the ICC coordinator in the ISS screening form if the client is already receiving ICC services through FCS? New question, "FCS Coordinated"?
 - b. Dylan to clarify current routing and build updates in UAT.
 - c. Planning on demo for the MHP Children's UR in Feb
 - d. Add a new list item for an existing question - Screening Tool Outcome
 - i. Minutes/Discussion today
 1. Dave – ICC form, we need to rollup a couple more things and then we are good. QI will host Children's UR in February to introduce so all providers that need it have it.
 2. Vince – to come to the Feb Children's UR to discuss.
 3. Dave - Gentle reminder though, this is screening tool and collection of data on screening tools, but we want to eventually move into the managed care authorization form and that is the person that says, yes, it's authorized that we click on that service code and then you put your name on it and you give a block of time that it that the service is authorized.
 4. Dave - Some of these are forever, but we can say what it's one year, six months or whatever, whatever the standard is that you would revisit, then we end an authorization.
9. Residential authorizations - RTAR paper to Avatar in the future
10. Progress note time - There have been questions about how to capture time on progress notes. (Fields shown below for reference.)

▼ PRACTITIONER(S) / TIME

Practitioner

MAST,NANCY (001885)

Direct Service Time --- Documentation & Travel Time

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ADD-ON SERVICE

Add-On Service: mG2212 Prolonged Office Outpa... Selected Add-On Services: mG2212 Prolonged Office Outpatient visit (M32212)

Add-On Duration (Direct time only): 40

- a. Chart view – Some questions in the updated “SC General Purpose Progress Note” show the old question text in chart view. Dylan is working, with Netsmart on this.
 - b. Many service, codes default to 15 mins.
 - c. Which staff can use which codes.
 - d. What should be added to direct time field vs.
 - e. Interpretation of services?
11. Med Notes: There are two now; The older SC Med Services Progress Note and the newer “Medical Note.”
- a. County providers will use the new Medical Note and are gradually adopting.
 - b. Needs to be added as read only and to chart view for other clinical staff.

Other discussion items:

12. Other discussion items:

- a. Minutes/Discussion today
 - i. Meg - Could we config the progress note so clinicians do not have to enter their password when finalizing? Robert shared this great idea which would save time. But instead of putting your password and you just, there's a button that says, you know accept or reject kind of a thing.
 - ii. Nancy – not sure if this will impact how we route the notes. For what we want to do, but it does make sense to try to save people's time, but we definitely need to have that routing. (Dylan will look into).
 - iii. Robert - We're also trying to get people to document non billable services and if we can remove any any friction or any sand in the gears for making it easier to complete a note
 - iv. Meg: So maybe we could dig into it a little bit and see get some more information than put it on the agenda for next time or something to revisit.

Parking Lot

1. (Dave) New 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. Still in UAT testing. Discussion from last meeting: Follow up for Dylan-will this report send reminders in avatar when authorization is due? Meg from last meeting-service authorization requests and presumptive

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transfer would be great to add to this report as well as psych testing & eating disorder referrals eventually would be great to add.

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

Madea Owen (County QI), Mary Zinsmeyer (New Life), Meg Yarnell (CMH), Nancy Mast (County QI), Robert Annon (County AMH), Rosalie Evans (Encompass), Sarah Tisdale (Encompass QI), Shelly Barker (County QI), Vince Stroth (County CMH), Andres Aguirre (Front St), Bernadette Franzel (Encompass QI), Claire Friedman (Sobriety Works), Dagny Blaskovich (Volunteer Center), Dave Chicoine (County QI), Dylan Jones (County IT), Israel Balderas (County IT), Jorge Fernandez (County IT)

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!

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- 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.