

# OPTUMIST



## Provider Services Department Message

Greetings and welcome to the Fall 2022 edition of the OPTUMIST Newsletter. In this edition we are highlighting our Medical Director Transition, New FFS & TERM Provider Billing Codes & Rate Changes, updated OAR Forms, and TERM Work Product Tracking.

We continue to welcome your questions and feedback on how we can make our Newsletter valuable to you.

Best wishes,

*Provider Services Department*

### Contact Numbers

San Diego Access and Crisis Line	1-888-724-7240
Medi-Cal Provider Line	1-800-798-2254
TERM Provider Line	1-877-824-8376



[optumsandiego.com](http://optumsandiego.com)

### Newsletter Content

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# Information and Updates for FFS Medi-Cal & TERM Providers



## Dr. Bailey's Retirement

Optum San Diego's long-time Senior Medical Director, **Michael Bailey, M.D.** has retired. Although we are sad to say farewell, we are excited for the adventures that await him in the next chapter of life. Dr. Bailey's last day with Optum was Friday, October 28th.

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## Our Medical Director Team



**Diane Panton, M.D.** has transitioned into the Senior Medical Director role ensuring that Optum San Diego continues providing outstanding service. Dr. Panton joined Optum in January 2015 and has provided excellent support and guidance to Optum's clinical teams, County of San Diego leadership and providers. Please join us in congratulating Dr. Panton as she transitions into her new role!



**Ashleigh Colin, M.D.** has transitioned into a full time Medical Director role. Dr. Colin joined our team in August 2019 on a part time basis to support System of Care Credentialing. Dr. Colin will continue to support System of Care Credentialing and will dedicate the balance of her time to support our Utilization Management and Quality Improvement functions.



# Information and Updates for FFS Medi-Cal & TERM Providers

## Child and Adolescent Needs and Strengths (CANS) & Pediatric Symptom Checklist (PSC)

The County of San Diego is mandated by the State to implement and manage Outcome Tools to measure treatment outcomes. As a reminder, the Child and Adolescent Needs and Strengths (CANS) and the Pediatric Symptom Checklist (PSC - 35) are the outcome tools for the County of San Diego Mental Health Plans for all new youth ages 0 – 21.

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## San Diego Child and Adolescent Needs and Strengths SD CANS – EC (ages 0 – 5) and SD CANS (ages 6 – 21):

**The Child and Adolescent Needs and Strengths (CANS)** is a multiple purpose information integration tool that is designed to be the output of an assessment process. The purpose of the San Diego CANS (SD CANS) is to accurately represent the shared vision of the child/youth serving system—children, youth, and families.

The CANS gathers information on the child/youth's needs and strengths. Strengths are the child/youth's assets: areas in life where they are doing well or have an interest or ability. Needs are areas where a child/youth requires help or intervention.

### COMPLETED BY:

- Licensed Psychologist
- Licensed/Registered Social Work or Marriage and Family Therapist
- Licensed/Registered Professional Clinical Counselor

**Note:** Physician (MD or DO) medication ONLY cases and Psychiatric Nurse Practitioners (PNP) medication ONLY cases are exempt from completing the CANS at this time.

### COMPLIANCE REQUIREMENTS:

- Clinical staff administering the CANS must be trained and certified
- Certified clinical staff will complete the appropriate measure (SD CANS-EC or SD CANS) for clients 0-21 years of age receiving therapy services from a mental health provider
- Completed and submitted to Optum
  - a. With Initial Authorization Requests (or ITP)
  - b. With Continued Authorization Request (or TPU) or every 6 months (whichever occurs first)
  - c. Upon discharge



# Information and Updates for FFS Medi-Cal & TERM Providers

## Child and Adolescent Needs and Strengths (CANS) & Pediatric Symptom Checklist (PSC) – Continued

### Pediatric Symptom Checklist (PSC & PSC-Y)

#### COMPLETED BY:

- Parent/guardian
- Client
- When no parent/guardian is available, staff may be in the role of caregiver and complete measure, notating it was completed by clinician/staff

#### COMPLIANCE REQUIREMENTS:

- Provided to caregivers of children and youth 3-18 years of age (PSC)
- Provided to youth 11-18 years of age (PSC-Y)
  - a. Upon Initial Assessment
  - b. At the time of the Continued Authorization Request (or TPU) or every 6 months (whichever occurs first)
  - c. Upon discharge
- Omit questions 5, 6, 17 & 18 when completing for 3-5 years of age.
  - a. All questions should be completed for ages 6-18 years of age
  - b. Completed and submitted to Optum:
    - With Initial Authorization Requests (or ITP) and CANS/CANS-EC
    - With Continued Authorization Request (or TPU) and CANS/CANS-EC or every 6 months (whichever occurs first)
    - Upon discharge with CANS/CANS-EC

#### DOCUMENTATION STANDARDS:

- Completed tools and summary sheets are to be filed in the client chart
- If score is above the clinical cutoff, document in the progress note for the action to address the need
- Medication ONLY cases are exempt from completing PSC/PSC-Y



If you have any questions, please contact the Provider Services Department at :

[sdu\\_providerserviceshelp@optum.com](mailto:sdu_providerserviceshelp@optum.com)

# Information and Updates for FFS Medi-Cal & TERM Providers

## New Billing Codes and Rates

We have exciting news to share with you! We recently sent you your newly redesigned rate sheet(s) containing several changes to codes and rates including an increase in rates which took effect October 1, 2022.

