

# OPTUMIST

Optum Provider Newsletter

V20. October 2018

## Provider Services Manager's Message

Hello and welcome to the Fall 2018 edition of the OPTUMIST Newsletter. This edition is full of important information, including authorization changes for providers who prescribe medications (MD, DO, PNP) that will take effect January 1, 2019, updates to the Fee For Service Provider Operations Handbook, yearly cultural competency requirements with an attestation during recertification, and more:

- TERM tips and reminders - due date tracking letters
- A message from **Yael Koenig**, LCSW, Deputy Director, Behavioral Health Services, Children, Youth, and Families and the Legal Aid Society of San Diego requesting cooperation with requests for Medical Records
- An article identifying the standards for CWS treatment plan documentation
- Training Opportunities for both FFS Medi-Cal and TERM providers

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

*Judy A. Duncan-Sanford, LMFT*



### Contact Numbers

San Diego  
Access and Crisis Line  
(888) 724-7240

Medi-Cal Provider Line  
(800) 798-2254

TERM Provider Line  
(877) 824-8376

Website:

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

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# Information and Updates for FFS Medi-Cal Providers

## Authorization Process Changes for Medication Prescribers (MD/DO/PNP)

Effective January 1, 2019

As an Optum Public Sector Fee-For-Service Provider, you are a vital part of our San Diego County Behavioral Health System. Medi-Cal Expansion has continued to have a significant impact on the San Diego County Behavioral Health System. We want to keep you informed of how these changes will impact your practice serving Medi-Cal beneficiaries.

**BACKGROUND:** In January 2014, the Department of Health Care Services (DHCS) for the State of California obligated the Medi-Cal Managed Care Plans (MCPs) to provide mental health services to beneficiaries with mild to moderate impairment of mental, emotional, or behavioral functioning. Each MCP has its own network of contracted behavioral health providers to serve their beneficiaries. You might also be on one or more of these networks: Aetna Better Health, Care 1st, Community Health Group, HealthNet, Kaiser, Molina, and UnitedHealthcare.

The County Mental Health Plan, consisting of County Clinics, Organizational Providers, and the Optum Public Sector FFS Network (which historically may have seen a range of mild, moderate, and severe levels of functioning) is targeted to provide services to those individuals with more severe behavioral health impairment.

**HOW THESE CHANGES AFFECT YOU:** The FFS Network has been shifting to align with serving the County Mental Health Plan's target population of individuals with more serious and persistent behavioral health impairment. To ensure these are the individuals being served by the FFS network, we are required to make adjustments to our authorization process for MD/DO/NP providers as of January 1, 2019.

The new process is outlined as follows:

-A FFS MD/DO/NP performs a face to face assessment to determine that the client meets medical necessity for Specialty Mental Health Services, as evidenced by severe impairment of mental, emotional, or behavioral functioning. This initial assessment does not require prior authorization.

-If the FFS MD/DO/NP is requesting ongoing sessions after the initial assessment, the FFS MD/DO/NP must submit both an OAR-Psychiatry Form and Demographic Form. This information is critical for ensuring we can register the clients into the electronic health record and report required information to the County Mental Health Plan and DHCS.

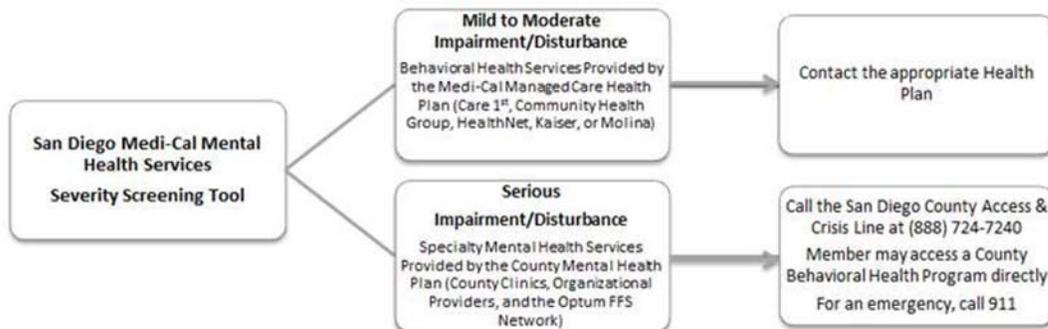
-The required forms are listed on the Optum Website at [www.optumsandiego.com](http://www.optumsandiego.com) under the County Staff & Providers- Fee for Service Providers tab.

