

Agenda



Electronic Health Record (EHR) MH User Forum

Date: March 23, 2023

Time: 1:00 to 2:30

Location: Virtual using Zoom

Facilitator: Melony Ibarra

Scribe: Sambo Chhoeung

Attendees: (See sign in sheet)

| Topic | Presenter | Start Time | Length |
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| Welcome/Introductions <ul style="list-style-type: none">Zoom meeting overviewSupport/Training Registration Mailbox Name Change. The new mailboxes will be effective starting on May 1st 2023. | Melony | 1:00PM | 5 min |
| Avatar Claiming/Fiscal Update <ul style="list-style-type: none">Claiming Status Update - We are currently claiming for January 2023 servicesClaims Correction Spreadsheet (CCS) – We are currently completing these within 4-6 weeks of submission. We are still experiencing high volumes on submissions due to duplicate submissions. Please use the CCS reference sheet if you have not been using it. This is available on the Avatar website on the claiming tab.Medicare update – We have completed claiming for February 2023 servicesRate updates – Rates are current. If your reports are showing zero dollars, please reach out to your contract monitor.Denial Reports - Please run your Phase II Program Status report, and Manual Postings by Program in order to work your denials.Pre Billing Maintenance - Reminder to run the Pre Billing Maintenance report.Reminders: Just a reminder to enter a valid zip code, even when you enter Homeless in the address. You can use your agency zip code if the client is homeless. Also, make sure you are entering information in the Address 1 line. | Lana | 1:05 PM | 10 min |
| ECM Claiming <ul style="list-style-type: none">Claiming Updates - Submitted October 2022 through | Mike | 1:15 PM | 5 min |

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| <p>January 2023 claims for Managed Care Anthem and are awaiting adjudication</p> <ul style="list-style-type: none"> • Guarantors – When entering new managed care guarantor, please remember that all managed plan guarantors will always start with “managed care”. The Order of the guarantors should always be OHC, Medicare, Managed Care Plan, and MH County funds (G20). • Please use the following guarantors when entering guarantors for Managed Care: <ul style="list-style-type: none"> Managed Care-Aetna (601) Managed Care-Anthem (602) Managed Care-HealthNet (603) Managed Care-Molina (604) • Reminder - Please run your ECM Pre-Billing report frequently. This is a good housekeeping report that helps the claiming process run a lot smoother. | | | |
| <p>Avatar Maintenance and Support Update</p> <ul style="list-style-type: none"> • See Release items | Justin | 1:20 PM | 5 min |
| <p>Avatar Reports/Widgets</p> <ul style="list-style-type: none"> • See Release Items | John | 1:25 PM | 5 min |
| <p>274 Reporting</p> | Justin | 1:30 PM | 5 min |
| <p>CalAIM</p> <ul style="list-style-type: none"> • ECM – We are updating the provider training for ECM and are going to release frequently asked questions. • Open Question Forum - We just sent out a request to ECM providers on dates and times for a recurring monthly meetings to discuss all things ECM and answer questions. Please take some time to complete this survey so that we can get this set up. • ECM Questions: Email BHS-ECM@saccounty.gov • CalAIM Questions: Email AndersenD@saccounty.gov and/or MooreDa@saccounty.gov | Dana | 1:35 PM | 10 min |
| <p>Training Updates</p> <ul style="list-style-type: none"> • ECM Avatar training - ECM training will be scheduled monthly through the end of May. There will not be an ECM training scheduled in June. ECM training is still being determined for the new EHR. • Corrections in EHR Avatar training video - The Corrections in EHR training has now been converted to a recorded video. If requesting staff have completed Practice Management training, they will be sent the link to the training video and quiz when we receive their registration form. Once they pass the quiz, they should reach out to the training registration desk to let us know, then we will | Kat | 1:45 PM | 10 min |

