

September 2021

DMC-ODS Skill Building Workshop – Discharge & Care Coordination

- In the month of September, the County of San Diego HHS Behavioral Health Services SUD Quality Management Team is pleased to offer a virtual Skill Building Workshop. The focus this month is Discharge & Care Coordination.
- Due to limited available seating for the training, registration is required and capped to 30 attendees. If you register and become unable to attend, please cancel your registration via WebEx so that others on the waiting list may be able to register.

- Date: **Monday, September 20, 2021**
- Time: 9:30 a.m. to 11:30 a.m.
- Where: via WebEx – [Click here to register!](#)



New: Upcoming Trainings for October 2021

- Please look out for future notice to register for the following virtual trainings:
 - DMC-ODS Residential Documentation Training
 - Monday, October 11, 2021, from 9:30 a.m. to 1:00 p.m.
 - A review of DMC-ODS residential treatment, documentation standards and billing requirements.
 - Recovery Services Skill Building Workshop
 - Wednesday, October 20, 2021, from 1:00 p.m. to 3:00 p.m.
 - An opportunity to build and develop a SUD Treatment provider's skill set in documentation by reviewing the County required forms and instructions, reviewing documentation examples, providing an opportunity to practice documentation skills, and discussing among peers best practices on various documentation topics.
- If you are in need of an ASL interpreter, please let us know at least 5 days in advance so that we may secure one for you.

SUD Quality Improvement Partners (QIP) Meeting

The QIP is a monthly meeting for all DMC-ODS Providers to get the most up to date information on all things Quality Management, Management Information Systems and Performance Improvement. The expectation is that this meeting is attended by all DMC-ODS contracted providers. The program manager and quality assurance staff monthly attendance is expected as part of your contract. If you are unable to attend, please send a designee to cover.



Special Presentation: Optum – Demonstration of Treatment Plan

- Date: **Thursday, September 23, 2021**
- Time: 10:00 a.m. to 11:30 a.m.
- Where: via WebEx - Participation information will be sent by email prior to meeting

Recovery Happens 2021

- Recovery Happens is an annual community event celebrating individuals in recovery and those who support them hosted by the County of San Diego Health and Human Services Agency.
- The event will again be held virtually this year on Saturday, September 18, 2021, and will include engaging speakers and a virtual resource fair which will be available on the Behavioral Health Services website throughout the month of September.
- If you are interested in being a virtual resource exhibitor, please contact Nancy Page (nancy.page@sdcounty.ca.gov).



- ❖ [Click here to view the event flyer!](#)
- ❖ [Click here to register!](#)

All Behavioral Health Services Providers | Bi-Monthly Tele-Town Hall

- Due to public health guidelines, the SUD Treatment Providers meeting will be on hold until further notice.
- In the meantime, all providers are encouraged to attend the All-BHS Providers COVID-19 Tele-Town Halls, which will be scheduled to occur bi-monthly.
- Look for a separate invite/email to be sent prior to the tele-town halls.

Update: QI Annual Training

- QM is in the process of posting the recording of the QI training to the Optum site.
- Posting will include the slides shared during the training as well as a document for Q&A related to topics shared during the training.
- Training attendance is under review. Programs identified with no attendees will be notified and reminded to view the recorded training to remain compliant with the annual training requirement.

Reminder: DMC Recertification Requirements

- DHCS requires DMC providers complete a recertification process every five years in order to maintain their DMC certification.
- DHCS will notify providers in writing when they are required to submit a continued enrollment application.
- DHCS may allow providers to continue delivering covered services to clients at a site subject to on-site review by DHCS as part of the recertification process.
- Providers are encouraged to review re-certification dates and requirements.
- NOTE – DHCS is issuing notices to providers who have not billed for a year, requesting status in order to continue as an active DMC provider. If your program receives this notice, please email QI Matters.

Update: Same Day Billing for RS and MAT clients

- DHCS expanded same day billing for clients receiving recovery services and MAT services concurrently.
- This is effective retroactively to 1/1/2021.
- DHCS clarified that “MAT” includes methadone.
- The DHCS billing matrix has not yet been updated to reflect this change but is expected to be. An updated matrix will be shared once it is available.
- See [DHCS Info Notice 21-020](#) for more information.

