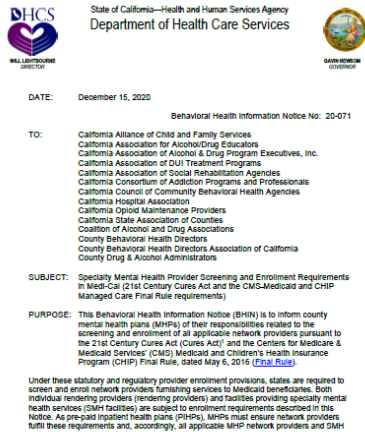


QRTips

Behavioral Health Services
 Authority and Quality Improvement Services
 Quality Assurance & Quality Improvement Division
 AOABH / CYPBH / Managed Care / Certification and Designation
 Support Teams

Provider Enrollment in PAVE

In order to comply with the requirements set forth in the Cures Act and Final Rule mandates, DHCS is requiring all applicable providers within the MHP to enroll in Medi-Cal through DHCS' Provider Application and Validation for Enrollment (PAVE). A memo was recently provided to programs with information on the process to enroll. AQIS will be assisting with the application completion process to ensure all applicable and required information within the application is completed. This process only pertains to the applicable licensed providers identified by DHCS. The applicable licensed providers will be notified by their supervisors of this requirement. All registered and non-licensed providers are not required to enroll in PAVE. Providers required to enroll in PAVE need to provide the requested/required information to AQIS as soon as possible to meet DHCS' due date of enrollment by April 1, 2021. Any newly hired licensed providers or newly licensed providers are also required to enroll moving forward. If you would like more information on the PAVE enrollment requirement, please click the image of the DHCS Information Notice below.



¹ See § 5056(b)(2) of the Cures Act [amending 42 U.S.C. § 1396a-20(b)(6)].

TRAININGS & MEETINGS



AOABH Online Trainings

[New Provider Training
 \(Documentation & Care Plan\)](#)

[2019-2020 AOABH
 Annual Provider Training](#)

AOABH Core Trainers

County Core Trainers Meeting
 WebEx Mtg. 2/4/21 10:30-11:30am

Contract Core Trainers Meeting
 WebEx Mtg. 2/11/21 2-3pm

CYPBH Online Trainings

[2019-2020 CYPBH Integrated
 Annual Provider Training](#)

CYPBH QRT Meeting
 WebEx Mtg. TBD

*More trainings on CYPBH ST website

HELPFUL LINKS



[AOIS AOABH Support Team](#)

[AOIS CYPBH Support Team](#)

[BHS Electronic Health Record](#)

[Medi-Cal Certification](#)

Removal of Assessment Documents in EHR for Non-Licensed Mental Health Professionals (Non-LMHPs) – Effective February 1, 2021

Per the Information Notice 17-040 released by the DHCS on chart documentation requirement clarifications, the diagnosis, Mental Status Exam (MSE), medication history, and assessment of relevant conditions and psychosocial factors affecting the beneficiary's physical and mental health must be completed by a provider, operating in his/her scope of practice under California State law, who is licensed, waived, and/or under the direction of a Licensed Mental Health Professional (LMHP).

Mental Health Specialists/Mental Health Rehabilitation Specialists (MHS) are not able complete the following assessment forms:

- BH Psychosocial
- BH Diagnosis (No change)
- BH Community Functioning Evaluation (CFE)
- Care Plan (CP)
- BH Interim Care Plan (ICP)
- Mental Status Exam (MSE)

Non-Licensed Mental Health Professionals (the non-licensed or non-registered/waivered providers) *are not to complete* the Assessment and Care Plan PowerForms. However, non-LMHPs may continue to *contribute to the assessment* by gathering non-clinical elements of assessment and care planning. The non-clinical elements of assessment and care planning include historical information such as mental health and medical history, substance exposure and use, educational, legal, developmental, cultural and family history. This information can be documented within a progress note for the LMHP to review and incorporate the information in the assessment documents to show how the behaviors or skill deficits are connected to the mental health condition. This information was previously provided to programs in January, March, and April 2020 QRTips.

Effective February 1, 2021, the assessment documents listed above will be removed from the interface of the County EHR for any non-LMHPs. If a non-LMHP has any in-progress assessment documents, they will not be able to make any changes or complete the document after February 1, 2021. Non-LMHPs will still be able to view the information of completed assessment documents by any LMHPs, and should continue to utilize the information during the course of treatment.



Managed Care Support Team (MCST) Reminders

MCST OVERSIGHT

- GRIEVANCES & INVESTIGATIONS
- NOTICE OF ADVERSE BENEFIT DETERMINATION (NOABDS)
- APPEAL/EXPEDITED APPEAL/STATE FAIR HEARINGS
- CLINICAL SUPERVISION
- MHP/SUD DMC-ODS PROVIDER DIRECTORIES
- CREDENTIALING
- ACCESS LOGS
- CHANGE OF PROVIDER/2ND OPINIONS (MHP)

All E-mails must have a subject line indicating what type of subject matter they are referring to (e.g. credentialing, grievance, NOABD, etc.)



CONTACT INFORMATION

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(714) 834-5601 FAX: (714) 480-0775

E-MAIL ADDRESSES

AQISGrievance@ochca.com (NOABDs/Grievance Only)
AQISManagedCare@ochca.com

MANAGED CARE SUPPORT TEAM – STAFF CONTACTS & LEADS

Grievances, Appeals, State Fair Hearings,
NOABDs, 2nd Opinion and Change of Provider



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Telehealth – IRIS Workflow

IRIS considerations for **SDMC EHR** county providers who are providing a Telehealth service, no matter where they or the client is physically located. This would apply in all situations where Telehealth is utilized, even if the client and the provider are both in the clinic and are using the TelePresence machine.