Please note the changes to the following codes:

### Medi-Cal Fee-for-Service (FFS) –

- T1017 (Targeted Case Management) was added
- CAN02 changed to **90889 HX**
- X6220 (Injections) changed to **96372**
- 99211 was removed
- 90837 (60 min Psychotherapy) was added for therapists
- 99341 & 99343 (Home Visits) were removed for therapists
  - You may bill the therapy codes and note the place of services as being home

### Treatment and Evaluation Resource Management (TERM) –

- The following codes have been removed:
  - MAP01
  - 99205/99205N
  - X9544-Team Decision Making
- CAN02 changed to **90889 HX**
- T1017 (Targeted Case Management) was added
- 96111 (Developmental Evaluations) divided into two codes
  - 96112 - 1st hour of the developmental evaluation
  - 96113 - Additional 30 mins each unit- up to a maximum of 18 units
- Groups: All groups will claim under code **90853**.



If you have any questions regarding your new rate sheets, please contact the Provider Services Department at :

[sdu\\_providerserviceshelp@optum.com](mailto:sdu_providerserviceshelp@optum.com)

# Information and Updates for FFS Medi-Cal Providers

## Training Opportunities for Fee-For-Service Providers



### Responsive Integrated Health Solutions (RIHS)

The County contracts with RIHS based at the Academy for Professional Excellence, a project of the SDSU School of Social Work. RIHS training meets the qualification for continuing education credit for MFTs, LPCCs, LCSWs, and Psychologists. Providers can earn free CEUs for many of the offered classes.

Email [RIHS@sdsu.edu](mailto:RIHS@sdsu.edu) if you have any questions. You can also contact Provider Services for instructions on how to set-up an account at 1-800-798-2254, Option 7.

**For a full list of available eLearning and recorded webinars, [click here](#).**

Instructions on how to set-up a RIHS account can be found on the RIHS website by clicking [here](#).

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### The National Child Traumatic Stress Network Learning Center for Child and Adolescent Trauma

The NCTSN offers free CEUs. To search the course catalog, please visit the [NCTSN](#) website. Once you establish an online account, you will be able to enroll in a variety of webinars.

#### TF-CBT Web

**TF-CBT Web** Offers a web-based eLearning course on Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). To access the eLearning course, [click here](#).

# Information and Updates for FFS Medi-Cal Providers

## Latest OAR Forms Dated 10/1/2022

Effective 11/1/2022, Optum will only process requests submitted on the latest OAR forms. Any old forms submitted will be sent back as incomplete.



### OAR Form Fills

Did you know Form Fills of the OAR forms are available if you wish to type your OARs? The Form Fill issue has been resolved and they are now ready to use with ease.

## Minimum Necessary Fields for OAR Forms

Guides are available for you to ensure all necessary fields are completed prior to submitting your authorization request. By reviewing this, you will likely decrease incomplete submissions.

- [Outpatient Authorization Request – Medication Services – Minimum Necessary](#)
- [Outpatient Authorization Request – Psychotherapy – Minimum Necessary](#)

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## Demographic Form

The demographic form is necessary to help ensure additional State and Federal funding by identifying areas of mental health need within our County and State.

### When to submit:

- With every initial submission
- When any changes are made to client information

If you have any questions, please call the Provider Line at 800-798-2254, Option 3, followed by Option 4

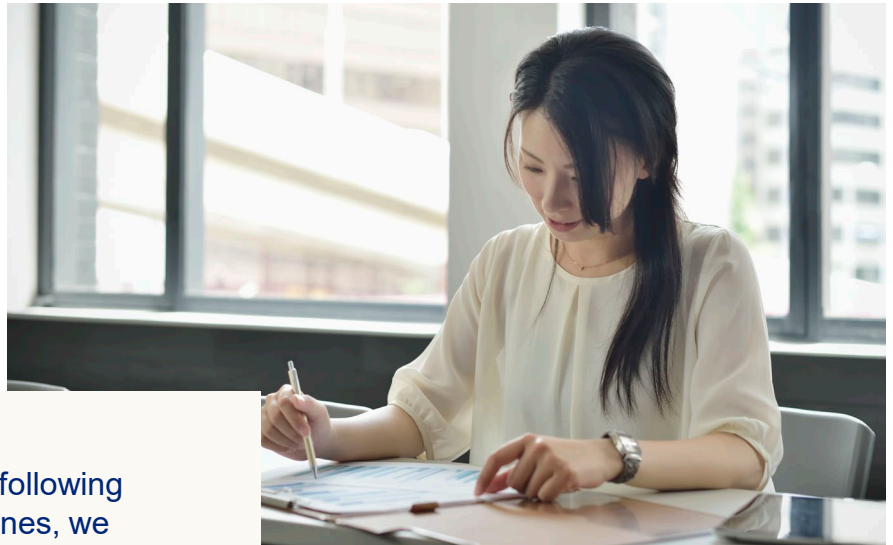
### PROVIDER RESOURCE MATERIALS

Select a category below to find additional materials.

Applications	Beneficiary Materials	CANS/PSC	Claims	Communications & Updates	Compliance	Manuals
Provider Newsletter	Provider Services	Review - Inpatient	Review - Medication Quality Assurance	Review - Outpatient	<b>SMHS Authorization Requests</b>	Templates and Examples

All forms can be found in the **SMHS Authorization Requests** section on the **Optum San Diego** website and by clicking on the following link: [Forms](#)

## Best Practices Series: Case Management



To help ensure your success with following County, State, and Federal guidelines, we highlight some best practices for case management note documentation.

