



Behavioral Health Program News

Applicable to both SMHS and DMC-ODS Programs



Stay tuned for news about Yolo County’s new health records access system, myHealthPointe. This system will allow Yolo County Medi-Cal members to directly access their behavioral health records. In the next few months, QM will be sharing more information about how to get member’s enrolled and registered for access.

Quality Improvement Committee - Save the Date – June 27, 2024 (via Zoom)

BH-QM invites you to the next quarterly Quality Improvement Committee (QIC) meeting – June 29, 2024, from 9am-10am, via Zoom.

The HHSA Behavioral Health QIC is responsible for the overall quality review of all mental health and SUD services provided in Yolo County. Our goal is to review and evaluate the quality and appropriateness of services to beneficiaries and the results of QM activities, pursue opportunities to improve services, and resolve identified problems.

The QIC is comprised of representatives from the following stakeholder groups: consumers, family members, Patients’ Rights Advocate, Local Mental Health Board, QM Program staff, provider and MHP staff, supervisors and managers, and the Mental Health Director. For information and a link to the next QIC meeting please email at HHSAQualityManagement@yolocounty.org.



Yolo County HHSA Code Sorter Tutorial Video Posted

- A brief tutorial on the functionality of the HHSA Code Sorter tool has been posted to the BH-QM webpage, under the “CalAIM” section.
- Click [this hyperlink](#) to launch the video directly.



Navigating the Practitioner Identification Enrollment Process: Avoid Common Errors!

To enroll a practitioner into a Yolo County HHS Behavioral Health program, the Practitioner Enrollment form must be completed in full, signed and dated by all required parties to request a practitioner ID, which is required for billing and claims of direct services.

Below are some of the common errors that will delay your enrollment:

- **Missing Documents:** Please ensure that all supporting documents such as licenses, image of certification/registration, resumes, highest degree earned/diploma, transcripts and so on are included.
- **Incorrect Form/Application is Used:** Depending on the practitioner type/classification an additional form may be needed. For example, the MHW/MHRS practitioner type/classification a completed Enrollment Form and the MHW/MHRS Application are both required for enrollment. A similar process is required for Student Intern Enrollments as well.
- **Incomplete Application and Forms:** When completing the application, all fields should be completed and include the practitioner's signature and the signature of their authorized representative/manager/supervisor.
- **Missing Requirements for Licensed Practitioners:** Evidence of PAVE enrollment and NPDB Self-Query Report required for all Licensed Practitioners (MD, LMFT, LCSW, NPs, etc.) For MDs and NPs the DEA Registration Image is also required.
- **Illegible/Messy Applications:** Completed applications should be easy to read, free of errors, spills, excessive corrections/mark-ups and include all pages of the application.
- **Out of Date NPI Information:** Practitioners should review their NPI Registry to ensure the most up to date information is reflected such as the selected taxonomy. If someone is licensed or waived, the License number should be current.

Yolo County HHS Behavioral Health Quality Management is always available to provide support and clarification on the enrollment process. Please feel free to direct your questions to the Quality Management Inbox at:

HHSQualityManagement@yolocounty.org

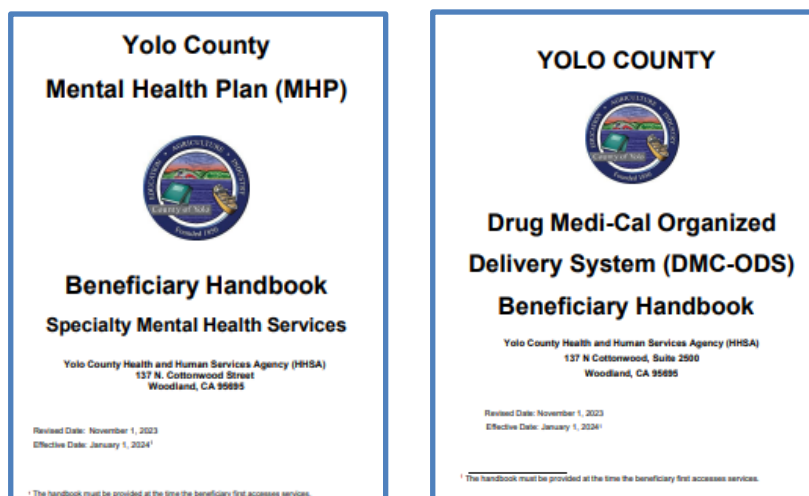
Updated Documentation Requirements for SMHS and DMC-ODS Effective January 1, 2024

