



# MENTAL HEALTH SERVICES



The QM Team would like to take a moment, as we approach this Thanksgiving season, to express our heartfelt appreciation for the tremendous dedication and hard work that our Systems of Care have continued to display during this ongoing COVID pandemic. Your support of our clients is so vital and the resilience and patience each of you has displayed in your continued efforts to meet their needs during this ongoing pandemic has been truly amazing. Thank you!

# Updates

## Partial Focus Review Process Updated

As presented during the October QIP meeting, QM has temporarily revised the Focus Review process. QM will be conducting Partial Focus Review (PFR) for programs with MRR disallowance rates of **11% or above**. The PFR will solely address progress notes and billing. This PFR will be completed internally by the QM Specialist who conducted your program's MRR. Programs will not be required to complete a concurrent self-review. Programs will have the opportunity to appeal

#### Optum Website Updates MHP Provider Documents

## OPOH Tab:

- Section A: removed outdated information for "Emergency Shelter Beds", updated Short Term & Bridge Housing information to include newest partner Rooted Life.
- Section D:
  - updated language re: Therapeutic Foster Care, updated CYF OP LOC session counts.
  - Added language re: Dual Track program enrollment
- Section G: updated SIR phone number

any disallowances within 14 business days. Appeals should be sent directly to the QM Manager, Heather Parson. Along with the PFR process, QM will be providing programs with a technical support training individualized to the specific compliance needs. The results of your PFR will determine next steps. If the disallowance rate is **5% or below**, no further action is needed until the 3-month QIP follow up date. If the disallowance rate is **6% or above**, a second PFR will be conducted.

# Medical Record Review QIP Follow Up Form FY 20-21

With the start of FY20-21 Medical Record Review (MRR) process, QM developed a new Quality Improvement Plan (QIP) Form that is provided to programs with their final MRR Results. Programs are required to utilize this form when documenting their QIP and submit to QM in its **original Word doc format**. Programs are no longer required to submit their QIP on their legal entity's letterhead. This new QIP form was developed to provide a uniform and consistent process for monitoring/tracking/documenting the MRR QIP and any subsequent follow up requirements. The form is also available on the Optum Website under the Forms Tab.

# EHR Training Survey

In an effort to obtain a better understanding of the training needs and address any concerns that the system of care may have, Optum will be sending out a survey question regarding training format. We highly encourage participation in this survey as it helps to inform the County of areas which we may be able to build upon.



# **QM CCBH Training Pilot**

In an attempt to provide more real time support for CCBH trainings, QM will be piloting a new process towards the end of November and early December. Staff that have signed up for Optum CCBH trainings will continue to complete the self-paced virtual learnings. On the same day, a live webinar will be offered as a drop-in support center where staff can attend and ask questions they may have along with get virtual assistance. The webinars will be offered for one hour. Surveys will be sent after the webinar closes to allow for feedback and additional information.

### **OPOH Updates**

- Section A: Removal of outdated information for "Emergency Shelter Beds" and updated Short Term & Bridge Housing information to include newest partner, Rooted Life.
- Section D:
  - o updated language in Therapeutic Foster Care and CYF Outpatient Session counts.
  - o added new language regarding Dual Track Programs enrollment and coordination of service delivery.
- Section G: Updated SIR phone number

#### **Knowledge Sharing**

**Reminder!** Programs should be submitting their NOABD Logs to QM quarterly, on the 15<sup>th</sup> of the month following the end of the quarter. This was resumed at the start of the new FY 20-21. Programs submit their Logs via our secure fax 619-236-1936 or via encrypted email to <u>QIMatters.HHSA@sdcounty.ca.gov</u>

#### **BBS Required Documentation for Telehealth Services**

The BBS requires that all licensed or license-eligible/registered clinicians must indicate they have verbally confirmed client's full name and address of present location at the beginning of each telehealth session. This will need to be documented in each progress note for services that are delivered by licensed or license-eligible/registered clinicians.

#### Claiming Time for Chart Review in the Case of a "No Show"

If the MD is reviewing the client's chart in preparation for a medication service, and the client is a "no show", it is allowable for the MD to claim service time for the chart review. The medication service should still be coded as the "no show" with the Appt Type billing indicator 5- No Show. While the time spent reviewing the chart is captured in a separate SC 14 (Eval of Record for Assessment) along with the billing indicator for Contact Type, N-No Contact. This decision was made due to the infrequency of MD's client contact (i.e. once every 30 days).

