Electronic Health Record (EHR) SUPT User Forum



Date: March 26, 2025 Time: 2:00-3:30 PM Location: Virtual using Zoom

Facilitator: Melony Ibarra

Scribe: Chean Chheng

Attendees: (See sign in sheet)

Торіс	Presenter	Start Time	Length
Welcome/Introductions	Melony	2:00 PM	5 min
Zoom meeting overview			
 Zoom meeting overview Agencies attended: River City Recovery SSYAF CORE Wellspace Aegis Treatment Bridges Sacramento Recovery House Hope Coop Associated Rehab Avatar contract ending 6/30/25. Please make arrangements if there is information that still needs to be pulled from Avatar. Any services that are in Avatar are too late to correct and no corrections should be made. Do not use test clients in live SmartCare environment. If testing is needed, please reach out to the Training Registration Team and they can create an account for you in the training environment which has test clients within. New Agenda Item for future User Forums: Provider Topics Support/Training Registration and Billing Mailboxes Support: BHS-EHRSupport@saccounty.gov 			
 Training Registration: <u>BHS-</u> EHRTrainingReg@saccounty.gov 			
 Billing: <u>BHS-EHRBilling@saccounty.gov</u> 			

CalAIM	Darlene	2:05 PM	5 min
 The next Collaborative Resource Roundtable is on 4/23/25: Fentanyl Awareness. The next ECM Provider meeting is 4/3/25 at 9:00 A.M. We will have a special presentation from a Community Support medically tailored meals provider: Foodom. Please see their attached flyer. The next ECM training 4/3/25 @ 1:00 pm Medi-Cal Claiming/Fiscal Update Claiming Updates – Completed claiming January 2025 services that were ready to be claimed. Denials—Make sure you run your program reports and work on the denials. Claims Correction Spreadsheet (CCS) - currently being completed in 8 weeks after date received. Please allow us time to process these as they require extensive research. Please remember to run error reports and correct the errors. Services with errors will not be claimed. Client Information Screen - If one of the Client Contacts is a subscriber, make sure in the Contacts tab DOB, gender and address are entered. For Medi-Cal the client is always the subscriber. 	Darlene Karen	2:05 PM 2:10 PM	5 min 10 min
•			
 ECM Claiming Update SmartCare Claiming Updates - Claims have been submitted through September 2024 for Healthnet and Anthem. Make sure to run your ECM & (SAC) Reports in SmartCare regularly, which will help find and clear errors. Entering Managed Care Payors- All ECM Payors will have "Managed Care" in the name, be sure to use those. Entering ECM Programs- All SUPT ECM programs begin with "ZZ_ECM" Entering ECM Procedure Codes- ECM procedure codes will begin with ECM and end with the managed care plan name. 	Mike	2:20 PM	10 min

SmartCare Support	Justin	2:30 PM	10 min
 Reminders Please reach out to us for support questions at <u>BHS-EHRSupport@saccounty.gov</u> Removing Auto-filled Passwords from your Web Browser Tip Sheet – A tool we created on our support page under technical support for SmartCare is a tip sheet to remove autofill passwords from your web browser. Notifying the EHR Team and QM when staff are terminated- This will ensure that we have removed their permissions and access to SmartCare, and we are no longer including them in State reporting if applicable. Notifying the EHR Team when a program closes - Please notify the EHR team and your contract monitor when a program closes. We want to make sure that we have accurate reporting. Contact Notes "See Release Items" Added Closed Loop with MCP to the Contact Reasons dropdown 			
 Closed Loop Referral Demo When a client receiving services from the Manage Care Plan (MCP) needs a step up in services, the MCP can request services from BHS SAC. Once the client is fully linked to the program, the provider will then notify the MCP outside of SmartCare and close this loop in communications. This communication will need to be documented on the Contact Notes (My Office) screen. Demo: Contact Notes (My Office) 	Sambo	2:40 PM	10 min
 SmartCare Reports Release Items can be found on the BHS EHR Support page, <u>https://dhs.saccounty.gov/BHS/BHS- EHR/Pages/Support.aspx</u> 	John/Val	2:50 PM	10 min
 Training Updates Training schedules posted through May 2025 Training Registration Form Program Name Field - Make sure to list out the specific programs staff will need access to as the name is shown in SmartCare. If they need access to all programs within your legal entity, you can enter "All programs". The programs listed should only be programs the staff will be documenting into. They will have access to view all programs 	Kat	3:00 PM	10 min