1. In EHR BHS Clinician Pre-Reg (Providers) / EHR BHS Reg (Office Staff), select the following:
 - a. Encounter Type: select Site Visit

The screenshot shows the 'Encounter Information' section of the EHR Pre-Registration form. The 'Encounter Type' is set to 'Clinician Pre-Reg'. The 'Intended Encounter Type' dropdown menu is open, showing options: Clinic Service, Day Service, Field Visit, Home Visit, Site Visit (highlighted in blue), and Telephone. A red box highlights the dropdown menu.

- a. Place of Service: select Telehealth

The screenshot shows the 'Encounter Information' section of the EHR Pre-Registration form. The 'Intended Encounter Type' is set to 'Site Visit'. The 'Place of Service' dropdown menu is open, showing options: Telehealth (highlighted in blue), Probation, Psychiatric Facility-Partial Hospital, Public Health Clinic-Rural, Public Health Clinic-State or Local, School, Skilled Nursing Facility, Southland HC, Telehealth, Temporary Lodging (Motel, Campground, et TL (Theo Lacy Branch Jail), WMA Corrections (Western Med Anaheim), WMA Corrections (Western Med Anaheim), Ambulance - Air or Water, Ambulance - Land, Ambulatory Surgical Center, Birthing Center, Comprehensive Inpatient Rehab Fac, Comprehensive Outpatient Rehab, End-Stage Renal Disease Tx Fac, Federally Qualified Health Center, Hospice, Intermediate Care Fac-Mentally Retarde, Mass Immunization Center, Military Treatment Facility, Mobile Unit, Nursing Facility, Outpatient Hospital, Urgent Care Facility, YGC (Youth Guidance Center), YLA (Youth Leadership Academy), and YLA (Youth Leadership Academy). A red box highlights the dropdown menu.

The screenshot shows the 'Encounter Information' section of the EHR Pre-Registration form. The 'Encounter Type' is set to 'Clinician Pre-Reg'. The 'Intended Encounter Type' is set to 'Site Visit'. The 'Pre-Reg Date' is 01/06/2021 and the 'Pre-Reg Time' is 10:08. The 'Division' is set to 'CYS'. The 'Program Specialty' is set to 'Not Applicable'. The 'Facility' is set to 'CYS WES'. The 'Site/Unit' is set to 'CYS WEST'. The 'Place of Service' is set to 'Telehealth'. The 'Medical Service' is empty.

- b. Access the checked in appointment from your Home page and document the progress note as usual.
- c. Service codes: claim the appropriate CPT service code based upon the service provided.
- d. In the Charge Details window, select the GT modifier, along with any other modifiers that you normally select.

Telehealth – IRIS Workflow Cont.

Charge Details

Provider: Matsubayashi, Chiyo D Location: CYS YRC NORTHu

Diagnosis: Post-traumatic stress disorder, unspecified F43.10

CPT Modifier

<input type="checkbox"/> M99L	<input type="checkbox"/> M99B	<input type="checkbox"/> AG
<input type="checkbox"/> M99K	<input type="checkbox"/> M99A	
<input type="checkbox"/> M99J	<input type="checkbox"/> JW	
<input type="checkbox"/> M99I	<input type="checkbox"/> HQ	
<input type="checkbox"/> M99H	<input type="checkbox"/> GW	
<input type="checkbox"/> M99G	<input type="checkbox"/> GV	
<input type="checkbox"/> M99F	<input type="checkbox"/> GT	
<input type="checkbox"/> M99E	<input type="checkbox"/> GQ	
<input type="checkbox"/> M99D	<input type="checkbox"/> GC	
<input type="checkbox"/> M99C	<input type="checkbox"/> AI	

OK

1. Telehealth services with the client are considered face to face. Telehealth services without the client present are non-face to face.
2. Services provided via telephone (voice only, no video) – continue to select Encounter Type of Telephone.



If you require additional assistance/guidance with choosing the telehealth option within IRIS, please reach out to the BHS IRIS Liaison Team at 714-834-3128 and someone will be able to assist you.

ANNOUNCEMENTS

AQIS would like to welcome Nora Flores, Staff Assistant and Debbie Montes, LMFT, to the department. Nora will be providing support to Kelly Sabet, AQIS Division Manager. Debbie will provide support to the CDSS Team.

The AOABH Support Team would like to welcome Ken Alma, LCSW, who has been promoted to SCII.

The CYPBH Support Team would like to congratulate Asmeret Hagos, LMFT, on her promotion to SCII.

REMINDERS

Service Chiefs and Supervisors:

Please remember to submit monthly updates on program and provider changes for Provider Directory to AOISManagedCare@ochca.com
Please document the review of QRTips in staff meetings. Thank you!

***Disclaimer:** The AQIS Quality Assurance (QA) and Quality Improvement (QI) Division develops and distributes the monthly QRTips newsletter to County and County Contracted Behavioral Health providers as a tool to assist with compliance with various QA/QI regulatory requirements. IT IS NOT an all-encompassing document. Programs and providers are responsible for ensuring their understanding and compliance with all local, state, and federal regulatory requirements.*

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