COUNTY OF YOLO

Health and Human Services Agency

Karen Larsen, LMFT
Director

Meeting Minutes

Date & Time:	Thursday, October 18th, 2018 9:00-10:30am
Location:	HHSA Bauer Building #1600 Thomson Room, 137 N Cottonwood Street, Woodland
Subject:	DMC Organized Delivery System – Substance Use Disorder Services
Organizer:	Ian Evans, LMFT
	Alcohol and Drug Administrator
	Yolo County Health & Human Services Agency

1) **Welcome and Intros: All**

2) **Program Updates and Announcements: All**

   Providers:

   - Marshall from CORE reported that they have submitted an application to become DMC certified to the state; for their West Sacramento facility.

     o Communicare provided updates for their SUD Access Point. They now have a team in place and are able to provide walk-in SUD access in Woodland Monday to Friday,9 am to 4pm and in West Sacramento Monday, Thursday and Friday from 9 am to 4 pm.

   HHSA:

   - SUD Administrator Ian Evans and HHSA QM Analyst Pam Sidhu provided updates on HHSA, Quality Management (QM) and upcoming trainings:

     ➢ **ASAM training**: HHSA will be hosting ASAM training provided by David Mee-Lee on October 31st, 2018 from 8 am to 12pm. More than 40 people have already registered for this training. HHSA has shared provider's question, with David Mee Lee for him to be able to address in the upcoming training.

     ➢ **Motivational Interview training: There is an all day Motivational Interview training that is scheduled for** November 9th, 2018, and is being facilitated by by UCLA.

➢ **RBA training**: HHSA will be scheduling a follow-up training regarding the Performance Outcome Measures. Providers requested the RBA tracking spreadsheet to be provided to them prior to the RBA training.

➢ **Action Item HHSA follow-up**: HHSA to provide RBA Tracking spreadsheet to providers, prior to training date. **Access Line:** Heritage Oaks took over the 24 hours/7 days a week Access Line. If there are any issues, please let Ian know.

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➢ **Cal_OMS /DATAR updates:** Pam Sidhu provided an update regarding Cal-OMS reports for providers. Reports will be tentatively available by Friday October 26th,2018. An email will be sent out to inform providers of completion. Cal-OMS submissions for out of county providers are still on hold, pending set up by the state, affected providers will be informed when entry can proceed. A reminder was provided that DATAR is required to be entered by the 10th of each month.

➢ **Fiscal Trainings**: Fiscal is planning upon providing trainings and/or meetings by Level of Care; so that providers can ask questions.

➢ **Treatment Perception Surveys**: HHSA received 220 surveys in total. Surveys' can still be submitted to HHSA by end of the business day today. Ian Evan, thanked all providers for having these completed. HHSA will be sending the surveys to UCLA for data analysis.

3) **Residential Authorization Forms – New Cover Sheet**

- HHSA Quality Management Clinician, Ann Margaret provided guidance and instructional guides on how to complete SUD Treatment Authorization request forms. The handouts included Substance Use Disorder Treatment Authorization Request Form – Residential Treatment (attachment A) and Substance Use Disorder Services October 2018 (attachment B).

4) **ASAM Level of Care for Residential/Continued Service Criteria**

- Ann Margaret reviewed provided handouts for ASAM Level of Care for Continued service Criteria (attachment B);

- Providers are remained to include the ASAM criteria along with the Authorization form for referral to Residential Services. HSA QM is unable to process residential authorization requests without ASAM criteria

- Guidance was provided about what needs to be completed in documentation when the Level of Care is changing. Providers were advised to mirror ASAM Summaries within the progress note and to include any additional information.

- Ian provided guidance about residential documentation reviews. It is expected that anything identified on an assessment should be included in the client treatment plan as an intervention and should include appropriate Drug Medi-Cal documentation standards.

5) **Re-Authorization/Transitioning Clients**

- Communicare requested clarification regarding process of transitioning a client from Residential to Outpatient and whether they can use an ASAM screening completed by a previous provider. Ian Evans reviewed the process of transition of a client. Guidance was provided regarding:

  - When to go through the Access process and the requirements of completing an ASAM. A client is not expected to contact the Access points when transitioning Levels of Care, and the client is still engaged. When a Level of Care change is made, the expectation is to have a warm handoff.