	within your legal entity.			
	 Closed Loop Referral Tip Sheet https://dhs.saccounty.gov/BHS/BHS- 			
	EHR/Documents/Closed%20Loop%20Referrals%2			
	0Tip%20Sheet.pdf#search=closed%20loop%20ref			
	erral			
•	Slide decks updated			
	 Separate for MH & SUPT Provider Admin 			
	 Service Corrections 			
•	We will be Implementing changes to Live Training due to			
	feedback received. We would like attendees to join in the			
	training on camera and set that as an expectation.			
	Next User Forum: Wednesday, May 28th at 2pm			
New S	martCare Items or Issue Updates	Kristi	3:10 PM	5 min
•	CalMHSA Connex-Interoperability Solution - CalMHSA			
	Connex-Interoperability Solution - CalMHSA Connex will			
	enhance care coordination by allowing providers a timely			
	and comprehensive insight into the patient's health history.			
	The platform is designed for seamless and secure sharing of behavioral health information among diverse healthcare			
	entities. Connex enables the confidential transmission of			
	patient records, treatment plans, and outcomes across the			
	behavioral health spectrum and ensures sensitive			
	information is shared only with authorized individuals.			
	-We do not have a Go Live date for this tool			
	AB 352 is a California law that adopts protections for sharing information about gender affirming care, abortion, abortion-related services, and contraceptives. The system will use the following indicators to ensure that the sensitive data types outlined below are not shared out of the state.			
	population types from the dropdown menu:			
	 AB352-Abortion AB352 Output to a start to a 			
	 AB352-Contraception 			
	AB352- Gender Affirming Care			
•	For more information regarding AB352, see CalMHSA's			
	webpage, <u>https://2023.calmhsa.org/ab-352-compliance-how-to-add-new-indicators-to-a-clients-record-in-special-</u>			
	populations/			
•	Service Note Reviewer Screen – There is a new screen			
	available to review progress notes. This is a client-based			
	screen that allows users to view all service notes for a			
	specific client with filters available to choose by			
	program(s), previous number of days, procedure codes			
	and the status of the notes.			
_	CANS Validation Issue This has been resolved. If you			
•	CANS Validation Issue – This has been resolved. If you receive any further CANS validation errors, please reach			
	reserve any farmer of the validation energy please reach			

out to BHS-EHRSupport@Saccounty.gov.			
 Open Forum Question: Regarding denials and corrections, we received a denial due to the client having a responsible County that is not Sacramento. We can usually work with the family to change the County responsibility to Sacramento. However, there are some clients that are not an option, such as foster youth or adopted youth. In my understanding, the County responsible is always the place where the placement or adoption takes place and won't change. Is there a workaround for this? Answer: I don't think that there is a workaround. There are different rules on the MH and the substance use side. If the client does not have Sacramento County MediCal, you will receive a denial. Question: I am under the impression that you are given 30 days to correct the County, so that Sacramento County would pay for the first 30 days, then deny it afterwards. Answer: We would get a denial regardless of the time frame. If the provider does have other funding sources and the client is in the process of changing MediCal over to Sacramento County, we may be able to bill the client under another funding until that happens. Reach out to Rhonda Pregano to work out a solution to handle that specific situation. Question: In those circumstances, is it best that we continue to bill it and receive denials. If it does change and is retroactive, then can we work those denials, or is it best if we remove them from the billing. Answer: You could receive the denials and fix them, or hold the billing until MediCal is active, then you would just submit retroactive billing to avoid denials and avoid having to submit CCS to make corrections. If there is an expectation that the client is to be retroactive back to Sacramento MediCal, suggestion would be to enter it into the system, but you take either route, as long as you're within the year timeline to be able to claim. Question: Is service note reviewer available now on SmartCare? 	AI	3:15 PM	15 min