

# AGENDA



## Avatar SUPT Implementation User Forum

**Date:** March 24, 2021

**Time:** 2:00-3:30 PM

**Location:** Virtual using Skype

**Facilitator:** Melony Ibarra

**Scribe:** Sarah Saldivar

**Attendees:** (See sign in sheet)

Topic	Presenter	Start Time	Length
<b>Welcome/Introductions</b> - Skype meeting overview	Melony	2:00 PM	5 min
<b>Claiming/Fiscal Update</b> - <b>Claiming Status</b> – Working on January 2021 claims. - <b>Claims Correction Spreadsheet (CCS)</b> – Being processed as they are received - <b>Practice Management one-on-one virtual sessions by appointment</b> – Email <a href="mailto:Avatar-Fiscal@saccounty.net">Avatar-Fiscal@saccounty.net</a> for any questions or to schedule a one-on-one appointment. Next session is on 4/7/2021 - <b>NTP ONLY requirement to bill Medicare-Effective 3/9/21</b> – DHCS will deny NTP services if Medicare has not been billed prior to billing Medi-Cal. This applies to Medi-Medi clients. <ul style="list-style-type: none"> <li>o Currently holding claims to Medi-Cal while system is being updated to bill Medicare               <ul style="list-style-type: none"> <li>▪ Awaiting information from state before this can be implemented.</li> </ul> </li> <li>o Quality Management is working to get Sacramento County NPI certified with Medicare.</li> <li>o Billing Team is working with other Counties and Netsmart to ensure Avatar can accommodate coordination of benefits.</li> <li>o Providers need to enter Medicare as a payor in Financial Eligibility if applicable by early May.               <ul style="list-style-type: none"> <li>▪ Medicare Guarantor is Medicare Part B (5)</li> </ul> </li> <li>o Question about Medicare payments.               <ul style="list-style-type: none"> <li>▪ Sacramento County will be billing Medicare on behalf of the NTP provider.</li> <li>▪ Sacramento County will still pay up front at the Medi-Cal rate. Once we have the ability to claim there may be reconciliation of payments. Working on receiving rates, classifications and service codes.</li> <li>▪ More information will be available once we</li> </ul> </li> </ul>	Karen/ Melony	2:10 PM	10 min









<p>receive information notice from the state.</p> <ul style="list-style-type: none"> <li>- Question about patient denials: <ul style="list-style-type: none"> <li>o Requested patient information be sent to <a href="mailto:Avatar-Fiscal@saccounty.net">Avatar-Fiscal@saccounty.net</a>.</li> </ul> </li> <li>- Question about denial codes not listed on the Avatar claiming website: <ul style="list-style-type: none"> <li>o E-mail <a href="mailto:Avatar-Fiscal@saccounty.net">Avatar-Fiscal@saccounty.net</a> with the code. Billing team will reach out to the state to find out the reason and request update to the Claim Adjustment Reason code.</li> </ul> </li> </ul>			
<p><b>Maintenance and Support Update</b></p> <ul style="list-style-type: none"> <li>- <b>Release items</b> <ul style="list-style-type: none"> <li>o <b>Clinical Pathways</b> – Some client names and IDs will display as different colors and icons will appear in the chart view.</li> <li>o These are alerts entered by MH programs. A document with the legend is attached to meeting minutes.</li> <li>o Substance Use providers aren't unable to enter anything in Clinical Pathways.</li> </ul> </li> <li>- <b>Avatar team is working with program to obtain at least 1 signature pad per site.</b> <ul style="list-style-type: none"> <li>o There is the ability to use mouse to sign client plans.</li> <li>o Preferences &gt; General &gt; Use mouse or touch for signatures – click apply to activate.</li> </ul> </li> <li>- <b>Service Entry for providers using Avatar as their EHR ONLY</b>– All Medi-Cal services are entered via Progress Notes for those agencies using Progress Note Entry. Staff no longer need to enter services via Client Charge Input or Recurring Client Charge Input every month unless there is a correction made. <ul style="list-style-type: none"> <li>o Modifiers cannot be entered via Progress Note Entry. Staff who attend the SUPT Practice Management class are still required to enter modifiers on services when appropriate.</li> </ul> </li> <li>- Question asking if Service Request form can be pared down. <ul style="list-style-type: none"> <li>o This form cannot be shortened since it is used by Mental Health providers as well.</li> </ul> </li> </ul>	Melony	2:20 PM	10 min
<p><b>Reports/Widgets</b></p> <ul style="list-style-type: none"> <li>- <b>Release items since last User Forum</b></li> <li>- Question on whether modifiers for case management can be hardwired. <ul style="list-style-type: none"> <li>o Due to number of modifiers case management modifiers will not be hardcoded.</li> </ul> </li> </ul>	John	2:30 PM	10 min
<p><b>Care Quality Demo</b></p> <ul style="list-style-type: none"> <li>- CareQuality Console is LIVE as of 3/25/21</li> <li>- Allows for Continuity of Care Documents (CCD) to be shared between agencies that participate in the CareQuality Network.</li> <li>- Due to 42CFR, SUPT related information is not displayed.</li> <li>- Documents that are saved will be displayed in the client's chart in the "Documents" section in the "Continuity of Care Document" folder.</li> </ul>	Celia	2:40 PM	10 min

