

# Avatar Process Improvement - CalAIM Workgroup

## Meeting Minutes

2/22/2024

9:00 AM - 10:00 AM

## Announcements

1. **Next meeting is scheduled for 3/7/24, 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. Currently in the widget the red “X” means that it was never done and missing from the chart. A green check mark means it was done within the time frame. For most forms, Avatar is comparing a specific due date to the date the assessment was last completed, but for many forms currently (CalAIM) there is no longer a due date, and thus items should be listed only with the last date the item was completed.
  - b. Needed updates identified from prior meetings:
    - i. Add the new CalAIM assessment, using “last recorded date.”
    - ii. Psychosocial Assessment SC needs to be listed by last recorded date. (How is it currently set up?)
    - iii. Most other items also should be noted by last recorded date (is this the submit date?), except for a few items that still have a definitive due date, such as the CANS/ANSA. what about the SUD treatment plan?
    - iv. Possibly add the screening tool and ASAM. Dave will look into this.
    - v. Drop the color coding in the widget which is no longer needed for most items, because there is no longer a specific due date.
  - c. Action item: Dave will double check to see what the cutoff age is for the Adult versus Adolescent ALOC. Is it age 18?
  - d. Action item: Vince- Children’s would like PSC 35 assessment added into the widget, there is a date submitted for the PSC 35?
  - e. Discussion of new DMC-ODS “care plan.” We need more information about this item. for SUDs that has time frames.
  - f. **What other items need tracking in the widget?**

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- g. Action item: Dylan and Israel to coordinate modifying the widget. Need to nail down the requirements to load into dev opps. Nancy to meet with Dylan/Israel review requirements.

Last Assessment Date											
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. Discussion Today

a. [Minutes/Discussion today](#)

b. Dave – showed the widget in avatar. We want to show documents for dates submitted so supervisor/reviewer can see last date it was done & when it is due. Will have date instead of checkboxes in the widget.

c. Izzy – working on updates to all three widgets, one thing is the access forms. Mental Health Adult & Child, & SUD adult - how are we going to put this in the chart view? Are we planning to put all three widgets in the same view? Dave – what does the group want? Do we want different tabs for the three kinds of widgets? Group said they would like three tabs.

d. Claire – all for keep it simple for people doing the work.

e. Izzy – follow up item to demo making a widget with three different tabs and then a single widget. One concern with using three tabs is loading time since it will be loading three different items.

f. Izzy – re: request to have last date submitted in widget, when you add program's names to widgets it has duplicate dates in the widget, would this add confusion? Dave – don't think it will, example Cal AIM assessment is non-episodic.

g. Dave – widget tied to compliance report.

h. Jen – if someone has already completed the last assessment for Cal AIM assessment will it show up? Dave- widget will show when last assessment is completed & will include both psychosocial assessment and the new CalAIM assessment.

b. Updates to widget:

a. Izzy - is working on these updates, including adding the CalAIM assessment with last recorded date. Psychosocial assessment will also be last recorded date in widget. **Separate it into 3 different widgets; one for Adult Mental Health programs/forms, one for Children's Mental Health programs/forms, and one for SUD forms/programs so there is more space in each widget. Group agreed-do not need check marks or "X's" in widget and drop the color coding in the widget which is no longer needed for most items, because there is no longer a specific due date. All items added to widget by last submitted date.**

b. SUD Treatment plan: Sara – the only program required to use the old standalone treatment plan form is the NTP/OTP programs, **some programs that use SUBG grant funds will need to have a SUBG care plan but it is still undecided what form it should**

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**be in** (treatment plan template vs care plan progress note). Nancy – we will need to have a data item in the widget for the SUD treatment plan. Sara – different SUD programs have different due dates. Agreement that the “last date done” will be included for the SUD treatment plan.