# Information and Updates for FFS Medi-Cal Providers

**FRAMEWORK AND TOOLS:** San Diego County Behavioral Health Services, in collaboration with the Medi-Cal MCPs, developed a shared conceptual framework and tools to use as guidelines for evaluating clients as having either mild, moderate, or severe impairment.

The tools have been posted on our website: [www.optumsandiego.com](http://www.optumsandiego.com) under the County Staff & Providers-Healthy San Diego tab.

I encourage you to review these tools to better understand this process.



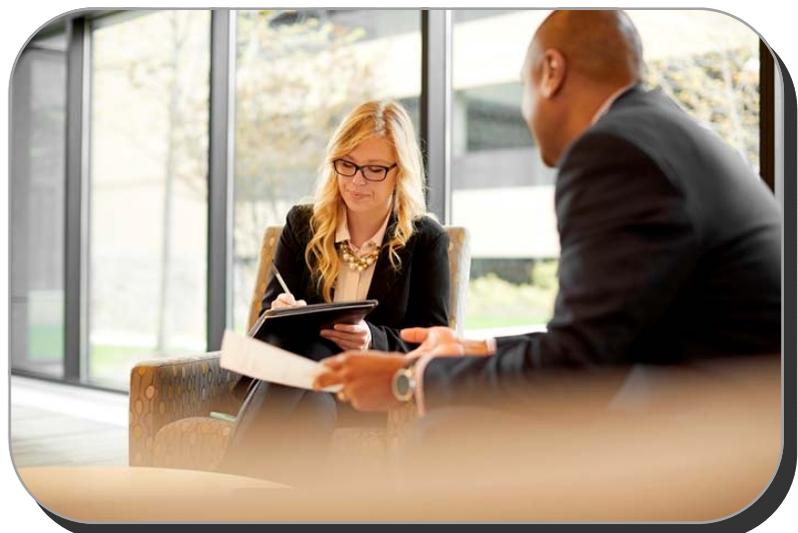
We appreciate your understanding and flexibility as we implement these changes over the next few months. This system will allow us to align our authorization processes to Medi-Cal requirements, to provide data to better inform our system, and to ensure consumers are being served. We will continue to provide additional information to you as we get closer to January 2019. Please keep a look out for a more detailed communication, as well as a recorded webinar in the coming weeks. Please feel free to reach out to us if you have any questions. You can reach one of our Outpatient Care Advocates at 1-800-798-2254, Option 3, Option 3.

Thank you for your continued commitment to serving our Medi-Cal beneficiaries. We greatly appreciate the work you do and look forward to continuing to work with you.

Sincerely,

Kristie Preston, LMFT

Clinical Director



# Information and Updates for FFS Medi-Cal Providers

## Cooperation with Medical Records Request

The County contracts with **Legal Aid Society of San Diego** (LASSD) for a Supplemental Security Income (SSI) Advocacy Program.

The following letter from LASSD outlines the critical part your organization plays in providing necessary documentations for an SSI application.

Please ensure that there are systems in place within your legal entity to be able to respond to these time sensitive requests for a full medical record release.

By proactively establishing internal protocols and disseminating the information to the right people within your organization, a timely release of needed information can be achieved.

As outlined in the letter, questions requiring subject matter expertise can be directed to Legal Aid, and of course general questions to your COR.

Thank you for your attention in this matter; it is critical we work together to provide the needed information in an expedited manner.

**Yael Koenig**, LCSW, Deputy Director  
Behavioral Health Services, Children, Youth, and Families

## Cooperation with Requests for Medical Records for Adults and Children

Dear Child and/or Adult Provider of Mental Health Services:

The **Legal Aid Society of San Diego's** (LASSO) Supplemental Security Income (SSI) Advocacy Program as well as our SSI and In-Home Supportive Services Advocacy Program for Children and Families are County-contracted programs through the Department of Behavioral Health. The goals of our programs are to help our adult clients obtain income to escape homelessness and maintain housing, and to help parents/caretakers of children with disabilities to maintain housing and provide for the health and well-being of the child. To this end, our advocacy programs employ a team of advocates and attorneys who assist clients with applications and provide representation at legal proceedings.

Social Security rules require that we provide objective medical evidence that shows our client's condition has lasted, or can be expected to last twelve months, or could result in death. In order for Social Security staff to properly evaluate, and ultimately award our client's benefits, we must submit all the medical records pertaining to a client's medical condition in the two years prior to the SSI application date.