- DHCS recently released a new behavioral health information notice (BHIN) outlining updates to documentation requirements for both SMHS and DMC-ODS providers: [BHIN 23-068 Documentation Requirements for SMH DMC and DMC-ODS Services.pdf](#)
- These revised standards went into effect January 1, 2024
- HHS BH-QM has updated SMHS and DMC-ODS documentation policies to reflect the latest BHIN, and these revised policies have been posted to the BH-QM webpage:
 - [5-7-010 Outpatient Specialty Mental Health Services Clinical Documentation](#)
 - [6-7-003 SUD DMC Clinical Documentation](#)

DHCS Payment Reform FAQ's - Updated

- DHCS's Payment Reform Frequently Asked Questions (FAQ) has been updated with claiming guidance for the provider types who are newly eligible to claim for services in the Specialty Mental Health System (SMHS), Drug Medi-Cal (DMC)-Organized Delivery System (ODS), and DMC delivery systems.
- On February 15, 2024, Short Doyle Medi-Cal (SDMC) was updated to accept claims for several new rendering provider types across all three delivery systems, including clinical trainees. Be advised that DHCS notes that while clinical trainees are being entered correctly on the claims using the appropriate taxonomy code or modifiers, none of the claims have included the supervisor's NPI. If the supervisor's NPI is not included, the claim will be denied. Additionally, the supervisor's NPI must be valid and active.
- For more information DHCS's Payment Reform FAQ is located at [CalAIM-Payment-Reform-Frequently-Asked-Questions](#).

2024 Medi-Cal Beneficiary Handbooks for SMHS and DMC-ODS Available Online



- Both the DMC-ODS and SMHS versions of Yolo's Medi-Cal Beneficiary Handbooks have been updated and posted to the [BH-QM website](#)
 - Click the hyperlink above and navigate to the "Documents" header. Select the "Beneficiary Protections and Informing Materials" folder to download the version of your choosing.
- Please share this information with the Medi-Cal members who are receiving services through your program.



Is this information filtering down to your counselors, case managers, and administrative staff?

Please share the Quality News with your staff and keep them in the loop!

Specialty Mental Health Program News



Common Service Codes by Credential – Tip Sheets Posted

- Four new tip sheets have been created to help providers identify the most frequently used service codes by provider type
 - Common Codes – Clinician/Psychologist
 - Common Codes – Prescriber
 - Common Codes – Medical Staff
 - Common Codes – MHRS/MHW
- These tips sheets have been posted to the “CaAIM” section towards the bottom of the BH-QM webpage [Behavioral Health Quality Management | Yolo County](#)

Are you a Waivered or Registered Professional?

It can be difficult identifying the correct designation for practitioners when they are transitioning between different levels of licensure. However, knowing the correct designation is vital for providing services and claiming within Yolo County.

A “Waivered Professional” is defined as: A person who is in the process of obtaining a Psy.D. or Ph.D., is gaining the experience required for licensure, and has been granted a professional licensing waiver by the State of California to the extent authorized under State law. **Yolo County is responsible for submitting the waiver form to DHCS. If this is not done it may result in lost billing for the program.**

A “Registered Professional” (AMFT, ASW, APCC) is defined as: A marriage and family therapist candidate, a clinical social worker candidate, or a professional clinical counselor candidate who has registered with the corresponding state licensing authority for marriage and family therapists, clinical social workers, or professional clinical counselors to obtain supervised clinical hours for marriage and family therapist, clinical social worker, or professional clinical counselor licensure, to the extent authorized under state law.

If you have questions, please contact HHSAQualityManagment@yolocounty.org to determine the correct designation.

Recently Updated SMHS Policies and Procedures (P&Ps)

- The following P&Ps have been recently updated and distributed to providers. They’re also posted on [the BH-QM webpage](#):
 - [5-4-025: Data Exchange and Release of PHI \(Final 1.2024\)](#)
 - [5-1-009: Access and Availability of Services \(Final 2.2024\)](#)
 - [5-6-002: Interoperability and Patient Access/Patient Access and Provider Directory Application Programming Interface \(Final 2.2024\)](#)
 - [5-1-015: Authorization of Inpatient SMHS \(Final 3.2024\)](#)

In the Spotlight:

In this quarter's newsletter we are shining a spotlight on two specialty mental health services *specifically for youth*.



