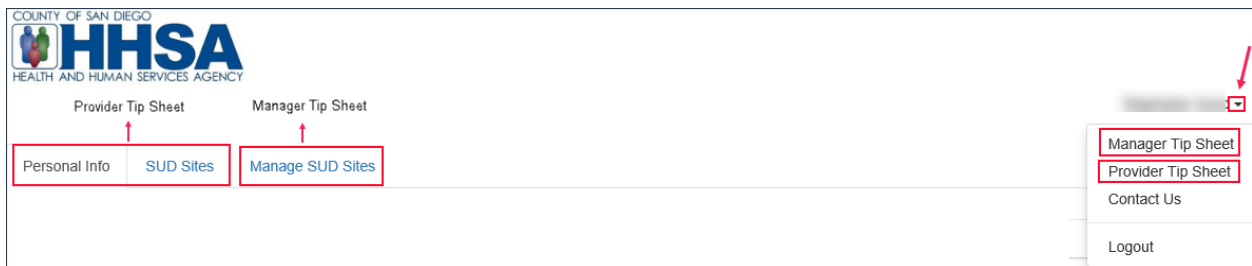


## System of Care Application Tip Sheet for Program Managers

Upon login you should see the following view for **MH** Providers



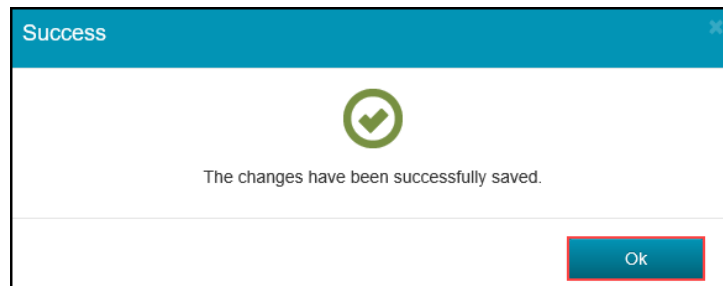
Upon login you should see the following view for **SUD** Providers



Please note, managers who provided a direct service will have a total of three tabs, **Personal Info**, **MH/SUD Sites**, and **Manage MH/SUD Sites**. All tabs will need to be reviewed and completed. Refer to Provider Tip Sheet for assistance in reviewing **Personal Info** and **MH/SUD Sites**.

### Saving your entries:

1. **Make sure to save your data as you complete each section for each subunit. If you do not save as you go, you will time out and lose your data.** The system does not provide a time out warning screen.
  - a. Each time you save, you will receive a successfully saved message confirming your changes were saved.



### Manage MH Sites

1. Tab will show each subunit/facility the Manager manages and has CCBH/SanWITS access to.
  - a. **Each subunit** must be updated.
    - i. The sites are in numeric order.
    - ii. The first site is automatically selected and can be seen with a dark border and font.

2. **MH - Subunit Information/ SUD- Facility Information**

a. MH- Subunit Information

- i. Review and update all fields as appropriate.
- ii. Certain fields such as Legal Entity, CCBH Unit ID, Unit Name, CCBH Subunit ID, Subunit Name, NPI Number Type 2, Provider Number, and DEA Number are not editable. If the information is incorrect, please contact the Optum Support Desk.

b. SUD – Facility Information

- i. Review and update all fields as appropriate.
- ii. Certain fields such as Agency Name, Agency ID, Facility Name, Facility ID, NPI Number Type 2, DMC Certification Number, DEA Number are not editable. If information is incorrect please contact [SUD MIS Support.HHSA@sdcounty.ca.gov](mailto:SUD_MIS_Support.HHSA@sdcounty.ca.gov).