## Information and Updates for FFS Medi-Cal Providers

In response to our requests, we often receive a summary of treatment or an incomplete set of medical records. These responses are problematic for two reasons. First, while meaningful when accompanied by treatment records, by itself a treatment summary does not sufficiently demonstrate our clients are in on-going treatment. These letters also do not meet the requirement of objective medical evidence reflecting a consistent pattern of abnormal signs and symptoms (e.g. mental status examinations, psychological testing). Moreover, supplying a limited set of records (e.g. one behavioral assessment and two individual progress notes) does not meet the requirement for showing our client's condition has lasted, or can be expected to last, for one year.

While Social Security is required to request all treatment records reported by the applicant, they engage in limited follow-up and will often make a decision based on whatever records they receive, even if the records are incomplete. Time and again children and adults are denied the benefits they need and deserve because medical providers simply do not supply evidence that could prove the child's or adult's disability or only provide a limited set of medical records.

It is the responsibility of the child's or adult's legal representative to make sure all the necessary records are submitted. For this, we need your help. We kindly ask that if our office requests medical records from your program, that you provide our office with the specific information we are requesting covering the time periods in which we are inquiring about. If you anticipate any problems with providing client records, we also ask that you promptly inform us of what exactly is needed to fulfill our request.

Everyday, the behavioral health providers of San Diego County work tirelessly to meet the needs of the children and adults they serve, to help in their treatment and recovery. An essential part of that recovery is the ability to meet the basic daily needs of food, shelter, and safety.

These are goals that we all share. That is why it is crucial for us to work together in this effort. If there are differences, we must resolve them. If there are roadblocks, we must remove them. If there are questions, we must answer them. Together we can achieve this.

Respectfully,  
Legal Aid Society of San Diego



# Information and Updates for FFS Medi-Cal Providers

## School Based Behavioral Health Services for Eligible Medi-Cal and Uninsured

For many years, the County of San Diego's Health and Human Services Agency (HHS) has partnered with local school districts to provide on-campus behavioral health services for eligible Medi-Cal and uninsured students in need.

This year, the County is rebranding these services under the name "**SchoolLink**" and launching a SchoolLink training.

The training was developed through a collaborative partnership between the County of San Diego, Community Research Foundation, San Diego Unified School District, and Price Philanthropies.

Many additional provider organizations contributed their best practices and suggestions as well.

The SchoolLink training shares successful strategies for linking students to behavioral health services. It also provides resources for school staff and providers on:

- Available services
- Referral processes
- Roles and responsibilities
- Best practices for outreach and communication

Most of the information in the SchoolLink training is not new. Rather, it systematizes and standardizes common forms, processes, and expectations. It also provides helpful information about school district roles and responsibilities.

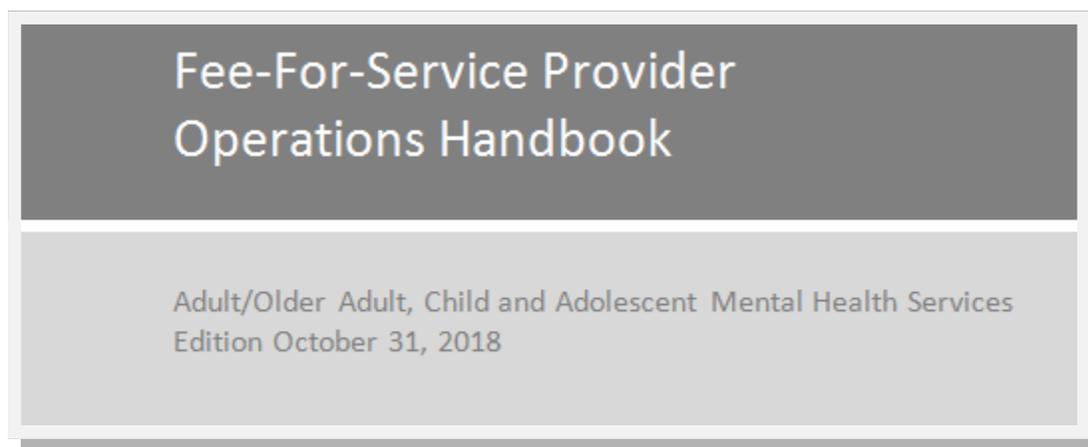
**All BHS County contracted providers that offer school based services will be utilizing the standardized format of SchoolLink and forms.**

We hope that everyone in our system of care will take the time to review the training, as it provides valuable systemic information.