- c. PSC 35 form (Children’s form): Action item: Izzy to add form into avatar but need to add it first to the “build” environment, then testing environment. This can be done once the avatar update happens, update is scheduled for. PSC 35 last assessment date could be added to the widget.
- d. CANS (Children’s form/ANSA (Adult form): Include in the Children’s widget. Dave – **it should be the submitted date instead of x.**
- e. ASAM Brief/Adolescent ALOC/Adult ALOC (SUD forms): Bernadette -suggested adding the ASAM brief to widget. Sara- the ASAM brief is one form for kids and adults. The Adolescent ALOC and Adult ALOC have different time frames for when they are due depending on the program. Amanda-adolescent ALOC for 12-17 yrs old, and adult ALOC 18 yrs +. They would need to be re-admitted to a new adult program if doing the Adult ALOC once 18yrs, so it is program specific vs. age specific. Amanda – what about the ASAM reassessment? Sara- it is now updated when clinically indicated. We could potentially add the ASAM reassessment into the widget on the date it was last done.
- f. Vince – could we look at adding the IHBS, TBS, TFC authorization forms (Children’s) to this widget? These have to be renewed every 6 months. Nancy – this is not for every client, and not a separate program, right? Vince-not for every client, not a separate program in avatar. Nancy-Would there be a way for avatar to know whether or not a client is in this program? Vince – it is a separate form we fill out.
- g. Jen G. – can we add the ACES awareness tool? Trauma informed access screening tool, used in adult population to screen for childhood trauma used by the Emeline Health Center. Meg -PEARLS is the Children’s version. Not sure if this can be billed for, we need to have discussion around this. Nancy– it sounds like step one for this would be discussion about whether or not to create a new form in avatar for this, as this is not yet in avatar, then think about possibly adding to widget. Meg-there is not a plan right now in Children’s to use it, behavioral health may not be ready to use it.

## 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. **Form has been added to most user role’s and chart views. If there is someone who needs to be able to access or view the form and cannot, let us know.**
- d. Action item: Dylan - Internal links to be added to form (in the actual open form on the left): CANS/ANSA, Risk Assessment to CalAIM assessment as well (Dylan will do).
- e. Action Item: Dylan - Add a new dictionary item to the “Types of services” question: Peer Support Services
- f. Cal AIM assessment form:

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1. One of the things we added was “peer support services” as a selection box under “type of services”. Action item: Dave – want to meet with Dylan and clean things up in the “types of services”, specifically change the “Case Management Services” to “Targeted Case Management”.
2. Meg - Intensive Care coordination, intensive home based services, therapeutic behavioral services, therapeutic foster care do not need to be on here under “types of services”, they use a separate form in order to qualify into these services. Action item (Dylan?): hide therapeutic foster care, intensive Care coordination, intensive home based services, and therapeutic behavioral services from CalAIM assessment under “types of services”. Dave will partner with Dylan on this.

▼ 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	

3. The new “Medical Note” form (a new med note type for county prescribers only) was added to the chart view so everyone can see the information. This new note will not replace the SC Med Service Progress Note. County prescribers may use either note for now. Contractor prescribers and other medical staff will continue to use the older SC Med Service Progress Note.
  - a. Minutes/Discussion today
    - i. Dave – does medical note come out on “service history” widget? It previously was not showing up. Dylan was working on this. Dave – will follow up with Dylan on this.
    - ii. Dave-location code was not showing up on the form, ex. telehealth vs in person. Is this something we want to capture on this form? Yes we do. Dylan/Nancy were working on this.
  - b. Nancy – the new medical note is only used by County prescribers; County prescribers use the Medical note and the SC med progress note in avatar. So, when you're looking for medical information from a psychiatrist in your client's chart, you're going to have to click on both note types. Dave-at least three County provider’s that use the medial note.
    - i. Dave-medical note does not come up on the “services history widget”. Action item: Dylan to look into this & add item to widget. Nancy - my understanding is the data from that note is getting laid down in the same table as all the other notes, so that the