Intensive Care Coordination (ICC) is an intensive form of Targeted Case Management that facilitates assessment of, care planning for, and coordination of services for children and youth. ICC includes urgent services for beneficiaries with intensive needs.

Intensive Home-Based Services (IHBS) is an individualized, strength-based interventions designed to ameliorate mental health conditions that interfere with a child's or youth's functioning. These interventions are aimed at: helping the child/youth build skills for successful functioning in the home and community, as well as improving the family's ability to help the child/youth successfully function in the home and in the community.

A reminder: When documenting services for non-TAY adult clients in Avatar, do not use ICC/IHBS as those services are specifically for youth.

Outpatient Crisis Service Crisis Code Guidance Issued

- BH-QM sent an email to SMHS providers on January 8, 2024, that include a tip sheet for appropriate use of crisis service codes.
- That tip sheet was also posted to the BH-QM web page under the "CalAIM" section
- Use [this hyperlink](#) to access this tip sheet directly

Prescriber Reminder: Definitions of "New" vs. "Established" Patients

- A **new patient** is one who has not received any professional services from the physician or other qualified health care professional or another physician or other qualified health care professional of the exact same specialty and subspecialty who belongs to the same group practice, within the last three years. When advanced practice nurses and physician assistants are working with physicians, they are considered as working in the exact same specialty and subspecialty as the physician.
- An **established patient** is one who has received professional services from the physician or other qualified health care professional or another physician or other qualified health care professional of the exact same specialty and subspecialty who belongs to the same group practice, within the past three years. When advanced practice nurses and physician assistants are working with physicians, they are considered as working in the exact same specialty and subspecialty as the physician.



DMC-ODS Program News

Recently Updated DMC-ODS Policies and Procedures (P&Ps)

- The following P&Ps have been recently updated and distributed to providers. They're also posted on [the BH-QM webpage](#):
 - [6-1-001: DMC-ODS General Requirements \(Final 01.2024\)](#)
 - [6-1-002: SUBG Standards \(Final 01.2024\)](#)
 - [6-5-016: DMC-ODS Scope of Practice Guidelines \(Final 01.2024\)](#)
 - [6-7-002: SUD Medical Necessity and Access Criteria \(Final 01.2024\)](#)
 - [6-5-003: Recovery Residence \(Final 2.2024\)](#)
 - [5-1-009: Access and Availability of Services \(Final 2.2024\)](#)
 - [6-12-002: Adolescent Detoxification Services \(Final 2.2024\)](#)

ASAM Assessments and Changes to Level of Care (tips and reminders)

- ASAM's shall be completed as needed to ensure that beneficiaries receive the right service, at the right time, and in the right place, providers shall use their clinical expertise to complete initial assessments and subsequent assessments as expeditiously as possible, in accordance with each member's clinical needs and generally accepted standards of practice.
- For residential levels of care, a multidimensional level of care screening shall be completed *and signed by an LPHA* within 72 hours of admission to program.
- When a client is assessed and it is determined they need a higher or lower level of care, the program should immediately begin working on a transfer to the appropriate level of care. If there are delays with transferring the client to a different level of care, this should be clearly noted within the chart.

ASAM Criteria Training Update

- ASAM has updated its permissions to enable ASAM Criteria training without any royalty fees. ASAM still requires a licensing agreement but with no fees attached. Interested organizations can learn more on the ASAM Criteria Training Licensing [webpage](#).

ASAM has also released a comprehensive slide deck on the 4th edition of The ASAM Criteria to support organizations in developing training: <https://www.asam.org/asam-criteria/training-consulting> (you can find the link midway on the page).

Upcoming Virtual SUD Provider Meetings

- April 9, 2024, at 9am
- May 9, 2024, at 9am
- June 13, 2024, at 9am
 - Contact Glenn Johnson (gjohnson@yolocounty.org) to obtain more information and the link for these virtual meetings!



Naloxone Distribution Project: Naloxone & Fentanyl Test Strips

- Starting March 19, 2024, DHCS will include the option to request free fentanyl test strips on the Naloxone Distribution Project online application.
- DHCS has appropriated \$6 million in one-time funding to distribute free fentanyl test strips to eligible California entities. This is a limited program.
- Complete the [application form here](#) to sign up.