### Case Management notes should include but are not limited to:

- Client name, date of service, location of service
- Services needed or problem being addressed
- How service provided relates to client's mental health impairment and/or goals
- Action taken (how it addresses client's needs)
- Client's response to action taken
- Plan of care and follow up (if applicable)

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**Case Management is a collaborative process that supports beneficiaries to access services and develop a transition plan for when a beneficiary has achieved the goals and services needed.**



Case Management assists with linkage to services and community supports as well as psychological intervention and resource management to assist individuals in acquiring resources.

Click [HERE](#) for the Case Management Template

Have Questions?  
Email us at: [SDQI@optum.com](mailto:SDQI@optum.com)



# Information and Updates for TERM Providers

## TERM Provider Work Product Tracking

TERM appreciates your time in reviewing and returning the monthly work product Due Date Tracking courtesy reminder letter. Your responses and ongoing collaboration with Child Welfare Services is paramount to improving the overall system of care for children and their families in the County of San Diego.

The Due Date Tracking courtesy reminder letter is sent to you on the 3<sup>rd</sup> Monday of each month. We encourage you to review the client names and due dates carefully as TERM providers are required to submit a treatment plan for each client listed. After reviewing, please contact Optum if any information is incorrect. To streamline the process, the Due Date Tracking courtesy letter has been updated so that you can efficiently request to remove (**exclude**) a client from your caseload OR postpone (**extend**) a due date. For your convenience, the letter can be faxed directly to TERM at 1-877-624-8376.

If you opt to have the client **excluded**, please indicate so by checking the appropriate box **and** including the date you notified the PSW. Please see the example for client, Beach Waves, below. If you opt to have the due date **extended**, please indicate so by checking the appropriate box **and** documenting the proposed date. Please see the example for client, Sunny Days, below.

Client Name	Case Number	Due Date	Response
<b>Initial Treatment Plan *Please communicate with the PSW and document supporting information</b>			
Days, Sunny	0AB1484-01	8/30/2022	<input type="checkbox"/> Exclude _____ Date PSW Notified: _____ <input checked="" type="checkbox"/> Extend Due Date: 9/15/2022 Date PSW Notified: 8/25/2022
<b>Initial Treatment Plan *Please communicate with the PSW and document supporting information</b>			
Waves, Beach	0D16554-01	8/4/2022	<input checked="" type="checkbox"/> Exclude Did not return calls Date PSW Notified: 7/28/2022 <input type="checkbox"/> Extend Due Date: _____ Date PSW Notified: _____

Your caseload will be updated upon receiving your request. Again, TERM would like to extend its gratitude for your attention in managing your caseload and corresponding work product submissions.



# Information and Updates for TERM Providers

## Adoption Competent Therapist

In 2018, the Children’s Bureau published a fact sheet for foster and adoptive families entitled “Finding and Working With Adoption-Competent Therapists” (*Child Welfare Information Gateway, 2018*). This resource was created due to the high number of children and youth who were disrupted from their permanent placement either before or after an adoption. While having the best of intentions, many prospective adoptive parents are not fully prepared to meet the complex needs of those children becoming available for adoption through the foster care system. This inadequate preparation and support to families to meet the complex behavioral and emotional needs of their adopted children and the resulting placement disruptions then create further trauma and instability for the child. The fact sheet created by the Children’s Bureau is intended to help families identify providers who would provide appropriate mental health support on their path to permanency.

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## What Does it Mean to be an Adoption Competent Therapist?

What makes an adoption competent therapist? Most therapists are not specifically trained in adoption competence and their theoretical orientations and interventions may not fully address the unique needs of adopted children who have experienced chronic, complex trauma and significant loss. An adoption competent therapist not only has received specific training in adoption related issues, but also has experience working with adoptive families, and utilizes a strength based and trauma informed approach. The Center for Adoption Support and Education have identified specific principles that should be incorporated into one’s theoretical/philosophical framework when providing adoption competent mental health services. They include:

1. Services are provided from an ecological perspective based on individual and family resilience and strengths.
2. The family is the core client.
3. The “adoption kinship network” is the constellation of relationships that must be acknowledged among adoptive, birth, and sometimes foster and extended family members.
4. Adoption has an intergenerational impact.
5. The adoptive family is the child’s permanent family.
6. Race/ethnicity and culture are extremely important in clinical work with adopted persons, adoptive families, and birth families.
7. The child’s birth family is important in the child’s life.
8. Adoption is a process, not an event.
9. The issues that adopted persons, adoptive families, and birth families face involve multiple systems.
10. Post adoption services are important in promoting the healthy development and stability of adoptive families.

*[The Center for Adoption Support and Education, Training in Adoption Competency (TAC), 2016]*

# Information and Updates for TERM Providers

## Adoption Competent Therapist - *continued*

These principles are relevant to the work of TERM providers providing treatment to children and youth who may have a goal of permanency through adoption and should be incorporated into assessment and treatment planning processes to best support these case goals. In utilizing a trauma informed approach, it is important to recognize that behavior challenges in adopted children are rarely improved if they are treated as behavior problems. Behavior modification techniques, rewards charts, and time outs are typically ineffective and can lead to further feelings of rejection in children who have experienced trauma and loss. More often approaches that promote repairing and building healthy attachment, addressing grief and loss, increasing felt safety, and supporting the child and family in incorporating into new identity can be helpful. Interventions such as Trust Based Relational Intervention (TBRI) or Dyadic Developmental Practice show evidence of promising research in their effectiveness.