The SchoolLink training is available online at: <https://theacademy.sdsu.edu/programs/bheta/schoolink/>



# Information and Updates for FFS Medi-Cal Providers



[Edition October 31, 2018](#)

The Fee-For-Service (FFS) Provider Operations Handbook was updated on October 31, 2018 to reflect changes implemented in the Fee-For-Service Medi-Cal network for the County of San Diego Behavioral Health Services Mental Health Plan (MHP).

## REVISIONS/ NEW PROCEDURES

When reviewing the new handbook, please pay close attention to the following:

### Provider Contracting

- Credentialing
  - Optum Public Sector on behalf of the MHP is now accepting Physician Assistants who are active/unexpired Certificate of Added Qualifications (CAQ) in psychiatry or are eligible for the exam to participate on the Medi-Cal FFS Network.
  - Applicants must complete the most recent Optum Public Sector practitioner applications, a web based documentation training course available through the Behavioral Health Education & Training Academy ([BHETA](#)) and a site review as part of the initial contracting process.

### Provider Obligations

- Practice Information Verification and Validation
  - Providers are required to register for an Optum ID to access their practice information including demographics and clinical specialties on the Optum Provider Portal.
- Information Privacy and Security Provisions
  - Much of this section has been updated and should be reviewed in its entirety to ensure understanding.

# Information and Updates for FFS Medi-Cal Providers

## Directory

- Telephone/E-Mail/Website Directory

Access and Crisis Line	(888) 724-7240
Provider Line	(800) 798-2254
Bed Availability	Press 1
Claims/ Medi-Cal Eligibility Verification	Press 2
Authorization Related Inquiries	Press 3
Submenu:	
Psychiatric Inpatient, Press 1	
Substance Use Disorder Residential, Press 2	
Outpatient - Clinical, Press 3	
Outpatient - Administrative Services, Press 4	
Long Term Care, Press 5	
Provider Services	Press 7

Please visit our new website at <https://www.optumsandiego.com> to download forms or to save the handbook and forms to your desktop for easy access.

Please remember that we urge you to coordinate care with all treating professionals involved with your clients. This includes treating psychiatrists, pain management professionals, pediatricians, and PCPs, as well as any other treating professionals who work with your clients.

### **Fee-For-Service Provider Operations Handbook Updates**

The Fee-For-Service Operations Handbook will be reviewed and updated as appropriate on a quarterly basis. A notification that will include an outline of any revisions will be sent via email blast. The OPTUMIST Newsletter will continue to include a section for the handbook to ensure you are always informed about changes in processes and requirements. Please remember this handbook is part of your contract.

# Information and Updates for FFS Medi-Cal Providers

## Training Opportunities for Fee-For-Service Providers

**[BHETA \(Behavioral Health Education & Training Academy\)](#)** The County contracts with BHETA, which is based at the Academy for Professional Excellence, a project of the SDSU School Of Social Work. BHETA 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 [BHETA@mail.sdsu.edu](mailto:BHETA@mail.sdsu.edu) if you have any questions. You will also find instructions on how to set up a BHETA account on our website at [www.optumsandiego.com](http://www.optumsandiego.com).

- **Understanding Medi-Cal Documentation Standards: An e-Learning Course by the County of San Diego and OptumHealth (Course Code: BHE0037):** This webinar is free to you, and was created to educate, support, and assist you in fully understanding the standards and requirements specifically related to your Medi-Cal FFS documentation. It is mandatory that all FFS Providers complete this course at least one time.
- **Milestones of Recovery Scale (MORS): November 6, 2018 (Course Code: BH0228)** MORS is one of two options for required evidence based evaluation and outcomes measurement tool required by San Diego County Adult Behavioral Health Services.
- **Motivational Interviewing for Justice-Involved Populations: November 6 or 20, 2018 (Course Code: BH0229)** This is a training program in the theoretical understanding and practical application of an evidence-based clinical method of motivational interviewing (MI) to empower individuals under criminal justice supervision, who often also experience serious challenges such as substance use disorders, mental health conditions, psychosocial dysfunctions, etc.- to make positive behavioral changes.
- **Level of Care Utilization System (LOCUS) 2-day Training): December 4 & 5 ,2018 (Course Code: BH0230)** By completing this training series, you will learn the skills and practice the techniques required to provide effective CBT to the people you serve.
- **Pathways to Well-Being and Continuum of Care Reform: December 6, 2018 (Course Code: BH0225)** This training will also provide methods and strategies geared toward improved collaborative care across systems.