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| <p>update their user account with those permissions once the quiz score is verified.</p> <ul style="list-style-type: none"> Avatar Training Schedule Updates – The last Avatar MH CWS will be held on April 26th and the last MH Practice Management class will be held on May 2nd. Starting in May, once we receive training registration forms, we will be emailing the registered staff the class training materials such as the PowerPoint presentation notes, training guides, link to the tip sheets, training videos and quiz. After they have finished reviewing the training material and pass the quiz, they will need to reach out to Avatar Training Registration to receive their user account log in. In May & June, we will be offering live Avatar Q&A sessions via Zoom with Avatar trainers. CWS Q&A sessions will be scheduled weekly on each Wednesday at 9am. Practice Management Q&A sessions will also be offered throughout May & June starting at 9am. The Practice Management Q&A session will also cover questions regarding Service Request, Scheduler, ECM and Corrections in EHR. All of the Avatar Q&A sessions will be listed on the May & June training schedules. Starting in May, each Wednesday afternoon at 1pm, we will schedule live Order Connect training via Zoom. Staff needing both prescriber and non-prescriber permissions will need to be registered to attend this training. Upcoming User Forums - There are now monthly user forums scheduled through July. The schedules are posted to the webpage. | | | |
| <p>New EHR-SmartCare</p> <ul style="list-style-type: none"> All services provided on July 1st as well as those moving forward will be documented in Smartcare. | Kristi | 1:55 PM | 5 min |
| <p>SmartCare Demo – Service/Note Entry</p> | Justin | 2:00 PM | 15 min |
| <p>Open Forum</p> <ul style="list-style-type: none"> Can users in other system codes run ECM reports in Avatar? – No, only ECM practitioners have access to ECM specific reports. For ECM, the order will continue to be the guarantor for the Managed Care plan 600 and the Mental Health county guarantor 20 correct? – Order listed above. If the client has MediCare, what would be the name for that? – It should be guarantor #5 Medicare B in Avatar. How do we determine if client has Managed Care? Does that show on their Medi-Cal eligibility like for OHC? – Yes it does. Attached is an example of a screenshot of the eligibility. Can you enter more than one EBP in SmartCare? – | All | 2:15 PM | |

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| <p>No, but we are looking into this with CalMHSA.</p> <ul style="list-style-type: none"> • Will there be an easy way for us to see the problem list, since we are linking services with problem list items? – The problem list will be visible with the progress note in the diagnosis tab. You can attach the note to items added to the problem list. And you can add from the Problem List as well. • Where is the training schedule for SmartCare? Is there any face to face or hands on training? – We don't have a schedule for Smartcare training yet. Once CalMHSA is finished with videos, we will decide if additional Sacramento Specific trainings are needed for users. We will be having live Q&A sessions. • Are we able to edit any part of the service information? – You can edit it until you sign the note. You can save it which is like a draft but once you sign it, it will be finalized. • The face to face time is equivalent to what we use as "direct time" correct? – Yes. • Does the Services List Page only show notes you've entered or all services notes that were done on the client's chart? – It will show all of the services and notes depending on how you have it filtered. • Are the reports going to be similar to the reports we have in Avatar - like missing dx, notes without services, dhcs, etc.? – The reports will be different since it is a different system. • Staff who has their own EHR, will we also be using the Smart Care System? – Yes, you will have to enter the services, reporting, billing, and financial in Smartcare just like what is being done in Avatar. • With the notes in SmartCare, will it follow the same rules as Avatar as to what can be edited and what has to be OCD Rd? – We are still working on this. • Do clients' Avatar ID carry over to Smartcare or will everyone's ID change all of sudden on 7/1? - We are bringing over the client's Avatar ID. • When entering a progress note do you need to select an "episode", or is that what the program field is for? – Correct, that is what the program field is for. Program in SmartCare is equivalent to episode in Avatar. • Will progress notes be carried over to the new ehr? – We will only be bringing over the last 10 medication notes and the last 10 non-medication notes. This will come over as a scanned document. • Will there be an append note feature? – There will be | | | |
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something similar to this.