For more information on how you can increase your adoption competency, please visit the following organization's sites to learn more about intensive training series that are offered. The Center for Adoption Support and Education at [www.adoptionsupport.org](http://www.adoptionsupport.org) offers a 72-hour training series, Training in Adoption Competency (TAC), as well as less intensive training options. Or the Kinship Center at [www.kinshipcenter.biz](http://www.kinshipcenter.biz) which provides their series, Adoption Competency Training (ACT).

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### References:

North American Council on Adoptable Children; <https://nacac.org/resource/seven-core-issues-in-adoption-and-permanency/>

The Center for Adoption Support and Education; <https://adoptionsupport.org/>

Child Welfare Information Gateway; <https://www.childwelfare.gov/>



# Information and Updates for TERM Providers

## CWS Treatment Plan Form Updates

Child Welfare Services (CWS) is in the process of updating the Treatment Plan forms that are utilized by TERM providers. It is anticipated that the revised forms will be available sometime in November, and the intent is for the updated forms to be used starting with new therapy referrals. The most significant change is that the forms have been updated to reflect the use of DSM-5-TR for documentation of client diagnoses. Below is an overview of the changes you will see:

### **Initial Treatment Plan/Treatment Plan Update: Child and Parent (04-176-04-177C and 04-176-04-177P):**

- Streamlined list of records sent to provider
- Added Risk Assessment/Risk Factors and Brief Assessment of parent/youth's functioning (Mental Status Assessment)
- **Updated to reflect use of DSM-5-TR for diagnostic description**

### **DV Victim Intake Assessment (04-182) and DV Victim Quarterly Progress Report (04-182A):**

- Updated to include a Mental Status Symptom Checklist on the Intake Assessment to report on additional mental health concerns related to Intimate Partner Violence traumatic experiences that will be addressed in treatment
- Added a treatment goal for providers to report on clients' progress around understanding of safe relationships and their impact on children
- Updated language from Domestic Violence to Intimate Partner Violence
- **Updated diagnostic requirements to DSM 5-TR**

### **NPP Intake Assessment (04-183) and NPP Group Quarterly Progress Report (04-18AA):**

- Updated to include a Mental Status Symptom Check list on the Intake Assessment to report on additional mental health concerns related to the sexual abuse of clients' children that will be addressed in treatment
- **Updated diagnostic requirements to DSM 5-TR**



**Once the updated forms are released, a communication will be sent out to providers with further information.**

# Information and Updates for TERM Providers

## Training Opportunities for TERM Providers

### The National Child Traumatic Stress Network Learning Center for Child and Adolescent Trauma

The National Child Traumatic Stress Network Learning Center for Child and Adolescent Trauma is offering free CEUs. To search the course catalogue, please visit the [NCTSN](#) website. Once you establish an online account, you will be able to enroll in a variety of webinars.

### TF-CBT Web

TF-CBT Web offers a web-based eLearning course on Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). It can be accessed at <https://tfcbt2.musc.edu/>.

### RIHS (Responsive Integrated Health Solutions)

The County contracts with RIHS based at the Academy for Professional Excellence, a project of the SDSU School of Social Work. RIHS training meets the qualification for continuing education credit for MFTs, LPCCs, LCSWs, and Psychologists. Providers can earn free CEUs for many of the offered classes. Email [RIHS@sdsu.edu](mailto:RIHS@sdsu.edu) if you have any questions. You can also contact Provider Services for instructions on how to set up an account at 1-800-798-2254, Option 7.

Two recent live trainings for TERM providers were recorded and are now available as recorded webinars. The webinars can be accessed on the RIHS website by clicking the links below:

- [Understanding CWS and the Juvenile Dependency Process: Helping Our Families Heal](#)  
Providing therapeutic services for child welfare children and families can be a complex process. It involves an understanding of juvenile court processes and roles, CWS procedures, collaboration and documentation expectations vis-a-vis protective service workers, and clinical expectations related to the protective issues as identified by the court. In this training, participants will be provided with information and experiences related to these processes.
- [Psychotropic Medication and Youth: Legislative Updates and Best Practices](#)  
In this webinar, participants will be provided a historical perspective on psychotropic medication oversight. They will also be provided with information about existing guidelines from professional organizations and the state of California. Finally, participants will receive an update of recent legislative changes that pertain to prescribing.

# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes - Effective October 1, 2022

### Frequently Asked Questions (FAQ)

#### Q1. Why is this change occurring?

A1: We have updated our provider records database. As a result, we have made some modifications to billing codes to align with standard CPT codes. A key reason for the current system change is to support electronic claiming for providers; it is anticipated that this will be available to providers in the coming months.

#### Q2: What changes were made?

A2: Your newly redesigned rate sheet contains several changes to codes and rates, including an increase in rates. All providers should become familiar with the new codes so that you know when and how to use them. Be sure to coordinate with your billing support or vendors to make sure they are aware as well.