### 3. Treatment Location Information

- a. Review and update all fields as appropriate.
  - i. Certain fields such as Treatment Location Name, and Address are not editable. If the information is incorrect:
    - MH- Please contact your programs COR or QI Matters.
    - SUD- Please contact SUD\_MIS\_Support.HHSA@sdcounty.ca.gov
  - ii. Public Phone #
    - The phone number that clients can use to contact the treatment site.
  - iii. Private Phone #
    - The phone number the county, SOC administration, and other professionals will use to contact the treatment site.
    - Private Phone number could be the program manager's assigned work cell phone.
  - iv. Public Email
    - Site-specific work email address that will be viewable in the (public) Provider Directory.
  - v. Private Email
    - The professional email address that would be used when the County or Optum wants to contact the program through the SOC application regarding any SOC submission requirements information.
  - vi. Distance to Closest Public Transportation
    - How far is the closest bus stop, trolley, or train station?
      - Select from the drop-down menu.

**Treatment Location Information**

**Treatment Location Name** [Greyed out]  
**Street** [Greyed out]  
**Suite** [Greyed out]  
**City** [Greyed out]  
**State** [Greyed out]  
**Zip Code** [Greyed out]  
**County** [Greyed out]

**Public Phone # \*** [Text input]  
**Private Phone # \*** [Text input]  
**Fax #** [Text input]  
**Public email \*** [Text input]  
**Private email \*** [Text input]  
**Website** [Text input]  
**Distance to Closest Public Transportation** [Dropdown menu]

#### 4. Language Capacity

- a. The information displayed is from an aggregated list of languages reportedly spoken by rendering providers of the site.
- b. If any other languages provided at this site, please specify in **Other Language Services Available**.

Language	Proficiency
Arabic	Poor
Armenian	N/A
Cambodian	N/A
Cantonese	N/A
English	Fluent
Farsi	N/A
Hmong	N/A
Korean	N/A
Mandarin	N/A
Other Chinese	N/A
Russian	N/A
Spanish	N/A
Tagalog	N/A
Vietnamese	N/A
American Sign Language	N/A

**Other Language Services Available**

#### 5. Age Group and Hours of operation

- a. Age Group (0-20, 21+, or all ages)
  - i. This is **un-editable** and is aggregated from all providers who work at the site.
- b. Hours per Week
  - i. Represents the number of hours per week the site can serve Medical clients.
    - Allows any values between 1 and 168.

**Age Groups and Hours of Operation**

**Age Group**: All Ages

**Hours per Week \***

#### 6. Provider Types and MH-Service Types/SUD- Modalities

- a. The information displayed is from an aggregated list of Provider Types and Service Types/Modalities reported by rendering providers of the site.
  - i. Wrong MH-**Provider Types** can be corrected via a modify ARF to update Licensure/Credentials.
  - ii. Wrong MH-**Service Type** can be updated via the Provider's MH Sites tab.

**i** **Provider Types**

- Associate Clinical Social Worker
- Licensed Clinical Social Workers
- Licensed Physicians
- Licensed Psychiatrists
- Licensed Vocational Nurses
- Mental Health Rehabilitation Specialists
- Nurse Practitioners
- Other Qualified Providers

**i** **Service Types**

- Case Management
- Crisis Intervention
- Mental Health Services
- Medication Support

- iii. Wrong SUD – **Provider Types** can be corrected by contacting SUD MIS via email.
- iv. Wrong SUD-**Modalities** can be updated via the Provider’s SUD Sites tab.

**i** **Provider Types**

- Certified Substance Use Disorder Counselors
- License Eligible Practitioners working under the supervision of Licensed Clinicians
- Licensed Marriage and Family Therapists
- Registered Substance Use Disorder Counselors

**i** **Modalities**

- Intensive Outpatient Clinic
- Outpatient Drug Free Clinic

**i** **Licensed Capacity for OTP**

## 7. Other Options

- a. Review and select any other treatment options available at this treatment location.
  - i. ADA Compliant for Physical Plant
    - Is this treatment location compliant with American Disability Act (ADA) for physical plant?
      - If this is not checked, the state will require proof of exemption.
  - ii. Teaching Facility
    - A teaching facility is a hospital or organization that sponsors graduate medical education (GME) or participates in GME.