- Will the services/notes show all notes or will there be a report to use to search for notes like the Progress Note One Year in Avatar? – The list page shows all notes and you are able to filter it.
- Can you save notes in draft still? - You can "save" a note without signing it, or you can "sign" it, which finalizes it.
- Are there are 2 steps? One a note is entered then two, a service is entered? – There is one step. There is an equivalent to client charge input and there is an equivalent to progress notes in SmartCare. Services are entered no matter which screen you use.
- Would there still be a way to upload services if we use our own EHR or is it expected to enter one by one? – Yes, we will have a way to do that but we do not have the data elements yet. There will be a different spreadsheet but we will have the ability to do that.
- Will there be a way to review past records and history for repeat or existing clients? – Yes we will still have access to Avatar for 6 months. Zero services are coming over, all claiming for pre 7/1 will remain in Avatar.
- Once the 6 months has passed, what is the plan to address ROIs? – We are still discussing this. Our data will be pulled into a data warehouse but it not in the same system.
- Within those 6 months of still having access to Avatar, will we still be able to input after the July date? – If there was a service missed prior to June 30th, you can still input that information into Avatar. All services starting on July 1st and moving forward will need to be entered on Smartcare or it will not be claimed out to the payer.
- How will UR's be done with no historical data past the last 10 notes? Will we use Avatar and SmartCare to do them? – For UR, we still have access for 6 months. After that, you will be able to coordinate with QM if you have a chart selected and the audit is for services prior to 7/1/23.
- In REPO, we sometimes get asked for historical data. So, 6 months after July 1, historical Avatar data will no longer be available? – The data will be stored in a data warehouse so our REPO team will still be able to have access to that data.
- Will the FE waterfalls transfer over, for those that already have them entered? – We will be bringing over all of the payer but you will still have to go in and

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| <p>enter some information including order.</p> <ul style="list-style-type: none"> • Will there be a deadline to send in CCS's for denials for services 6/30/23 and prior? – It is the normal deadline. We will continue to have corrections in Avatar for quite some time so it would not be anything different. • Since the reports will be changing, will there still be a way to pull a report to show all notes still in Draft for our employees, as well as the production for the day/month? – There is not a draft in SmartCare. There are a lot of reports that are in the system and we are still working on the best ones to use. • What happens if the auto filled financial waterfall didn't put it in the correct order? Can we change it ourselves? – The system will allow you to change it yourself but it should be in the correct order. If something is wrong, please reach out to the billing team. • How will modifiers be entered? – It will be done in the background. The system will recognize the modifier and pull it based upon the program and client information. • Is the Financial Eligibility is not episodic in SmartCare? - It is not episodic. Financials are entered at the client level. • For the items not signed, does that have to be found by each client, or can we pull that info for all staff at once? – We are still looking into the functionality of reports and list pages. • If the Financial Eligibility isn't episodic, couldn't the start date cause issues for clients open to multiple programs? – This is something that we need to test and will discuss internally with CalMHSA. • Will the progress notes have the templates that Avatar currently has? – There is a template functionality so we will be working with QM and Programs to pull all templates that are needed. • Do duplicate modifiers apply to services that have the same HCPC codes in CalAIM? – With CalAIM, they don't have the same rules so some of the duplicate modifiers will no longer apply. • So what about signed progress notes entered for incorrect client or date, etc.? – This is part of the corrections process and we are still working on testing this. | | | |
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Eligibility Message: SUBSCRIBER LAST NAME: [REDACTED] EVC #: 425G1DM3MT. CNTY CODE: 34. PRMY AID CODE: 60. MEDICAL ELIGIBLE W/ NO SOC/SPEND DOWN. HEALTH PLAN MEMBER: PHP-ANTHEM BLUE CROSS: MEDICAL CALL (800)407-4627. ACCESS DENTAL PLAN: DENTAL CALL (877)821-3234. PART B AND D MEDICARE COV W/MEDICARE ID # [REDACTED]. MEDICARE PART B COVERED SVCS MUST BE BILLED TO MEDICARE BEFORE BILLING MEDI-CAL. MEDICARE PART D COVERED DRUGS MUST BE BILLED TO THE PART D CARRIER BEFORE BILLING MEDI-CAL. CARRIER NAME: ENVISION RX PLUS. COV: R.

Subscriber Name: [REDACTED]

Subscriber ID: [REDACTED]

Submitted ID: [REDACTED] Subscriber ID Updated

Subscriber Birth Date: 03/13/1957

Issue Date: 08/23/2022

Primary Aid Code: 60

First Special Aid Code:

Second Special Aid Code:

Third Special Aid Code:

Responsible County: 34-Sacramento

Medicare ID: [REDACTED]

Primary Care Physician Phone:

Service Type: R

Service Date: 07/01/2022

Trace Number/Eligibility Verification Confirmation Number:
425G1DM3MT