Agenda

Avatar MH Avatar User Forum

Date: July 25, 2019
Time: 1:00 to 2:30
Location: 7001 A East Parkway,
　　　　　Sacramento, CA 95823
　　　　　Conference room 1

Facilitator:　　Melony Ibarra

Scribe:　　　　Stacey Callahan

Attendees:　　(See sign in sheet)

Topic	Presenter	Start Time	Length
Welcome/Introductions	Melony	1:00PM	5 min
Claiming/Fiscal Update • Claiming Status Update – Working on claiming May 2019 services currently. • Providers should receive an email at the beginning of each month as a reminder to work their pre-billing reports. • Providers should be running the Phase II (Program/Client) Charge Status report to work denials. • Claims Correction Spreadsheet (CCS) – The Billing Team is caught up on Claims Corrections. There have been a lot of errors on the Claims Corrections Spreadsheets. If there are errors on the spreadsheet then it will be sent back to the provider to correct and they will have to re-submit. • Medicare update - Billing Team will be claiming to Medicare for July 2019 services for all providers. Claiming ETA will be one month out. • Question- Are providers going to have Medicare support? Rob O'Connell in QM can support providers with filling out the Medicare paperwork. If there are any questions on the Medicare website they will have to contact Medicare directly. • Clients are still required to fill out an UMDAP even if they have Medicare. • Question- Will there be a website available to verify if a client has Medicare? There are websites available to verify this information. Agencies will be responsible for purchasing this	Richard	1:05PM	10 min

service.			

Review Report Requests
• John reviewed the reports that providers have requested updates on. The reports that were reviewed were:
   - Active Client FIF: Request to use origination date rather than scan-in date. Will follow up with QM.
   - Active Client Final Assessment Report: Suggestion to remove episode and add age. Some folks would like this change others want the report to stay as is.
   - Active Client Psychiatric Assessment: Request to red flag the date. We cannot make the date a required field, but we can flag it as a reminder.
   - Client Services (Weekly): Request to add the option to select a practitioner, so that you can only see your own.
   - Clients Active in Multiple Programs: Can we restrict viewing? Yes, this would be a process. We would have to define user roles for all Avatar users.
   - Current Client Address Report: Can this be done for a date range prior (can you look up the clients address history)?
   - Detailed Outpatient Census New: Can we add episode information and a summary which includes the average length of stay and clients that have been admitted past 180 days.
   - EBP Service by Program: Can we add face to face?
   - Fiscal Year Summary: Can we add service codes as visit codes? We will have to go to Program to re-identify appropriate service codes if not face to face with the client.
   - Request for a program and staff based report that pulls 10% of each staff member's progress notes at random. This would be useful for IURs. This can be done by a percentage or a set number, but because they are pulled at random it cannot be guaranteed that there will be no duplicates pulled.
   - Request for a report that shows Client Plans left in draft or pending approval. The Active Client Plan and Core Assessment Report can be modified to include parameters to only show the Client Plan.
   - Request for a report that shows progress note timeliness. Staff summary that shows how many days it took to complete the note.
   - Request for report that shows progress notes
	John	1:15PM	10 min

filtered by the date of service rather than the data entry date. - Provider Service Report: If there is space can we add last medication appointment? - Services with no Diagnosis: No changes can be made to this report. Billing uses it when removing Medi-Cal non-billable services. - Request for a summary report for programs with multiple sites. - Missing CSI by Program: Request to separate the billable from non-billable. The problem lies in defining which services not to count. We will also still need a way to catch them if not completed. • John will look at the speed of some of the reports, as they have not been updated in a while.			
Progress Note Update- The updates will go Live July 26th. The updates include: • EBP is now red but not required. The system is unable to make it a required field, but all CSI must be filled out since it's a state requirement. It is okay to choose unknown in this field if appropriate. • Referrals Completed – Linkages was added to the regular progress note. They were only used for crisis notes in the past but now some programs are required to collect this information with each service provided. Check with your Contract Monitor to see if this is a requirement for your program. • There are more options to choose from in the Group Type. • Unused sections have been removed from the form. **Service Request 2.0 Update-** The updates will go Live July 26th. The updates include: • The Requested Action list has removed and added several options including Initial Request – New Client and Initial Request – Existing Client. These 2 new options will replace Initial Authorization and should only be used if you are a program that does your own admissions and the client is in need of an initial request. • A widget has been embedded in the form to help determine if a client is a new client. A new client is defined as any individual who has not received a Medi-Cal reimbursable Specialty Mental Health Service within the last 3 years. The widget will show if the client has had any services in the last three years, but the provider will have to verify that they services were Medi-Cal reimbursable Specialty Mental Health services. • The information on the widget can also be found on the Avatar console Client Admin from the Avatar homescreen.	Melony	1:25PM	15 min

CSI Assessment – Go LIVE 7/1/19 • Updates are still being made. • Question: Will there be a report in the future to monitor CSI? Send a request to the Avatar box so we can look into it. • Question: What is the timeline for completing this form? This is a Live form. It should be completed as the information is received. • If you complete the form and you shouldn't have, contact Access. If Access didn't complete their part of the form and should have contact Erin McClure. • The closure reasons do not match the reasons listed in discharge because we are capturing a different data elements. The state is tracking the reason for closure in the CSI form and the county is tracking reason for discharge on the discharge form. • This form is only used for new clients who have not received Medi-Cal reimbursable Specialty Mental Health services in over three years.	Melony/Pam	1:40PM	10 min
Training Update- • MH and ADS specific trainings- Make sure to specify which training you are registering for, mental health or ADS. • Update to the Avatar Account/Training Registration form- Make sure you are using the most current registration form on our webpage. We will be changing our requirements for the advanced notice we will need for training registrations. Registrations must be submitted at least two full business days prior to the requested training date. • Authorized Approvers – Authorized approvers please forward confirmations to trainees. Trainees are receiving the wrong information and arriving at the wrong times and getting lost trying to find our location. Our address and a link to a map to the training facility are listed on the confirmation as well as the class start time.	Kat	1:50PM	10 min
Project Updates - **MModal-** Early Adopters have been using the module for over 2 months now. We are looking to start training more users in September 2019. We will be sending out emails to the authorized approvers to get an idea of training needs. If the training need is high we may prioritize doctors first. The equipment is not included. We will train staff with our equipment, but agencies will need to provide staff with a microphone once staff begin use. - **E-Prescribing (Controlled Substances) –** Hoping to roll out in 2nd or 3rd quarter of FY 19-20. - **Interoperability –**	Melony	2:00PM	10 min

○ **Care Connect Inbox-** In the beginning phases of testing. ○ **CareQuality-** Network health information exchange, other EHRs have joined. We would be able to get responses back on our clients from other networks serving our clients. - **CANS 50/PSC 35 –** Import/Export functionality should be fixed next week. Netsmart is still working on system code security for the PSC35.			
Open Forum	All	2:10PM	20 min