Please note the following changes:

- **Psychiatric Diagnostic Procedures:**
  - Will continue to be billed under 90791
  - The 90791 and associated modifiers (TU, GT, SC) were added to a CPT cluster code A&E; you will see this cluster code on your authorization letter, but will submit claims under the CPT code utilized including any applicable modifiers
- **Individual Psychotherapy:**
  - A 60-minute individual therapy session (90837) has been added. Individual therapy authorizations will now allow providers to bill the code that matches the duration of their therapy session, either 45-minutes (90834) or 60-minutes using the newly added 90837 CPT code.
  - Individual therapy CPT codes and associated modifiers (TU, GT, SC) were added to a CPT cluster code INDIV; you will see this cluster code on your authorization letter, but will submit claims under the CPT code utilized including any applicable modifiers
- **Conjoint Therapy:**
  - Conjoint therapy CPT codes (90846, 90847) and associated modifiers (TU, GT, SC) were added to a CPT cluster code CONJ; you will see this cluster code on your authorization letter, but will submit claims under the CPT code utilized including any applicable modifiers

# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes FAQ's – *Continued*

- **Individual and Conjoint Therapy Treatment Plan Reports:**
  - H0032: GT and SC modifiers were removed from the rate schedule
    - This is the time spent working on the plan (not time reviewed with the client). It can't be completed via telephone or telehealth.
  - The CPT codes used for billing is H0032 HE
  - You will see treatment plan reports authorized under the CPT cluster code PLDV (plan development) on your authorization letter, but will submit claims under the H0032 HE CPT code
- **Group Assessments:**
  - Providers will now claim under CPT code 90791
  - DV Victim and Offender groups were previously authorized in three 30-minute units. For these two types of groups, providers who need more than the 90791 can claim an extra 30-minutes via the 99354 CPT code in addition to 90791
- **Group Psychotherapy:**
  - All groups will be claimed using CPT code 90853
  - The type of group will be noted in the Comments section of your authorization letter
    - Groups were added to a CPT cluster code GROUP; you will see this cluster code on your authorization letter, but will submit claims under the CPT code utilized including any applicable modifiers (TU)
- **Group Quarterly Reports:**
  - The letter after 90889 was removed and you will submit claims using 90889 regardless of group type. The type of group will be noted in the Comments section of your authorization letter
  - All reports will be expected and authorized at 4 times a year
- **Care Coordination Codes:**
  - 99366/99368-Includes Child, Family, and Interdisciplinary Team (CFT) meetings
    - A new CPT cluster code will be used for authorization, Team Conference (CM); you will see this cluster code on your authorization letter, but will submit claims under the CPT code utilized (99366 or 99368, with or without the client present)
    - 12 units will be authorized under the Team Conference code with initial therapy authorizations, and 6 units will be authorized for all continuing authorizations
  - T1017-Targeted case management code added
    - Billed in 15-minute increments
    - This code is allowed via telephone (SC) but NOT telehealth (GT)
    - A new cluster code Targeted Case Management (TCM) will be used; you will see this cluster code on your authorization letter, but will submit claims for case management services under the T1017 CPT code
    - 12 units will be authorized under the Targeted Case Management code with initial therapy authorizations, and 6 units will be authorized for all continuing authorizations

# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes FAQ's – *Continued*

- **CAN02 (CANS Report) changed to 90889 HX**
- **Neuropsychological Evaluation Admin and Scoring:**
  - 96136N/93137N - The letter 'N' after the code was removed. This was replaced with modifier HU
- **Developmental Evaluations were split into two codes:**
  - 96112 - 1st hour of the developmental eval
  - 96113 - Additional 30 mins as necessary -- up to a **MAX of 18** additional units (which would make 10 hours total)
- **The following codes have been removed: MAP01- Mapping and X9544 - Team Decision Making**

### **Q3: Why does my CWS authorization letter look different?**

A3: We have updated our provider records database. Authorizations for CWS funded cases will now look the same as authorization letters used for Medi-Cal funded CWS cases. Please see below for a sample of what the authorization letter will look like. The example on the following pages shows the authorization letter for Domestic Violence Offender group psychotherapy services:



# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes FAQ's – Continued

Date: 10/03/2022 Original Print Date: 10/03/2022 Page: 1

**CONFIDENTIAL**  
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Client: \_\_\_\_\_ Policy: \_\_\_\_\_  
 Provider: \_\_\_\_\_ Group Primary: \_\_\_\_\_

Provider's Group/Private Name \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contact: \_\_\_\_\_

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Payer: CCF Authorization#: \_\_\_\_\_  
 Benefit Plan: CCF Adult Effective: \_\_\_\_\_  
 Utilization Mgr: ASO CLINICAL, STAFF Good Thru: \_\_\_\_\_  
 Level of Care: Outpatient Adult CoPay: \_\_\_\_\_

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Group Practice: \_\_\_\_\_ Location: \_\_\_\_\_  
 Primary Provider: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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Authorized Services						
Proc Code	Mods 1-4	Proc Group	Description	Requested Qty	Apprvd Qty	Limit/Per
99354		A&E	Psych Assessment and Med Eva	1.00	1.00	1/YR
			Group Assessment- Add 30Min	1.00	1.00	1/YR
		GROUP	Group Therapy	26.00	26.00	1/WK
		CM	Team Conference	12.00	12.00	2/MO
		TCM	Targeted Case Management	12.00	12.00	2/MO
<b>Totals</b>				EA	52.00	52.00

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**Approval Reason:** CWS Requested Service  
**Comments:** DOMESTIC VIOLENCE OFFENDER GROUP

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**Disclaimer:** This authorization is being issued on behalf of Child Welfare Services. Funding for the Optum Public Sector Services is provided by the County of San Diego Health and Human Services Agency.