Reminder: Client Contacts, Timely Access Monitoring, and Urgent Requests



- All client requests for services shall be documented as an initial contact with the first, second and third available appointment dates regardless of date requests made by clients.
- Client contacts documenting requests for services shall include if the request is 'urgent'.
- Urgent care is defined as a condition perceived by a beneficiary as serious, but not life threatening. A condition that disrupts normal activities of daily living and requires assessment by a health care provider and if necessary, treatment within 48 hours.
- For programs not open 24/7, consider whether or not you can provide a service within 48 hours and whether the client's condition would be worse if services were not provided within 48 hours.
- Client contact data is required for clients admitted and those not admitted to programs.
- Capturing this data is important to ensure our access time date is accurate.

Update: Ongoing Optum Cleanup

- QM is in the process of updating several tabs on the Optum site.
- This involves removing/archiving old or outdated forms, communication, documentation.
- Tabs have a document outlining items removed and archived.
- Two new tabs are available on the site:
 - Peers – As new documentation, tools, and resources are available, more will be added to this tab.
 - Contracts/Fiscal Admin Svcs. – All previously shared communication about contracts, fiscal, budgets, rates, etc., posted under the Communication are now available under this new tab.

Tip of the Month - Group Sign in Sheets

Group sign in sheets must be completed, in their entirety, on the same day the group session was facilitated. This includes:



- The topic on the group progress note must match the topic on the group sign in sheet.
- The date of the group session.
- The start and end time of group session.
- A typed or legibly printed list of the participants' names and the signature of each participant that attended the group session.
 - During the current public health emergency, the following flexibilities are in place regarding client signature:
In place of the client's signature, the provider may, but is not required to, document "[name of client], verbal consent given in lieu of signature" followed by the date and the initials of the Counselor or LPHA who provided the group counseling service. The progress note for the group service should indicate that the client's signature could not be obtained and the reason, such as, "Unable to obtain client signature, as service was provided by telehealth due to COVID-19 public health precautions."
- The LPHA(s) and/or counselor(s) conducting the group session shall type or legibly print their name(s), sign, and date the sign-in sheet on the same day of the session.
- The date with the signature must be 'wet' (not pre-printed). By signing the sign-in sheet, the LPHA(s) and/or counselor(s) attest that the sign-in sheet is accurate and complete.

Management Information Systems (MIS)

Group Counseling Errors Continue



- Majority of errors can be prevented by **reviewing the group sign-in sheet prior** to marking clients present in a group session.

Reminder: Client Address Required

- Remember to enter the client address in the Client Profile.
- If the client is homeless, use the facility address.

DEA Number for Staff is Required in SanWITS

- DEA # is required for all staff who are able to prescribe medications.
- DEA # should be included on the SanWITS User form.

Important: Peer Support Specialist

- Peers are required to have National Provider Identification (NPI) in SanWITS.
- Peers must be identified in SanWITS with **Job Title** and Certificate – when available.
- Notify SUD Support at SUD_MIS_Support.HHSA@sdcounty.ca.gov if your facility has hired Peer Support Specialist to provide County billable services, **OR** upon hiring Peer Support Specialist to provide county billable services.

OTP FY 21-22 Additional MAT Rates have been published in SanWITS with effective date of July 1, 2021

- **Important Changes for Additional MAT** - Each individual medication now has its own service with corresponding rate.

➤ ***Non-Perinatal***

Generic S5000	Rate	Brand S5001	Rate
Buprenorphine (Generic)	30.02	Subutex (Brand)	30.02
Buprenorphine-Naloxone combo (Generic)	30.81	Suboxone (Brand)	30.81
Disulfiram (Generic)	10.88	Antabuse (Brand)	10.88
Naloxone 2 pack nasal spray (Generic)	144.66	Narcan (Brand)	144.66

➤ ***Perinatal***

Generic S5000	Rate	Brand S5001	Rate
Buprenorphine (Generic)	35.20	Subutex (Brand)	35.20
Buprenorphine-Naloxone combo (Generic)	35.98	Suboxone (Brand)	35.98
Disulfiram (Generic)	11.05	Antabuse (Brand)	11.05
Naloxone 2 pack nasal spray (Generic)	144.66	Narcan (Brand)	144.66

- All old services for MAT Generic and MAT Brand dosing have been expired.
- New services must be selected on the encounter before clicking “Release to bill”
 - User will get an error, if trying to release without selecting the new service first.