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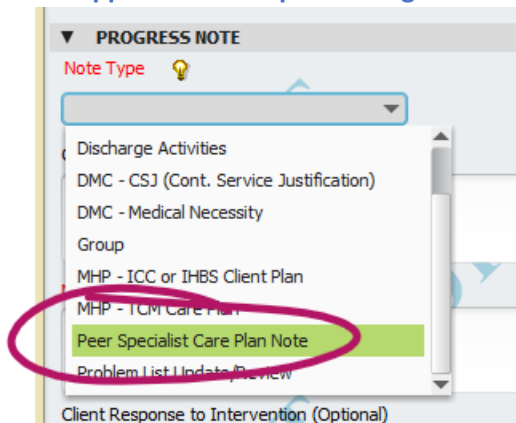
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information should be there, so if it's not getting accessed by the service history widget, that's probably a conversation with Netsmart.

- ii. Dave – the “location” code is not in the new medical progress note form. really important field to capture when we measure telehealth versus in person. Action item (Dylan/Nancy): to investigate this.

#### 4. Progress Note Templates

- a. Information notice was sent for these two new progress note templates.
  - i. **NEW Problem List, Review, Add or Remove Template**
  - ii. **NEW MHP – TCM Care Plan Goal Statement Template**
- b. Peer Support Text Template along with the new note type has been added.



- c. Other progress note templates that are being worked on:
  - i. Enhancements for SUDS
  - ii. Feedback on billing codes
- d. Minutes/Discussion today
  - i. Dave –any template comments? They are set to have the required elements on the notes type template and then you can customize them.
  - ii. Jen – I think it’s great to have the template, can a supervisor can work on the template with a peer, and the peer puts it into avatar for their note? Dave-this is fine.
  - iii. Jessica-we have been using the peer support template, it has been good. We do modify the template.
  - iv. Dave-latest peer guidelines are out, on the avatar page.
- e. Nancy - Information notice sent out about two of them; the problem list review, add or remove & the MHP – TCM Care plan. The next one to get done is the Peer support care plan template & there is a new note type to select when you’re doing it. Guidance posted on avatar webpage.
  - i. Shelly- sent updated peer support guidance document Q1 has been working on today or tomorrow.
  - ii. Jessica - Is there guidance around timelines in this document for peer support care plan note? A lot of questions from staff around timelines for care plan for peers & can

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they bill for peer services/what services can they bill for if they do not yet have a peer care plan in place? Dave-guidance document does not timelines. Action item (Q team Dave & Shelly) – To look into this, regs may not be clear on timeframes.

### 5. Documentation of outcome of Screening Tool Forms and proposed updates to forms

Search Forms	
screening tool	
Name	Menu Path
Adult Screening Tool (Non Episodic)	Avatar PM / Assessments
Youth Screening Tool (Non Episodic)	Avatar PM / Assessments
Adult Screening Tool Report	Avatar PM / Reports
Youth Screening Tool Report	Avatar PM / Reports
Screening Tool Outcomes Report	Avatar PM / Reports

- a. Action item: Dave – Screening tool outcome (for MHP use only) needs to have more options added “declined services.
- b. ADD box: “declined services” under “screening tool outcome” in the clinical disposition section (Dylan to do - add dictionary item and a box here).
- c. Discussion Today
- d. **Minutes/Discussion today**
  - i. Dave – want to make sure people know about this, especially access folks. What is a good way to communicate this? **QI follow up - Inform Julie Lockwood to announce to Children’s UR for all gate folks to be updated. QI will send info notice out to people about screening tool outcome**
  - ii. Meg – info notice that QI sends out about changes would be good to announce this. **Announce in monthly UR meeting. It would be good to have a definition for the dictionary items are for people.**
  - iii. Amanda – in clinical disposition box, if they declined services what would you check? **Could check “provided/received information” in box.**
  - iv. Vince – if checked off as “declined services” will it require us to put “date offered/date scheduled”? Will this be a mandatory field to fill out? Dave - you would click **“information only”**.