<ul style="list-style-type: none"> <li>○ These will be saved as Non-Episodic and can be moved into the program episode using the Clinical Document Viewer.</li> <li>- Tip sheet will be available on the Avatar training website.</li> </ul>			
<p><b>Program Update</b></p> <ul style="list-style-type: none"> <li>- <b>Cal-OMS errors</b> – Continue running reports for missing data, and cleaning up any open admissions that are sent through BHIS system.</li> <li>- <b>SUPT CWS went LIVE 3/1/21</b> <ul style="list-style-type: none"> <li>○ Progress Notes, Adult Health Questionnaires and Client Treatment Plans are only to be entered for DMC eligible clients. <ul style="list-style-type: none"> <li>▪ More information will be sent out via e-mail.</li> </ul> </li> <li>○ CalOMS and SUD Assessment are still required for all County clients.</li> </ul> </li> <li>- NTP providers’ annual updates only need to be completed for the current year.</li> </ul>	Ed	2:50 PM	10 min
<p><b>Training Update</b></p> <ul style="list-style-type: none"> <li>- <b>All trainings are being offered via Skype for Business</b> <ul style="list-style-type: none"> <li>○ Training Registration forms must be submitted at least 2 full business days prior to the training date.</li> </ul> </li> <li>- <b>Training Schedule</b> <ul style="list-style-type: none"> <li>○ <b>SUPT CWS –</b> <ul style="list-style-type: none"> <li>▪ If you would like diagnosis permissions for your staff, check “Add Diagnosis permission” box in Section 3 of the training registration form when registering staff for training.</li> <li>▪ Training is held from 9am – 5pm and users must attend all day to receive permissions. <ul style="list-style-type: none"> <li>• Providers who use their own EHR will only stay for the first half of the training.</li> </ul> </li> <li>▪ Access to the Adult Health Questionnaire, Progress Notes, and Client Treatment Plan will be granted if the agency uses Avatar as their EHR, the staff stays all day for training and passes the quiz.</li> </ul> </li> <li>○ <b>Provider Service Request</b> – All agencies should have someone attend this training. <ul style="list-style-type: none"> <li>▪ No limit on how many users can attend, but only those enter service requests need to attend.</li> </ul> </li> <li>○ <b>Order Connect (non-prescriber)</b> – Agencies using Avatar as their EHR need to attend to have access to enter client reported medications and allergies. <ul style="list-style-type: none"> <li>▪ Typically only a few staff members per agency have these permission.</li> </ul> </li> <li>○ <b>Correction in EHR</b> – For providers that enter Progress Notes in Avatar. At least 2 users per agency should attend this training. <ul style="list-style-type: none"> <li>▪ This training teaches how to reattach a progress note to a service or how to void a progress note.</li> <li>▪ Only 2 users per program can have access to void notes.</li> <li>▪ Check “add vote note permission” box in</li> </ul> </li> </ul> </li> </ul>	Kat	3:00 PM	10 min

