Agenda

Avatar MH Avatar User Forum

Date: September 26, 2019
Time: 1:00 to 2:30
Location: 7001 A East Parkway,
Sacramento, CA 95823
Conference room 1

Facilitator: Ann Mitchell

Scribe: Stacey Callahan & Sarah Saldivar

Attendees: (See sign in sheet)

Topic	Presenter	Start Time	Length
Welcome/Introductions	Ann	1:00PM	5 min
Claiming/Fiscal Update • Claiming Status Update – Working on claiming June 2019 services currently. • Providers should receive an email at the beginning of each month as a reminder to work their pre-billing reports. • Claims Correction Spreadsheet (CCS) – The Billing Team is caught up on Claims Corrections. • Medicare update – Beginning January 2020 HICN will no longer be accepted. You will have to use the MBI number. Richard advised providers to go into Financial Eligibility to change HICN to the MBI number under Medicare Guarantor. You do not need to change HICN for clients that have been discharged unless there are services that need to be claimed. • Duplicate Avatar IDs – Billing team has noticed an increase in duplicate Avatar IDs. Please do your due diligence to search for a client before creating a new Avatar ID.	Richard	1:05PM	10 min
Review Release Items • Changes were made to various reports based on requests from the last User Forum. John reviewed those changes with the forum. All release items will be posted to the Avatar Implementation website under the Release Information section on the Support Tab. • The Client Charge Input and Edit Service Information forms will be updated to add language and translator options so that they will have the same fields as Progress Note Entry. More communication will come out about this. • New form "MHTC TB Questionnaire" for MHTC was created	John/Melony	1:15PM	15 min

to track the TB tests that are done there.			
Console Demonstration • System Code Admits Console – The console is viewable in CWS and PM views. It shows any client who was admitted under your system code within the last 90 days that does not have an assigned Service Coordinator in Additional Episode Information. Console has ability to sort by program. You can only do one filter at a time, you cannot cascade into multiple filters. • Service Coordinator Console feedback – John requested feedback from providers on what widgets may be helpful to add to console to assist in managing caseload.	John	1:30PM	10 Min
Service Request 2.0 updates • Under Requested Action on the Service Request 2.0 form requests for TBS services and psych testing services have been split into initial and reauthorization. Also added “Duplicate Request” as a requested action • Changes have been made to the TBS and Psych testing tabs. If you choose a TBS or Psych testing requested action type, the corresponding tab will then have red and required fields. Make sure you are selecting the correct requested action type before entering information. Due to the change in logic, if you change the requested action type, the previous red and required fields will stay red and required. There is no way to remove these, you will have to close that form and open a new form and will lose all data you have already entered. • There was a request from a provider to have access to see the TB tests that were performed in the new MHTC form . This form was specifically created for MHTC. Melony will take this request back to the Avatar team to see if it is possible to add. o Since the form will be completed in the MHTC episode other providers will not have access to this data, however it may be possible to request this information when we implement the Care Connect Inbox.	Melony	1:40PM	10 Min
Training Update- • M Modal Training – M Modal training lasts 1-2 hours and registration process is the same. We recommend listing at least two possible dates on the form in case one is already booked. In September & October we are training only doctors, but will be opening to clinical staff in November. There have been a lot of no shows for training, please remind your staff when they are scheduled for class. • Scheduled Class Times – Reminder that CWS and PM trainings start at 9AM and end at 5PM, with few exceptions.	Kat	1:50PM	10 min

Trainees are receiving wrong information and being told the training is only half day. We cannot activate user accounts until they come back and finish the training.
 	
• Drop in session changes – Changed to now offer both clinical and/or billing assistance at our Micron location They are typically the 2nd Tuesday of the month, and we have extended the hours from 1pm – 4pm. No registration necessary, attendees are assisted on first come first serve basis. Refer to the Avatar training schedule for specific dates and times.
 	
• Registration
    o 2 Business days prior to class – Reminder that training registration forms need to be submitted at least 2 business days prior to the date of the class. Most forms being are being sent in with plenty of advance notice, but we may not be able to accommodate last minute requests.
    o Prescriber changes – Users who prescribe and attend CWS class and are trained as a prescriber in Order Connect are now required to have their registration with QM completed prior to Avatar training, effective immediately.			

Project Updates
- **E-Prescribing (Controlled Substances) –** Still on the roadmap, but focus will be on implementing Interoperability modules for information sharing first.
- **Interoperability –**
    o **Care Connect Inbox –** This module will give the ability to communicate with other providers inside and outside of the Sacramento County MHP. The Avatar Team will be having training from Netsmart soon.
    o **CareQuality –** This module will allow health information exchange with other EHRs including hospitals. The Avatar team had their Netsmart training yesterday. We will be doing some testing prior to rolling it out to the MHP.
    o **E-Labs with Quest –** Out of pilot phase, will be meeting with APSS Clinic to help develop training to use across the system. Will be rolled out slowly by provider, starting with MHTC. Will send communication on how to sign up. This will cause a significant change in provider processes.
	Ann	2:00PM	10 min

Open Forum • Service request 2.0 dispositions – There was a question on	All	2:10PM	20 min

which urgency type is correct. Some requests that the providers choose routine and priority come back from Access with an urgent type. Erin explained that if the Access clinician feels the service request should be a higher level, they will change that urgency type. • Referral date – There was a question about which date to use as the correct admission date, the pre-admit date or episode date. The date used should be the date of admission into your episode. • Progress note entry location – The location default is currently set to 'unknown'. A provider asked if this default could be left blank. We are unable to leave this field blank, or make it red and required. • Billing team reminded providers to please enter in a zip code under the Update Client Data form for the client's address.			