Meeting Agenda

8/4/2022

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 Partner's front-line staff, providers, and management.

Webpage: Click here for meeting agendas and minutes. <u>Avatar CalAIM Webpage</u>

CalAIM References: CalMHSA CalAIM Main Webpage

CalAIM LPHA manual: https://www.calmhsa.org/wp-content/uploads/CalMHSA-MHP-LPHA Documentation-Guide-

06232022.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 the CalMHSA CalAIM LPHA manual
- Review with updated problem list form (update from Netsmart) in <u>UAT</u>.
- Sign up for CalMHSA CalAIM trainings: https://www.calmhsa.org/wp-content/uploads/CalMHSA-LMS-Instructions-5.24.22.pdf

AGENDA ITEMS>>>

Announcements

- 1. The Problem list will be the main topic of discussion today focusing on the CalAIM requirements and what changes have been made to the problem list in UAT, and what updates still need to be made in LIVE to meet CalAIM requirements.
- 2. Please keep conversation focused on the CalAIM changes that are needed in avatar. If you have other non-related CalAIM ideas or suggestions for avatar updates, please mention these briefly in the meeting and we will take note of them for further discussion in parking lot items for a separate meeting.
- 3. Next meeting August 11th, 2022 9am-10am
- 4. Agendas and meeting minutes are posted on the Avatar Webpage, CalAIM Subpage
- 5. During the meeting, please use the raise hand function or the chat box if you have questions, comments, concerns.

Meeting Agenda

8/4/2022

9:00 AM - 10:00 AM

Agenda Items

- 1. Introductions: name and program
- 2. How to get involved
- 3. The main agenda item for today is the Problem List

Problem List Discussion

- 1. Review the Problem List guidance document QI sent out this week: Avatar Problem List CalAIM
- 2. Look at the Problem List in UAT
- Problem Classification categories: Labels of Sequestered vs. non-Sequestered programs (If you are not familiar
 with how sequestration in Avatar works, see the <u>Avatar Clinicians Manual</u> page 58. This explains how
 sequestered episodes work.)
 - i. System Notes category
 - ii. Compare Problem list in UAT vs in LIVE
 - iii. Gather questions/feedback & share testing items
- 4. CalAIM Requirements for problem lists are in the CalMHSA CalAIM LPHA manual starting on page 16.
- 5. The following weeks will focus on other CalAIM changes (i.e. treatment plan, progress notes)

Problem List in UAT:

- 1. Have you looked at the Problem List in UAT? Feedback? Questions about the update? How is the Problem list in UAT working? Any changes to be made?
- 2. **Problem Classification Question** There is a new question in the Problem List in UAT which allows us to sequester rows.
 - Labels for the Problem classification. Importance of clear distinction (not currently in LIVE)
 - How the problem list problems will work with Sequestration vs. non-Sequestration

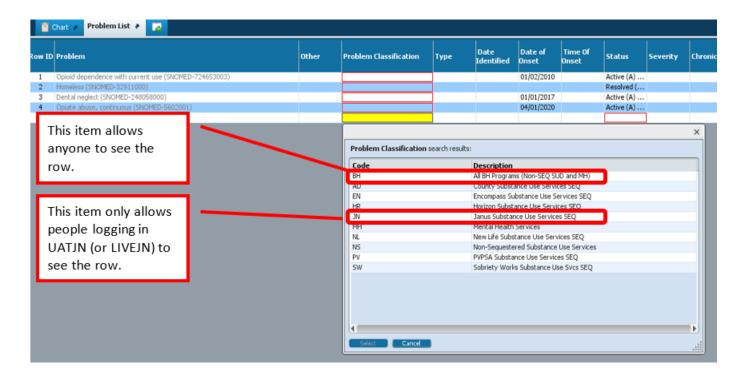
Depending on which item you pick for the Problem Classification field, certain rows will be sequestered.