<p>Section 3 of the training registration form for users that should have access to void notes.</p> <ul style="list-style-type: none"> <li>▪ Attendees must attend SUPT Practice Management prior to attending.</li> <li>○ SUPT Practice Management – <ul style="list-style-type: none"> <li>▪ Training is held from 9am – 5pm and users must attend all day to receive permissions</li> </ul> </li> </ul> <p>- <b>Clinical Workstation one-on-one virtual sessions by appointment.</b></p> <ul style="list-style-type: none"> <li>○ For CWS one on one clinical support, Email <a href="mailto:AvatarTrainingRegistration@Saccounty.net">AvatarTrainingRegistration@Saccounty.net</a> to request an appointment.</li> <li>○ For billing related questions, reach out to <a href="mailto:Avatar-Fiscal@saccounty.net">Avatar-Fiscal@saccounty.net</a> to request an appointment.</li> </ul> <p>- <b>Tip Sheets available on our website located under the Training section.</b></p> <p>-</p>			
<p><b>Project Update</b></p> <ul style="list-style-type: none"> <li>- <b>Avatar NX</b> –Estimated to move to this new platform in 2021.</li> <li>- Submit any widgets or reports you would like to see in Avatar NX to <a href="mailto:Avatar@Saccounty.net">Avatar@Saccounty.net</a>.</li> <li>- Question on if additional training will be required for NX Platform. <ul style="list-style-type: none"> <li>○ Avatar does not believe so at this time. More information will come once we have received information on NX from Netsmart.</li> </ul> </li> </ul>	Kristi	3:10 PM	5 min
<p><b>Open Forum</b></p> <ul style="list-style-type: none"> <li>- <b>Will NTP providers using their own EHR be required to stay for full day CWS session?</b> <ul style="list-style-type: none"> <li>○ No, these users will be dismissed half-way through the training</li> </ul> </li> <li>- <b>If you attend CWS all day training will you gain access to the Client Plan and Adult Health Questionnaire?</b> <ul style="list-style-type: none"> <li>○ Yes, only if you are from an agency that uses Avatar as their EHR, have stayed the entire day, and have completed the SUPT CWS quiz.</li> </ul> </li> <li>- <b>Question about the CalOMS Missing Admission Report</b> <ul style="list-style-type: none"> <li>○ Effective 3/25/21 will be updated to indicate if sexual orientation question is missing.</li> </ul> </li> <li>- <b>Question about who to contact for CalOMS issues.</b> <ul style="list-style-type: none"> <li>○ Monica Castillion <a href="mailto:castillonm@saccounty.net">castillonm@saccounty.net</a> is the point of contact for CalOMS specific issues.</li> </ul> </li> <li>- <b>Question on how far back an agency should CalOMS issues need to be addressed.</b> <ul style="list-style-type: none"> <li>○ All CalOMS errors beginning 12/1/2019 will need to be addressed.</li> <li>○ Issues with admissions will cause issues with annual updates and discharges as well.</li> </ul> </li> <li>- <b>Question on long standing patients that are missing CalOMS admission in Avatar.</b> <ul style="list-style-type: none"> <li>○ These are case by case situations and should be sent to Monica Castillion.</li> <li>○ Clients that have been converted into the new system and have a form serial number should be able to complete annual updates.</li> </ul> </li> <li>- <b>Do admissions have to be flagged for resubmission if they are missing the sexual orientation question?</b> <ul style="list-style-type: none"> <li>○ Yes if the Cal-OMS has already been compiled in</li> </ul> </li> </ul>	All	3:15 PM	15 min

<p>Avatar or sent to DHCS. Any time you make an update regarding missing items you have to select Yes for "Flag for Resubmission" in the CalOMS admission, CalOMS Annual update and CalOMS discharge. The form will only allow you to flag for resubmission if it has been compiled in Avatar or sent to DHCS. The form would then need to be submitted.</p>			
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## Clinical Pathways

Pathway	Color	Icon	Action Required	Reason for Discontinued Use
Suicide Risk	Red		A Safety Plan must be put into place and added to the non-episodic tab	Discontinued when the beneficiary is no longer at risk and/or a clinical assessment determines the risk is no longer present
Emergency Room Admission	Red		Outreach attempts and care coordination must be documented in the beneficiary's record	Discontinued when beneficiary discharges from the emergency room
Danger to Self or Others	Red		A Safety Plan must be put into place and added to the non-episodic tab	Discontinued when the beneficiary and/or others are no longer at risk and/or a clinical assessment determines the risk is no longer present
Medical Alert	Yellow		Coordination with beneficiary's medical provider must be documented in the record	Discontinued when the medical condition is no longer present
Behavioral Alert	Yellow		A Safety Plan must be put into place and added to the non-episodic tab	Discontinued when the beneficiary is no longer at risk and/or a clinical assessment determines the risk is no longer present
Acute Psychiatric Inpatient Admission	Blue		Document care coordination between the hospital and linked provider(s)	Discontinued when beneficiary discharges from an inpatient psychiatric hospital
High Utilizer/ IMD 3+	Green		A Community Care Plan document must be added to the non-episodic tab	Discontinued when there are more than six months since last acute psychiatric hospital admission
Interpreter Needs	Purple		The beneficiary's primary language must be identified in the non-episodic tab	This would never be discontinued unless the beneficiary indicates it is no longer needed