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

## Non-Discrimination and Cultural Competence Requirements

Optum Public Sector makes every effort to refer to providers with the ethnic and cultural background requested by the client. A client has the right to a second opinion and referral to a new provider if the client is not satisfied with the cultural expertise of a provider.

The State and County requires cultural competency requirements to be met in the provision of the following services:

- Interpreter services
- Culturally appropriate assessments and test interpretation (as indicated)
- Utilization of peer consultants (as indicated)

To this end, all providers are required to obtain a minimum of four hours of cultural competence training per calendar year on the effect of ethnicity and culture on mental health issues and treatment.

The current recredentialing application contains the following section:

### **Cultural Competency: Annual Cultural Competency Training (4 hours) Attestation**

Providers are required to obtain a minimum of four hours of cultural competence training per calendar year on the effect of ethnicity and culture on mental health issues and treatment.

I attest that I have completed the 4 hours of Annual Cultural Competency Training for each of the past 3 years as required by my contract and can submit copies of proof of completion if requested by Optum (12 CEUS).

Yes

No

Copies of Cultural Competency Trainings do not have to be submitted with the recredentialing applications, however, random audits may occur and certificates may be requested at that time.

Please feel free to take advantage of the cultural competency training options found on [BHETA \(Behavioral Health Education & Training Academy\)](#).

# Information and Updates for TERM Providers

## TERM Therapy Referral Process – Supporting Timely Access to Care

### Reprint from Summer 2018 Edition of OPTUMIST Newsletter

As a follow up to previous communications, effective June 1, 2018, there was a change to how you receive therapy referrals from CWS. Optum is now responsible for assigning TERM therapists on request from CWS (regardless of funding source). When CWS submits a therapy referral request, an Optum TERM staff clinician searches the TERM provider database based on the needs identified on the CWS Therapy Referral Form and reaches out to prospective TERM providers who appear to match the clinical needs of the referral (e.g., geographical area, clinical specialties, language needs, cultural needs). When you receive a call from Optum with a therapy referral, please make note of the timeline for response and call back as soon as feasible.

***Referrals, timely access to services, and your receipt of claims payments rely on the practice information you provide. It is critical that this information is kept current and accurate.***

- It is a key contractual responsibility to notify Optum when there is a demographic change pertaining to your practice, when your practice is full, or when you are not able to accept new CWS referrals for any reason. If you are unavailable to new clients, please let us know. We offer you the opportunity to designate yourself as temporarily unavailable for new referrals. In this way, clients will not be referred to you when you do not have current availability.
- If your provider record indicates that you are open to referrals, Optum staff will continue to contact you to assign referrals.
- To update your information in our system or designate yourself as temporarily unavailable to referrals, please contact Optum Provider Services at 877-824-8376, Option 3 or [sdu\\_providerserviceshelp@optum.com](mailto:sdu_providerserviceshelp@optum.com).

As a reminder, TERM provider rates were increased effective July 1, 2017, and now include payment for submission of CWS treatment plans.

We will be reaching out to you in the near future to further discuss your availability for referrals and preferred method of receiving therapy referrals from Optum TERM. We look forward to continued collaboration with you in this process.

### **Non-Response to TERM Referral Outreach Attempts**

When contacted by a TERM Clinician working to find providers for Child Welfare Services (CWS) referrals, a response is requested regardless of whether or not the provider can accept it. When a response is not received, the Provider Services staff will follow up to determine the provider's availability and status to accept future CWS referrals. If a response is not received, the provider will be made unavailable to new referrals.

# Information and Updates for TERM Providers

## CWS Treatment Plan Documentation

Treatment plan documentation plays an important role in Child Welfare Services client care and case decision making. In developing treatment plans for Child Welfare Services-referred clients, please keep in mind that different standards of documentation apply due to the legal context and high risk nature of the clinical work.

Because of the potential impact on legal proceedings and family reunification, it is important that treatment plan documentation accurately and clearly describes the treatment rendered, including the treatment goals and the client's progress towards reaching those goals. A standardized and behavioral reporting format is utilized in order to increase readability of clinical documentation by non-clinical professionals (Protective Service Workers, attorneys, judges) and provides a systematic way for these parties to evaluate client progress toward resolving presenting concerns.