SSRS Reports

- SSRS Reports folders are being cleaned up and reorganized with older outdated reports being archived – ongoing.
- New Report **“Total Services Per Rendering Staff”** has been added to the Provider Reports folder under Paginated Reports.
 - This report will include the Total # of Services, Total # of Encounters, Total Units and Total Minutes.
 - This report will exclude MAT and Methadone dosing, No Shows, Residential Bed Days, or any encounters created by mistake for Non-BHS contracted clients.

SanWITS Quarterly Users Group Meeting All Providers



- **Purpose of the Users Group - review and educate State Reporting for CalOMS, ASAM, and DATAR, SanWITS updates, changes in system requirements, Billing & QM updates for the users**
 - Next meeting: Monday, Oct 18, 2021, at 9:00 a.m. – 11:00 a.m.
 - RSVP please, WebEx invite will be sent
 - At least one representative from each facility is highly recommended
 - Quarterly meetings are expected to occur on the 3rd Monday each quarter
 - ❖ Jul, Oct, Jan, Apr
 - ASL Interpreters have been requested for each meeting
- **We welcome and encourage you to send us agenda items to be covered during our meetings**
SUD_MIS_Support.HHSA@sdcounty.ca.gov

SanWITS Virtual Trainings Provided

- Register online with RegPacks at: <https://www.regpack.com/reg/dmc-ods>
- Registration will close 7 days prior to the scheduled class date in order to allow time for individual staff account setups and other preparation needed.
- Attendees for Virtual Training will receive an email on the morning of training between 8:30 AM – 8:45 AM
 - Trainer email with training materials, resources, and specific instructions for virtual class
 - If staff do not receive emails by 9:00 AM, email sdu_sdtraining@optum.com to get the issue resolved.
- Type of Training Classes:
 1. SanWITS – Intro to Admin Functions (IAF) – SanWITS functions that are applicable to All program types
 2. Residential Facilities - Bed Management & Encounter Training
 3. Outpatient / OTP Facilities – Group Module & Encounters Training
 4. SanWITS Assessments (SWA)– designed for direct service staff who complete Diagnostic Determination Note (DDN), Level of Care (LOC) assessments, Discharge Summary, and Risk and Safety Assessment
- **All required forms are located on the “Downloadable Forms” tab.**
Note: If the 3 forms are not fully processed by MIS 7 days prior to the scheduled training, staff will not be able to attend training regardless of receiving training confirmation.
- All credentials and licenses will be verified with the appropriate entities for SanWITS access.
- Upon completion of training, competency must be shown in order to gain access to the system. If competency is not achieved, further training will be required.
- **Staff are highly recommended to read the training packet thoroughly before entering information into the Live environment.**
- Please remember, if unable to attend class, cancel the registration as soon as possible.

Billing Unit - SanWITS Billing Classes

- As most of us are still adjusting to remote work, we're also learning new ways to continue servicing our customers. The SUD Billing Unit will continue conducting the billing training online.
- Our team will send an email to all programs to inquire what web conferencing platform or application you use for audio and/or video conferencing or training. Currently, the Billing Unit uses the Microsoft Teams application.
- Also, to schedule your billing training or if you have billing questions, please call our main line: 619-338-2584. You can also email us at ADSBillingUnit.HHSA@sdcounty.ca.gov.
- Prerequisite required: SanWITS Intro to Admin Functions training and one of the following encounter trainings – 1) Residential -Bed Management & Encounters training, or 2) Outpatient/OTP Group Module & Encounters training

SUD Billing Unit

I. **Claims in HOLD status**

SUD Providers must run the Claim Item List report every month and review the claim items on hold. Please review the client's Medi-Cal eligibility if claims are on hold due to Hold Reason ID #s 4 and 5:

HOLD REASON ID	CLAIM ITEM HOLD REASONS	HOLD DESCRIPTIONS
1	Out of County clients with MAT and case management services	This hold reason is for OTP. MAT and Case Management cannot be billed to DMC for Out-of-County clients.
2	Out-of-County client	This hold reason is for outpatient and residential programs with Out-of-County clients.
3	Not Medi-Cal eligible	Client's Medi-Cal eligibility application was declined/has not met Medi-Cal requirements/not retroactive Medi-Cal after checking monthly for 6 months or more.
4	Waiting for Medi-Cal eligibility	Client applied for Medi-Cal and the result or approval is pending
5	Client has SOC for clearance	Client has SOC and program emails the completed SOC Financial Responsibility and Information form to Billing Unit to clear

Please contact the ADSBillingUnit.HHSA@sdcounty.ca.gov immediately if you need to remove the claims from hold status because:

- the client's Share of Cost has been zeroed out (paid at your program or cleared by other facilities/pharmacy) and you need to bill the DMC services to the State.
- the client is now Medi-Cal eligible, and services are DMC billable.
- the OHC or Medicare EOB is obtained.