**Other Options**

ADA Compliant for Physical Plant  
 TDD/TTY Equipment Available  
 Telehealth Services Status \* No Telehealth Services   
 Teaching Facility

**8. Medi-Cal Clients**

- a. This treatment location’s capacity for serving Medi-Cal clients.
  - i. Maximum
    - This is the **maximum** number of Medi-Cal members the site will accept.
  - ii. Current
    - This is the current number of Medi-Cal members the site **currently** serves.

**Medi-Cal Clients**

**Max \***       **Current \***

**9. Medi-Cal Certification Info**

- a. Confirm the Effective and Expiration dates of this site’s current Medi-Cal Certification with the county.
  - i. If unsure of specific dates, please contact your COR or QIMatters.

**Medi-Cal Certification Info**

**Certification Effective Date**        
 **Certification Expiration Date**     











**10. Work Schedule**

- a. Days and hours of work for this treatment location.
  - i. For each day select Insert New.



- Site Name
  - Is not editable
- Day of Week
  - Select a day from the drop-down menu.
- Open Time
- Close Time
- Save




- b. Once all entries have been entered, you will be able to review the complete Work Schedule.
  - i. If need to add another day, simply click Insert New.
  - ii. If need to edit the Open or Close time, click edit.
  - iii. If need to delete, click Delete.

Work Schedule			
Day of Week	Open	Close	
MON	8:00 AM	5:00 PM	Edit  
TUE	8:00 AM	5:00 PM	Delete  
WED	8:00 AM	5:00 PM	 
THU	8:00 AM	5:00 PM	 
FRI	8:00 AM	5:00 PM	 


Insert New
←

## 11. Providers


- a. Review all providers' actions under this site.
  - i. Hover over the tool tip on the left to view a brief summary of provider's actions as displayed below.














































Providers			
Name	Login	Site	
<div style="background-color: #333; color: white; padding: 5px; font-size: 0.8em;">           Services: Case Management, Crisis Intervention, Mental Health Services            21+ hours: 13.3333         </div>			
			

- ii. **Login** shows when the provider last logged in to the site. If they never signed in, the field will be empty.
- iii. **Site** shows the last time the MH Site was attested to by provider. Field will be empty if the provider has not made any changes.
  - To view the information made to the **Personal Info** tab, click on the folder icon, Details.
- iv. **Wrench** Icon indicates Actions. The type of Actions as seen next to each providers name such as details, edit, and email.

Providers			
Name	Login	Site	
			



- v. **Yellow folder** icon will show the full info of the provider, including from the Personal Info tab.
- vi. **Pen icon is for Edit** (  ) the manager can edit and attest on behalf of prescribers.
  - This action can only be done for prescribers.
- vii. **Green Envelope** icon is for Emailing, it allows managers to send emails directly to providers.
  - This option is only visible when the provider has entered their **Professional Email** on the Personal Info Tab.
  - An email template will appear when selected, complete all required fields with asterisk and select Submit.
  - The Sender/Manager will receive a copy of the email that was sent.

 Providers					
 Name	 Login	 Site			
 [blurred]		12/18			
 [blurred]	02/28				
 [blurred]	02/20	12/18			
 [blurred]	02/20	12/18			
 [blurred]		12/18			
 [blurred]	02/24	12/18			
 [blurred]	02/19	12/18			
 [blurred]		12/18			
 [blurred]		12/18			
 [blurred]	04/07	12/18			
 [blurred]	02/21	12/18			
 [blurred]	02/19	12/18			

Providers full information

Edit and attest on behalf of prescriber

Email provider

Name of provider will display here

Sender's Email Address \*

High Priority

Subject \*

Body \*

Send



## 12. To contact the Optum Support Desk

- a. There are two ways to contact the Optum Support Desk.
  - i. Option 1. Click on the drop-down arrow next to "your name" at the top of the page and select **Contact Us**.
    - An email template will appear. Complete all fields and Submit.

Contact Optum Support Desk ×

**Your Name \***

**Email Address \***

**How Can We Help You? \***

Submit

- ii. Option 2. On the bottom of the screen, click on “Optum Support Desk”, the email template will appear. Complete all fields and Submit.