#### **Reminder! SIR and SIROF forms updated to Form Fill versions**

The Serious Incident Report (SIR) and Serious Incident Report of Findings (SIROF) have been updated to be Form Fill, which allows more room for documentation to be added. Additionally, the following changes have been made to the forms

- Addition of the following incident types:
  - o "the event has resulted in death on program's premises"
  - o "the event has resulted in serious physical injury on program's premises."
  - o "the event is associated with a significant adverse deviation from the usual process for providing behavioral health care"
- Item 14 changed to state "which may require hospitalization"
- The requirement of a wet signature has been removed from both forms

#### UTTM November 2020



The updated Form Fills can be found on the Optum Website under the Forms tab in MHP Documents.

QI Matters Frequently Asked Questions

New! FAQ's received by QI Matters.

- **Q.** With many people using their home as office space for travel in documentation, is it allowed to document "therapist traveled from home office in [location] to client home in [location], round trip xx mins" as home office is now our actual home location (if we do not go to the office due to COVID)?
  - A. Travel time may be claimed when starting or ending the workday at home. In order to claim, the time must be the same or less than normal travel time from office to client's location. Please review attached our Travel Time Guidelines (2-01-18) which provide further explanation and examples, which can be found on the Optum Website under the <u>References Tab</u>.

Management Information Systems (MIS)

#### **MIS Questions?**

MIS manages all things related to the system, including authorizations for all trainings/skills assessments/reactivations, account management. Our email is: <u>MISHelpDesk.HHSA@sdcounty.ca.gov</u>

#### **Cerner Reminder**

For questions regarding Cerner products or functions, please call or email the Optum Support Desk at 800-834-3792 or email <u>SDHelpdesk@optum.com</u>. Please do not call Cerner directly!

#### **Training and Events**

**Audit Leads Practicum: Thursday December 3, 2020** scheduled 12:30PM to 3:30PM via WebEx. Registration required. Focus of this training is to provide technical assistance to <u>program level QI staff and PMs that conduct chart audits</u>.

Quality Improvement Partners (QIP) Meeting: Tuesday, December 15, 2020 from 2:00p – 4:00p via Webex. As discussed during October's QIP meeting, there will not be a QIP meeting in November.

#### Important information regarding training registrations:

- Please be aware when registering for required or popular trainings, either with the county or a contracted trainer, there may be a waiting list.
- When registered for a training, please be sure to cancel within 24 hours of the training if you are unable to attend. This allows those on a wait list the opportunity to attend. Program Managers will be informed of no shows to the trainings.
- If registered for a training series, please be aware that attendance for all dates in the series are required to obtain certification, CEU's or credit for the training.
- When registering for a training please include the name of your program manager.
- We appreciate your assistance with following these guidelines as we work together to ensure the training of our entire system of care.

If you have any questions, or if you are having difficulty with registration, please reply to this email or contact <u>BHS-</u><u>QITraining.HHSA@sdcounty.ca.gov</u>. We hope to see you there.



## **CCBH Training UPDATE!**

- Optum has transitioned to a **fully virtual training format**, thus eliminating travel and allowing for expanded registration.
- Continue to enroll through <u>www.regpacks.com/Optum</u>.
- Most courses include a video tutorial which orients attendees to training and illustrates successful completion of the practice exercises. Video tutorials are available at <u>https://www.optumsandiego.com/content/SanDiego/sandiego/en/county-staff---providers/orgpublicdocs.html</u> under the Training tab.
- The courses which do not yet include a video tutorial offer a 1-hour live Webex instead.
- Attendees contact trainers for support via phone or email as they complete the practice exercises. A screensharing option is also available.
- Once attendee practice exercises are complete and accurate, they are granted access to begin documenting in the live environment.
- Please email <u>sdu\_sdtraining@optum.com</u> if you have any questions about the process.

## **CCBH Training Reminder- View Only Assessments and Reports**

Please note that View Only Assessments and Reports classes were retired in March 2020 upon the cessation of classroom training. Access to View Only Assessments is granted in conjunction with successful Account Request Form (ARF) submission. When MH MIS notifies an individual that his or her account has been created, login information is provided, as well as a <u>Resource Packet</u> which illustrates how to navigate CCBH. With Reports, everyone with a CCBH account has access to certain reports based upon the menu group selected on the ARF. The <u>Reports Manual</u> provides step-by-step instructions to run reports. No information is entered into the CCBH system with View Only Assessments access or when generating reports; therefore, users are not required to demonstrate competency.

#### **Resources and Links**

#### **BHS COVID-19 Resources and Links**

Remember, for the most current and updated information regarding COVID-19 as well as QM updates and memos, including provider FAQ's, please access the <u>COVID-19 tab</u> on the Optum Website.

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