### 6. 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**
- e. **QI will host Children’s UR in February to introduce so all providers that need it have it.**

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### f. Minutes/Discussion today

1. Dave –The new ISS form is done, went live last week. Dave discussed accessing the report. When you submit the form the report pops out, it is a cool feature.
2. A question about clinician's name and all the different field values, if they come up on the report. Dave had a discussion and a look at the report with Dylan and don't know if he has made those corrections yet. Follow up item for Dylan.

## 7. ASAM Screening tool

### a. Add Spanish language version into avatar

#### b. Minutes/Discussion today

- i. Veronica-need Spanish version of ASAM screening tool
- ii. Dave –We will look into this. Follow up item.

## 8. Other discussion items

### a. Minutes/Discussion today

- i. Dave –Other projects needed?
- ii. Progress note types:
  1. Meg-TCM care plan is there any way to extract data points in avatar to know if one of those exists and put that on the compliance report? Dave-there is a way to find out if a TCM care plan type note is in the record. Progress note aging report has second feature you can look at the top link on report "note type" to show TCM care plans.
  2. Dave- Progress note type report needs to be updated, it is extremely slow to run.
  3. Meg- clinicians struggle with knowing if there is a problem list update/review note type and TCM care plan note type – can this be added to the widget?
  4. Dave- one question to look at, is there a report or widget to help find the required elements on the notes types?
- iii. Diagnosis form:
  1. Dave-when you add a diagnosis in the form, there is a default button that was set at "yes" so it will automatically go into the problem list. It does not include the "date identified" on the problem list once the diagnosis is automatically added. This button on the diagnosis form is now turned "off" so it does not automatically default into the problem list.
  2. Sarah-there are problems with adding the diagnosis into the form and kind defaulting into the problem list. When it is a duplicate diagnosis it glitches.
  3. Izzy- Follow up item - will take a look at the diagnosis form and the problem list and see what is passed on when you click the box to default diagnosis into problem list.
- iv. Patient portal:
  1. Dave – may hear something about this, it is on the horizon possibly.

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2. Shelly-the state is expecting the patient portal, there is a mandate to have this. It has been beta tested and there are some challenges that present compliance issues. IT is working on it.

### 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.
  - a. Minutes/Discussion today
    - i. Dave - possibly using form to expand to all services. We want to start removing paper forms and start using avatar, .
    - ii. Dave- what is next as far as paper forms?
    - iii. Meg-When you do the ISSE form there is then a whole other form you have to do to authorize IHBS. Dave-we should look into the other form to get into avatar.
    - iv. Vince- will send the current paper IHBS form to Dave , Nancy, and Madea.
2. 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 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.



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### Attendance

Robert Annon (County AMH), Sara Avila (County QI), Sarah Cooper (Sobriety Works), Sarah Tisdale (Encompass QI), Shelly Barker (County QI), Veronica Campos (Janus), Vince Stroth (County CMH), Amanda Engeldrum Magana (PVPSA), Beloved Bolton (County QI), Bernadette Franzel (Encompass QI), Claire Friedman (Sobriety Works), Dagny Blaskovich (Volunteer Center), Daniel Crews (County IT), Dave Chicoine (County QI), Grace Saldivar-Napoles (County AMH), Israel Balderas (County IT), Jennifer Gosk (Front St.), Jessica Stone (Janus Compliance), Kayla Gray (County HTS), Madea Owen (County QI), Mary Zinsmeyer (New Life), Meg Yarnell (CMH)

### 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: CalMHPA CalAIM Main Webpage
- CalAIM LPHA manual: <https://www.calmhsa.org/wp-content/uploads/CalMHPA-MHP-LPHA-Documentation-Guide06232022.pdf>
- CalAIM trainings: <https://www.calmhsa.org/wp-content/uploads/CalMHPA-LMS-Instructions-5.24.22.pdf>

### Get Involved!

- To add agenda items, contact is [nancy.mast@santacruzcounty.us](mailto: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.