\* All CWS Initial Treatment Plans, Domestic Violence Victim Group Intake Assessments, and Child Sexual Abuse Non-Offending/Non-Protecting Parent Intake Assessments are due 14 days from the authorization start date.  
 \* All treatment plan updates are due every 12 weeks thereafter.  
 \* Discharge summaries should be submitted on completion or termination of services.  
 \* CWS psychological evaluations are due 30 days from the authorization or receipt of

# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes FAQ's – Continued

Date: 09/23/2022 Original Print Date: 09/23/2022 Page: 2

**CONFIDENTIAL**  
\*\*\*PROVIDER COPY\*\*\*

Client: CLIENT'S NAME	Policy:
Provider: PROVIDER'S GROUP/ PRIVATE NAME	Group Primary Provider:
PROVIDER'S GROUP/ PRIVATE NAME AND ADDRESS	Phone: Fax: Contact:

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Payer: CCF	Authorization#:
Benefit Plan: CCF Adult	Effective:
Utilization Mgr: ASO CLINICAL, STAFF	Good Thru:
Level of Care: Outpatient Adult	CoPay:

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Group Practice:	Location:
Primary Provider:	Contact:
Phone:	Fax:

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(cont)  
background records from CWS.

Fax to: (877) 624-8376 Or  
Mail to: Optum TERM at PO Box 601340 San Diego, CA 92160-1340  
For questions or concerns, please contact Optum at (877) 824-8376

**Q4: The rates are no longer included on the authorization letter. Where would I be able to locate the fees?**

A4: Please refer to the updated provider rate sheet that was sent to you via email on September 9, 2022 (subject line: Optum Public Sector San Diego TERM: Billing Codes and Rates). Another email with additional updates and clarifications was sent out on October 3, 2022.

**Q5: The CPT codes are no longer included on the authorization letter. Where would I be able to locate the CPT codes authorized for claims purposes?**

A5: Please refer to the updated provider rate sheet that was sent to you via email on September 9, 2022 (subject line: Optum Public Sector San Diego TERM: Billing Codes and Rates). CPT codes are included on the updated rate sheet. Another email with additional updates and clarifications will be sent out by October 1, 2022.

Authorization letters will include CPT codes for services that are authorized under an individual CPT code; however, you will notice that many services are now authorized under a CPT "cluster code" as outlined in section A2 above. Cluster codes are used so that we can authorize the face to face, telephone or telehealth services all at once so there will be no delay in payment when a service is claimed. The cluster codes are shown below, with the CPT codes that can be claimed under each:

# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes FAQ's – Continued

CPT Cluster Code	CPT Cluster Code Description	CPT Codes Included in Cluster	Modifier	Modifier
A&E	Psych Assessment and Med Eval	90791		
		90791	GT	
		90791	SC	
		90791	TU	
		90791	TU	GT
		90791	TU	SC
		90792		
		90792	GT	
		90792	SC	
		90792	TU	
		90792	TU	GT
		90792	TU	SC
		INDIV	Therapy	90834
90834	GT			
90834	SC			
90834	TU			
90834	TU			GT
90834	TU			SC
90837				
90837	GT			
90837	SC			
90837	TU			
90837	TU			GT
90837	TU			SC
CONJ	Conjoint Therapy			90846
		90846	GT	
		90846	SC	
		90846	TU	
		90846	TU	GT
		90846	TU	SC
		90847		
		90847	GT	
		90847	SC	
		90847	TU	
		90847	TU	GT
		90847	TU	SC
		GROUP	Group Therapy	90853
90853	TU			
90853	HE			
PLDV	Plan Development	H0032	HE	
CM	Team Conference	99366		
		99366	GT	

# Information and Updates for TERM Providers

## TERM Provider Billing Codes & Rates Changes FAQ's – *Continued*

CPT Cluster Code	CPT Cluster Code Description	CPT Codes Included in Cluster	Modifier
		99366	SC
		99368	
		99368	GT
		99368	SC
TCM	Targeted Case Management	T1017	
		T1017	SC
HOME	Home Visits	99343	
		99343	TU

**Q6: The allocated units are different from previous authorizations. For example, the group initial intake assessment is only authorized for one unit for 30 minutes.**

A6: Please see the explanation of changes under A2 above. The changes to the group initial intake authorization are covered under the Group Assessments bullet point under A2 above:

- DV Victim and Offender groups were previously authorized in three 30-minute units. For these two types of groups, providers who need more than the 90791 can claim an extra 30-minutes via the 99354 CPT code in addition to 90791

**Q7: What client identifying information do I need to include on my claims form?**

A7: Please continue to include the client CWS Case ID # on your claims form. The CWS Case ID # is located on the first page of the CWS referral form that is sent to you with the initial referral from Optum.

**Q8: Will there be a grace period for claims submission?**

A8: In order to support our providers, Optum is offering a billing grace period through 01/30/2023. We understand that the revisions and changes to your rate sheets effective 10/01/22 may impact your administrative processes and we would like to support you should you run into barriers. You can bill with old CPT codes between 10/01/222 and 01/30/2023 without risking denials. Please know that we are available for consultation should you have any questions.