  - The expectations of Episode Management, when transitioning clients. Providers should discharge the client after a Level of Care placement is made or determined so that the next provider is able to open their episode.

  - Guidelines for when an ASAM needs to be completed and using previous Providers ASAM. An ROI is needed from the last provider to release heir ASAM. However, use of a previous ASAM should NOT be used to determine medical necessity. The client may have experienced changes between discharging of previous program and admission to new program. Verbal consent to release information is not allowed under CFR 42 part 2.

  - Marshall from CORE, shared that he has spoken to Don B from the state for NTP and was informed there shouldn't be any pre-authorizations for NTP; so NTP clients don't need a screening. He was told an Information Notice will be issued by the state.

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6) Episode Management

- HHSA Quality Management Analyst, Pam Sidhu reviewed the importance of Episode Management and the ripple effects when episodes are not opened at the time of admission. Providers were informed episodes should be opened after intake and discharged on the last date of service. Pam provided information regarding how to open a delayed episode and informed providers they will need to use the Backdated Admission/Discharge form.

- Ian shared how ASAM data entered into Avatar is utilized. HHSA is required to compile Level of Care reporting, to UCLA on a monthly basis.

7) Questions: Everyone

- C.O.R.E shared that it is challenging not to have access to monthly payment reports in avatar and would find it useful to have similar reports to those from Sacramento County, and is wanting a way of managing admission and discharges.

  - Carrie from Fiscal, explained that the Daily Transactions reports are issued electronically, with a Charge Adjustment Notice (CAN) that informs providers when there is a denial and the reason. Pam Sidhu, provided information about the possibility of developing Widgets and asked Marshall, if he could provide a list of reports that Sacramento County.

- o **Action ItemHHSA follow-up:** Carrie from fiscal to provide CAN reports and payment details to C.O.R.E (Marshall Stenson)

- o Action Item Provider follow-up: Marshall to send out checklist to Pam for report requests

- o Action Item HHSA follow-up: Pam to review ability to create a census widget.

- Communicare wanted to know when electronic billing would replace Daily Transactions?

  - o Pam shared that a meeting has been scheduled with Julieta to discuss this transition. Pam shared that HHSA will be piloting with two provider to see if electronic billing works.

- Communicare requested if there will be upcoming Avatar system training.

  Pam shared that there are Avatar Orientation training every two weeks on Tuesdays. The next one will be on Tuesday Oct 30th, 2018 from 2- 4 pm in the Madison Room. In addition, HHSA is hosting an Access Log training for Providers on November 2nd, from 2 pm to 4 pm. Invitations will be sent out to all access point providers. Communicare requested technical training regarding episode management for identified staff members. HHSA also clarified that if providers need any SUD training, it can be coordinated.

  - o Action Item HHSA follow-up: Ian and Pam to discuss an Episode Management Training

- Communicare wanted to know how long an ASAM is valid for, when a client does not appear for an appointment? Example: If a client comes through Comunicare ACCESS and got ASAM screening, then they do not show up for next appointment and came back to Communicare after two weeks. Can Communicare use same ASAM screening, how long is that ASAM good for?

  - o In this case, providers do not need to complete another ASAM, they just need to document that they reviewed the previous ASAM and no significant changes occurred.

- Turning Point wanted to know what the expectation and requirement is for tracking, when a client is referred to a program and a warm handoff was not achieved? And wanted to know if we can develop a tracking mechanism to capture these instances?

  - o HHSA clarified that it not a contractual requirement for provider to track whether referrals have been completed.

- Communicare shared concern, since the DMC-ODS waiver, there has been a significant decrease in s perinatal enrollment. Communicare would receive referrals from CWS/CPS and is wondering if Access Points have enough information about this program. They would like to keep the continuum for clients when perinatal (pregnant & parenting woman). Their parenting program is for parents with 0-5 years aged children however, they have served parent s with teen kids as well.

  - o Communicare will connect with Sandy from Progress House to facilitate continuum of care.

- Communicare would like a way for providers to learn about each other's programs.

  - o HHSA has agreed to facilitate a training/meeting where providers can share program information; philosophy and resources, to other SUD providers and Access Points.

- Is there any TLC (Transitional Living Care) within Yolo County?

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Good Conversation	Attendance (2 providers missing)
Problem Solving	Went over time
Training needs discussed	