II. **Out of County Medi-Cal**

SUD Providers should work with the client right away to contact Medi-Cal and notify of the client's change in residence or current address. We can bill the services to DMC as soon as the County of Residence has updated to San Diego County (code 37).

III. **Other Health Coverage**

Please read pages 23 to 26 of the [SUD DMC Billing Manual \(pdf\) \(optumsandiego.com\)](#) for information on OHC and if the health insurance EOB is not received within 90 days from the date of billing.

IV. Medicare Advantage: Dual eligible clients (those with Medicare Part C and Medi-Cal)

A. Outpatient and Residential Providers are NOT required to bill Medicare Part C if a client has the following:

- 1) Blue Shield Promise Health Plan- Part C

OTHER HEALTH INSURANCE COV UNDER CODE F - MEDICARE PART C HEALTH PLAN. CARRIER NAME: BSC PROMISE HEALTH PLAN. COV: OIM VR.

- 2) Health Net -Part C

MEDI-CAL. OTHER HEALTH INSURANCE COV UNDER CODE F - MEDICARE PART C HEALTH PLAN. CARRIER NAME: HEALTH NET OF CA. COV: OIM R.

- 3) Molina Healthcare of California- Part C

B. OTP Providers MUST continue to bill Medicare, including all Medicare Part C/Medicare Risk Plans/ Cal Medi-Connect risk insurance

V. OTP Medicare EOB (Explanation of Benefits)

- OTP Providers are responsible in reviewing the Medicare EOBs.
- OTP Providers must submit the Medicare EOBs to ADSBillingUnit.HHSA@sdcounty.ca.gov within 6 months from the date of service.
- Medicare claim status can be obtained through your Clearing House or Noridian.
- If Medicare noted that the client “cannot be identified as their member” or you receive a denial code CO-16 (lacks information), please contact Medicare immediately to get more information or clarification. If you are not successful in getting this information, please contact the ADSBillingUnit.HHSA@sdcounty.ca.gov and we will check if we can be of any further assistance.

VI. Contacting the SUD Billing team

- 1) Please send your DMC billing or billing-related questions to: ADSBillingUnit.HHSA@sdcounty.ca.gov or call us at 619-338-2584 (Billing’s Main Line).
- 2) Please respond to the Billing Unit’s email regarding claim denials, claim errors, or void within 24 hours or earlier.
- 3) Please encrypt any email messages with client information unless you’ve partnered with the County TLS (Transport Layer Security) Email Encryption.

Reminder: For general information on COVID-19

Including the current case count in San Diego County, preparedness and response resources, and links to information from the California Department of Public Health (CDPH), Centers for Disease Control and Prevention (CDC), and the World Health Organization (WHO), please visit the [County of San Diego COVID-19 webpage](#).

For local information and daily updates on COVID-19, please visit www.coronavirus-sd.com. To receive updates via text, send **COSD COVID19** to **468-311**.



Reminder: COVID-19 | Behavioral Health Services (BHS) Provider Resources

- Behavioral Health Services (BHS) is committed to keeping our providers updated with emerging information related to the Coronavirus Disease 2019 (COVID-19) response.
- Follow the link to access the [BHS Provider Resources Page](#) which is updated regularly with the most recent communications and resources that have been sent to BHS providers.

Reminder: DHCS COVID-19 Response Resources

The California Department of Health Care Services (DHCS) has frequently updated resources regarding provision of Behavioral Health Services during the COVID-19 crisis. For more information, visit the DHCS COVID-19 Response page at: <https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-response.aspx>

Communication



- Billing questions? Contact: ADSBillingUnit.HHSA@sdcounty.ca.gov
- SanWITS questions? Contact: SUD_MIS_Support.HHSA@sdcounty.ca.gov
- DMC-ODS Standards/SUDPOH/SUDURM questions? Contact: QIMatters.hhsa@sdcounty.ca.gov

**Is this information filtering down to your counselors, LPHAs, and administrative staff?
Please share the UTTM – SUD Provider Edition with your staff and keep them *Up to the Minute!*
Send all personnel contact updates to QIMatters.hhsa@sdcounty.ca.gov**