The following standards have been incorporated into the TERM Provider Handbook and TERM Treatment Plan Documentation Resources to assist with meeting documentation needs for Child Welfare Services therapy referrals:

- **Required Format and Elements:** All initial treatment plans and progress updates for CWS referred clients are to be submitted on the CWS Treatment Plan Forms (CWS Form 04-176/04-177 Parent and CWS Form 04-176/04-177 Youth). Forms must be typed and completed in their entirety.
- **Timeliness:** Treatment plan is submitted according to required timelines regardless of number of sessions.
- **Background Records:** TERM therapists are required to read the CWS Therapy Referral Form (CWS Form 04-176A) and background case materials prior to the initiation of treatment. The provider cannot provide appropriate services without first understanding the reasons for the referral.
- **Goals:** Treatment goals for CWS referred clients are to be based on the Reasons for CWS Involvement and Reasons for Therapy Referral sections on the CWS Therapy Referral Form and review of collateral materials supplied by the Protective Service Worker.
- **Treatment Interventions:** Specific, evidence-informed psychological techniques the provider will use to address the client's presenting concerns. Interventions are appropriate to the client's developmental level and cultural and treatment needs.
- **Progress:** Summary of client progress (or lack thereof) made toward resolving safety threats and risk factors, relating client progress specifically to the stated goals of treatment. Provide specific behavioral details and examples showing how the risk has been reduced and progress has been made. Indicators of progress should be observable, such as assessment scores, behavioral and mental status changes, or credible collateral reports.

# Information and Updates for TERM Providers

## CWS Treatment Plan Documentation - *Continued*

- **Diagnoses:** The treatment plan must include diagnostic impressions as related to the clinical issues involved in the case, including codes and specifiers from the DSM-IV-TR and corresponding diagnostic codes and descriptions from the ICD-10.
- **Recommendations:** Any recommendations offered are within the scope of provider's license and role as a TERM provider, and the clinical rationale is clearly stated.
- **Provider Signature:** The report should be signed and dated and include professional license type and number, as well as provider address and phone number; supervisors are required to co-sign reports completed by interns.
- **Client Signature:** The client's signature should be obtained to demonstrate involvement in the treatment planning process. If a signature is not obtained, an explanatory statement should be included; if client declines to sign then provider should write "Declined" on the signature line. "Signature on File" is not sufficient.
- **Objectivity:** In TERM-related work, it is imperative that the provider guard against bias by maintaining objectivity and impartiality, which should be reflected in the documentation provided in the treatment report. The need for objectivity is underscored by the gravity of the potential consequences of the provider's professional judgment



# Information and Updates for TERM Providers

## CWS Treatment Plan and Evaluation Report Tracking System

### Due Date Tracking Letters: Tips and Reminders

Because of the important role treatment plan documentation and evaluation reports play in Child Welfare Services client care and case decision making, Optum TERM is responsible for tracking treatment plans and evaluation reports for CWS-referred clients to ensure they are submitted in accordance with the timelines required by the referring agency and Court. During the third week of each month, Optum mails a courtesy “Due Date Tracking” letter to TERM providers with a CWS client on their caseload to assist with keeping track of reporting timelines. The letter provides a list of all CWS clients reflected in Optum records as active (both Medi-Cal and CWS funded), along with the required due date. As part of this process you may receive additional outreach from Optum TERM staff intended to be supportive of your good standing on the network.

If you are having difficulty scheduling a client who has been assigned to you and they appear on the Due Date Tracking letter sent to you by Optum TERM, please contact us at 877-824-8376, Option 1. We can work with you to adjust the scheduled due date based on the client’s first appointment; otherwise, if the client is not going to be seen, we can make a note in the system.

Please note that treatment plan updates are expected for therapy clients even if the client has not been seen or has missed appointments in the reporting period; it is important that CWS receives written documentation about missed sessions and client engagement in treatment.

If you have any questions about this process or about your monthly Due Date Tracking letter, please do not hesitate to contact us at 877-824-8376, Option 1.



# Information and Updates for TERM Providers



## TERM Advisory Board Updates

The TERM Advisory Board meets quarterly to provide professional input regarding the performance of the system and its policies, procedures, and protocols. Discussion over the past quarter has included:

**Coordination of Informed Consent for Dependent Minors:** TERM partners have collaborated to update information pertaining to the consent process for TERM cases. A resource document will be distributed to TERM providers and posted to the TERM Providers section of the Optum website as a resource.