**Q9: Who do I call if I have questions?**

A9: Questions can be directed to the TERM-dedicated phone line at 1-877-824-8376 as follows:

- Option 1: For questions about your CWS authorization letter, please contact Optum TERM
- Option 2: For CWS billing questions, please contact Optum Claims
- Option 3: For questions about your updated TERM rate sheet, please contact Optum Provider Services

# Information and Updates for TERM Providers

## TERM Advisory Board Provider Representatives

The TERM Advisory Board meets quarterly to provide professional input regarding the performance of the system and its policies, procedures, and protocols. Representation on the Board includes San Diego County HHS Behavioral Health Services, Child Welfare Services, Probation Department, Juvenile Court, Public Defender Juvenile Delinquency Branch, District Attorney, County Counsel, Dependency Legal Services, Children's Legal Services, Optum, TERM Provider Panel, Youth and Parent Partners. TERM providers are currently represented on the Board by:

**Michael Anderson, Psy.D.:** [drmike6666@gmail.com](mailto:drmike6666@gmail.com)

**Denise VonRotz, LMFT:** [dvonrotz@msn.com](mailto:dvonrotz@msn.com)

Please feel free to contact your provider representatives for updates from the Advisory Board meetings, process improvement ideas, or to provide professional or client feedback.

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## Child Welfare Services PSW Locator Number

Procedures for calling into the San Diego County CWS PSW Locator Line (1-858-514-6995) have been updated to ensure that the process is aligned with CWS Confidentiality Guide policies. A verification code is now required to when calling into the line. To obtain the verification code, please call Optum TERM at 1-877-824-8376, option 1. For any questions about this process, please contact CWS policy analyst Jerelyn Bourdage, LCSW, at 1-619-417-6722.

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## Contact

For provider assistance, a TERM dedicated phone line is available Monday through Friday from 8am to 5pm at 1-877-824-8376. The available options for your call include:

Option 1: For questions about authorizations or receipt of work products

Option 2: For questions about CWS billing and claims

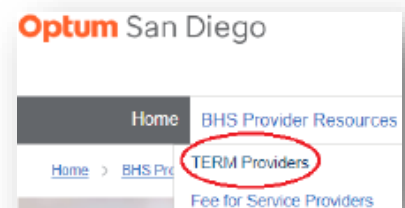
Option 3: For questions regarding participation in our network, credentialing, or your provider record

Option 4: For questions about CWS referrals

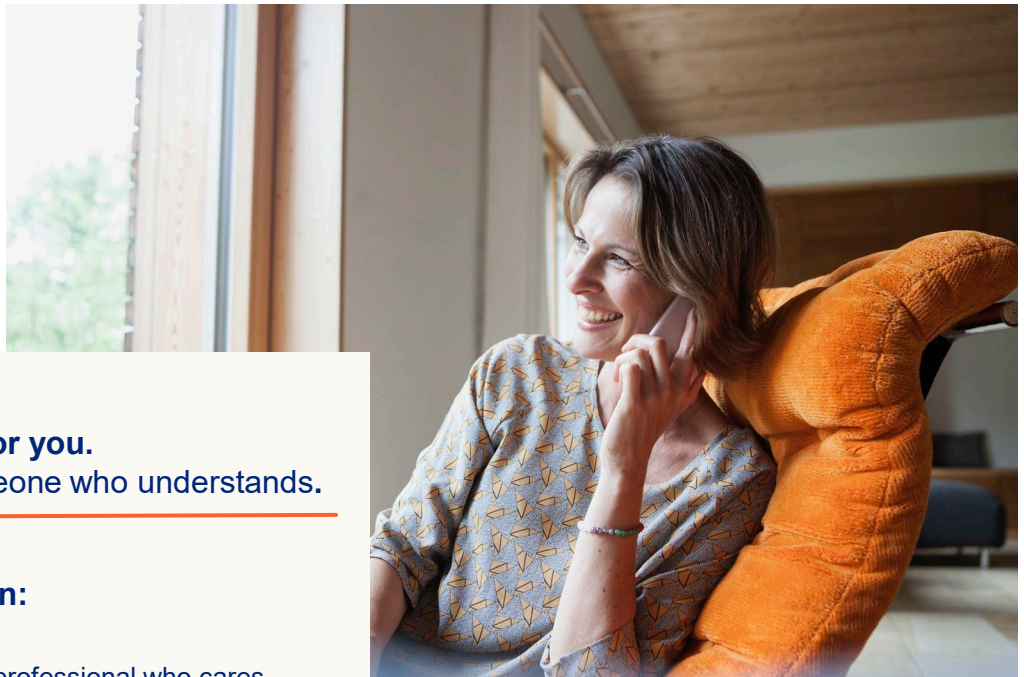


[optumsandiego.com](https://optumsandiego.com)

Hover over BHS Provider Resources and select TERM Providers



# Access and Crisis Line Chat Services



**We are here for you.**  
Chat with someone who understands.

## We can help you when:

- You need to chat with a professional who cares.
- You are struggling to cope.
- You are concerned about someone you know.
- You feel you might be in danger of hurting yourself or others..



**Our free, confidential Live Chat Services are available  
Monday – Friday, 4pm-10pm.**

**Go to [optumhealthsandiego.com](https://optumhealthsandiego.com) or [up2sd.org](https://up2sd.org)**

San Diego Access and Crisis Line 1-888-724-7240 / 7 days a week 24 hours a day!