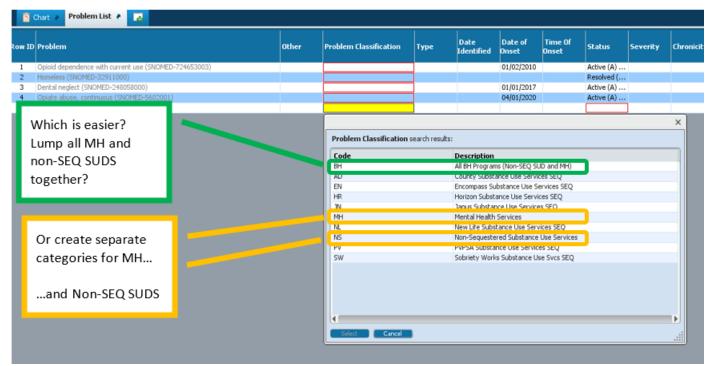
e.g. If you pick "Janus Substance Use Services (JN) only people logging in with UATJN (or LIVEJN) will see the row. It just won't be there for everyone else. This works similar to sequestered *episodes*.

Meeting Agenda

8/4/2022

9:00 AM - 10:00 AM



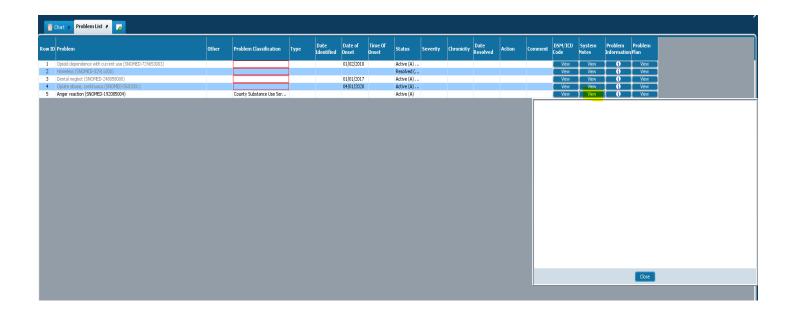


Meeting Agenda

8/4/2022

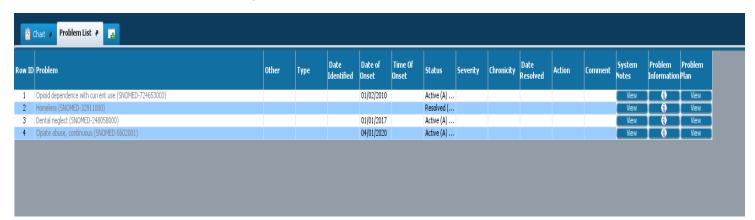
9:00 AM - 10:00 AM

- 3. System Notes Link in the Problem List
 - Currently in UAT only
 - Function of System Notes Allows you to see who added/updated the problem and when. This is blank in LIVE currently. See UAT to see how this works.



Problem List in LIVE:

Problem list as it looks currently in LIVE



Meeting Agenda

8/4/2022

9:00 AM - 10:00 AM

Action Items:

- 1. Small DMC/DMC-ODS group to discuss sequestration of problems in problem list in Thursday's meeting 8/11/2022
- 2. Problem list in LIVE
- 3. Share with supervisors and train staff on new problem list

Other Discussion

1. Trauma Screening Tool

- a. A universal Trauma Screening Tool will be required by all counties. The state is still working on it. It will possibly be the ACES, or some version of it, but we do not yet have the final form. ETA unknown.
- b. ACES is already included in our CANS and possibly the ANSA. We need documentation on this in case we need to provide to state auditors.
- c. ACES information: https://training.acesaware.org/
- d. CDC also has a website re ACES. It shares their data collection surrounding the ACES

Parking Lot

- 1. Training Who is responsible? How to organize?
- 2. Overall Intent and focus of workgroup Does this need any refinements or additions?
 - a. Workgroup purpose is to discuss CalAIM changes to Avatar and report back periodically to the larger meeting.
 - b. Comprised of both supervisory and line staff.

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 $FW\Delta$
- 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.

Attendees