**Continuum of Care Reform:** CWS presented on Pathways to Well-Being and Continuum of Care Reform, mandated as California's ongoing system efforts to improve outcomes for children in foster care. As part of Continuum of Care Reform, the Child and Adolescent Needs and Strengths (CANS) will be administered within 30 days of a new CWS case opening; this is a tool that assesses youth across the following domains: adverse childhood experiences, behavioral/emotional needs, life functioning, risk behaviors, strengths, and caregiver resources and needs.

**Youth Partner Representation on the Board:** Recruitment for a new youth representative is ongoing.

**Provider Representation on the Board:** Providers are currently represented on the Board by:

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

**Paola Wilckens-Gjata, LCSW:** [paolatherapy@yahoo.com](mailto:paolatherapy@yahoo.com)

Please feel free to contact these provider representatives for additional updates from the Advisory Board meetings, or to provide professional or consumer feedback.

# Information and Updates for TERM Providers

## Training Opportunities for TERM Providers

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

**BHETA (Behavioral Health Education & Training Academy)** The County contracts with BHETA based at the Academy for Professional Excellence, a project of the SDSU School of Social Work. BHETA 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 [BHETA@mail.sdsu.edu](mailto:BHETA@mail.sdsu.edu) if you have any questions. You can also contract Provider Services for instructions on how to set up a BHETA Account at 800-798-2254, Option 7. Upcoming training opportunities that may be of interest to TERM providers include:

- [Motivational Interviewing for Justice-Involved Populations \(Course Code BH0229\)](#): Tuesday November 6, 2018, from 8:30am - 4:30pm and Tuesday, November 20, 2018, from 8:30am – 12:30pm or 1:00pm – 5:00pm. Participants will receive 11 CEUs upon completion of all training activities.
- **The Role of the Therapist in Juvenile Dependency - Please Save the Date:** Child Welfare Services (CWS) is offering a free one-day training for TERM Therapists on **March 1, 2019**. Continuing Education Units will be available.

CWS invites you to a day of interaction and training with a San Diego Juvenile Court Judge, CWS County Counsel, Parent and Child Attorneys, Protective Services Workers, Seasoned TERM Clinicians, Optum TERM Clinical Staff, CWS Staff Psychologist, and other Supervisors and Managers with CWS.

The training will include presentations aimed at providing you with knowledge, insights, and experiences as they relate to all of these roles in the Dependency Court process. We will have a mock trial at the end of the day so you can experience what it might be like to be part of a trial for a dependency case.

While the Courts and the Agency set the stage for transformation and change, you are a key player in helping CWS involved clients grow and heal. We would very much enjoy spending a day with you so you can experience the dependency process as a whole and better understand your specific and very critical role within that process.

# Access and Crisis Line Chat Services



## 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 [www.optumsandiego.com](http://www.optumsandiego.com) or [www.up2sd.org](http://www.up2sd.org).

San Diego Access and Crisis Line: (888) 724-7240 / 7 days a week, 24 hrs. a day!



Access and Crisis Line Chat Services funding for services is provided by the County of San Diego Health & Human Services Agency.



Please inform your clients about our available chat services if they need emotional support for their mental health and drug and alcohol needs. The online chat service is available Monday—Friday, 4pm—10pm at: [www.up2sd.org](http://www.up2sd.org) or [www.optumsandiego.com](http://www.optumsandiego.com)

# Be Part of the Solution

## We Need More Like You!!

Optum is looking to expand our Provider Networks! If you know of a licensed therapist or prescriber who may be interested in joining the Fee-For-Service and/or TERM Specialty Networks, or would like additional information, please contact Angelina!

Email: [angelina.noel@optum.com](mailto:angelina.noel@optum.com)

Call: 619-641-6833



## Upcoming Events

### November

Milestones of Recovery Scale (MORS): November 1 (BHETA Course Code: BH0228)

Motivational Interviewing for Justice-Involved Populations: November 6 (Course Code BH0229)

Provider Orientation: November 28

### December

Pathways to Well-Being and Continuum of Care Reform: December 6 (BHETA Course Code: BH0225)

Level of Care Utilization System (LOCUS) 2-day Training: December 4 & 5 (BHETA Course Code: BH0230)

Provider Orientation: December 19

### January

Provider Orientation: January 30

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

Access and Crisis Line: (888) 724-7240