\*\* These services are funded by the voter-approved Mental Health Services Act (Prop 63). It is one of several Prevention and Early Intervention Initiatives implemented by the California Mental Health Services Authority (CalMHSA), an organization of county governments working together to improve mental health outcomes for individuals, families and communities. CalMHSA operates services and education programs on a statewide regional and local basis.

# We are Recruiting!

## Contracting for Two Networks:

### Fee for Service Medi-Cal Network

Specialty Mental Health Services:



- Advance Outpatient Services
- Psychiatric Consultations
- Medication Management
- Psychological Testing

### Treatment & Evaluation Resource Management:



Child Welfare & Juvenile Probation Systems Services:

- Specialized Therapy
- Forensic Evaluations

## Growing our richly diverse provider networks

### Seeking:

- Master's Level Clinicians
- Psychologists
- Psychiatrists
- Psychiatric Nurses
- Practitioners
- Psychiatric Physicians' Assistants

### Gain Supportive Solutions:

As a Contracted Provider, Optum is with you every step of the way.

We are here for you through personalized:

- Collaboration
- Courtesy Reviews
- Referrals
- Claims Processing & Payments
- And more!

### What providers are saying:

*"Optum was positive and collaborative"*

*"I never have to wait on hold for long periods of time which is appreciated."*

*"Provider Services staff is always friendly, responds quickly and offers help with all situations/questions. Thank you."*

**Are You Ready to Be part of the Solution?  
Learn More Today!**



Optum serves as the Administrative Service Organization for the County of San Diego Behavioral Health Services.



**Denise Hammersla**

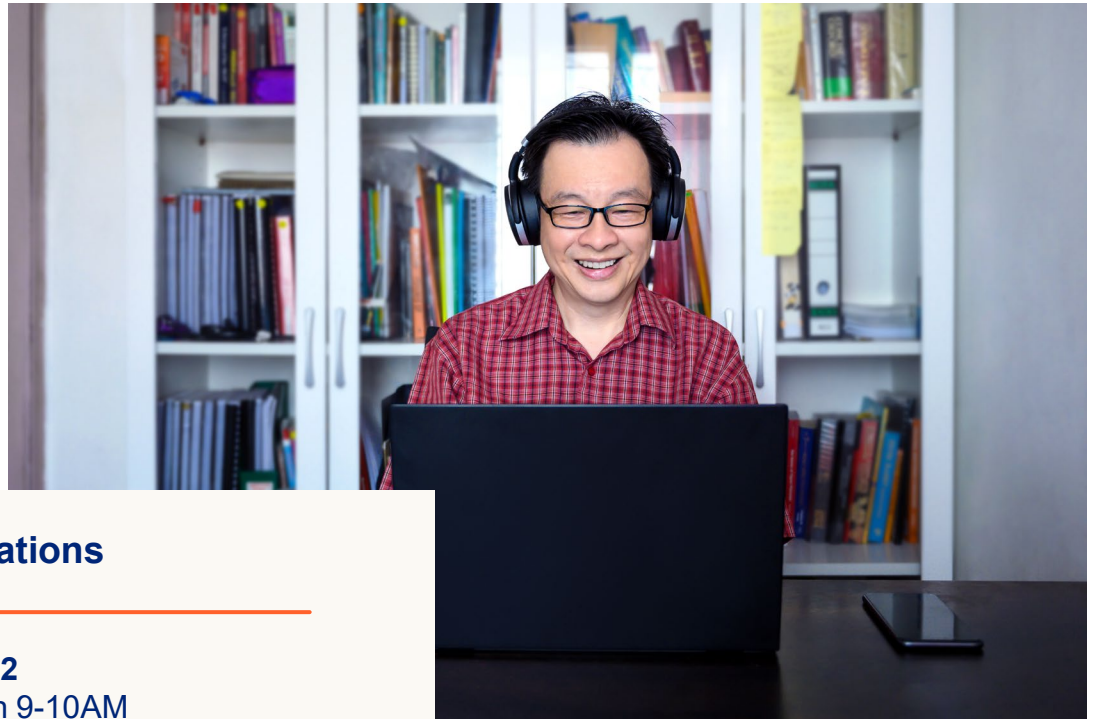
**Provider Recruiter**

**1-619-641-6833**

**[Denise.Hammersla@optum.com](mailto:Denise.Hammersla@optum.com)**

Funding for services is provided by the County of San Diego Health & Human Services Agency

# Upcoming Events



## Provider Orientations

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### **November 17, 2022**

TERM Presentation 9-10AM

FFS Presentation 10AM-12:30PM

### **December 15, 2022**

TERM Presentation 9-10AM

FFS Presentation 10AM-12:30PM

### **January 26, 2023**

TERM Presentation 9-10AM

FFS Presentation 10AM-12:30PM

Please RSVP to confirm your attendance by  
calling 1-800-798-2254, Option 7

**Important Notice:** Provider Orientation will be held via Teams Meeting until further notice - You will receive an invite when your RSVP is received by Provider Services.

**\*\*\*The ACL remains open 7 days per week, 24 hours per day.\*\*\***

Access and Crisis Line: 1-888-724-7240

Live chat available Monday-Friday 4pm-10pm

Visit the ACL page [here](#) for more details