

## DBHS Mental Health – Avatar Implementation User Forum

**Date:** 9/17/2009 **Time:** 2:00-3:30

Location: 7001 East Parkway, Sacramento, Conference room 1

**Facilitator:** Kacey Vencill **Scribe:** John Sawyer

Attendees: (See sign in sheet)

Time	Agenda topic	Presenter
5	Welcome	John
10	<ul> <li>Patch this morning and impact on reporting Avatar now detects if a user is on the County network and for County users will render reports using a Crystal Report Viewer from their computer. It will prompt the user to "download" versions of the reports as they are used for the first time. Providers will continue to run reports the same way.</li> <li>Bug reporting to Avatar@saccounty.net We get inquiries daily to the Avatar box. We are able to investigate and respond much more effectively when your first email is as detailed as possible. Screenshots are welcome, but at the very least we will be asking for Program, Client ID, Date if relevant, Screen/Report name, Fields in question.</li> </ul>	Kacey/John
20	<ul> <li>Provider Start Date modeling change is LIVE         Mental Health staff managed to update nearly 5,000 start dates into the new editable field on Additional Episode Information.         We also modified this option to allow for data entry into closed episodes. This should reflect on the Detailed Outpatient Census for verification.</li> <li>New Header information on episode specific client screens Previously, screen headers included NAME/ID and EPISODE only. We have added:         <ul> <li>Admit Date</li> <li>Program Name</li> <li>Provider Start Date (will remain blank if not entered)</li> </ul> </li> </ul>	John

Services Prior to Avatar

We have provided 2 years of data on CD to every agency which has requested it. Due to the problems that the "Services Prior to Avatar" reports were causing with reporting in general, they have been removed from most roles. If agencies find that they do need additional information which is not available on the CDs provided, please contact Avatar for assistance.

Guarantor 99999 reporting

We have implemented changes in the Guarantor 99999 Provider Report and have made it available again. We will be monitoring to ensure that it doesn't cause further problems with reporting, but in the meantime, we are asking providers to utilize it for each month of services since May 1st. If you do experience any problem, please let us know.

Client Services Report (Excel Export)

A new version of the Client Services Report is available. It should match the data returned on the Client Services Report (Program) but it does not group by Client, and it only includes clients who received services in the date range selected. Our goal was to make a report that was easily exported for agency use.

It was pointed out that this would be a good tool to export and sort in Excel by the Units column to catch those "large" duration errors.

## 15 **Business Process Update**

- Guarantors by Program documentation (handout provided)
  - Document is available on the Avatar website under Resources:

http://www.sacdhhs.com/default.asp?WOID=MBR

- Handout was provided and discussed in general. This may change as we refine processes, but for now, we are asking that providers use this to define guarantors within their programs.
- Follow up from Technical Assistance sessions (handout provided)

Discussed the detailed notes compiled from the Technical Assistance sessions last week, and went over the Q&A responses. Additional items discussed were:

- Clients who have both Medi-Care A and B should use B (Outpatient Services) for guarantor purposes.
- R-Match policy number No policy number is required
- o Medicare only verification- We are looking into 3<sup>rd</sup> party options for verification of Medi-Care eligibility when clients are not also Medical eligible.
- Customizing guarantors for lapses in eligibility (handout provided)

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15	Open Forun	n	Kacey
	Q.	Do providers need to go back and do customization of	
	A.	<b>guarantors on closed episodes?</b> No, if the guarantor was ended appropriately and the episode is now closed, there is no need to do this.	
	Q.	When customizing guarantors, what do we enter for the end date of the eligibility level if the eligibility is current?	
	A.	End date is not a required field. If the eligibility is current, leave the end date for that level of eligibility blank.	
	Q.	So, we provided services on a client through April 9 <sup>th</sup> , found out on April 15 <sup>th</sup> that the client lost Medi-Cal eligibility on March 31 <sup>st</sup> and have discharged them from the episode. Do we need to go back and end the guarantor on the closed episode?	
	A.	No, the services will be billed and because of the loss of eligibility they will be denied.	
	Q.	On guarantor orders, we have been entering 2 guarantors, but what if we already have DMH as 1 and an out of county as guarantor 2. Do we still need to add R-Match?	
	A.	Yes, R-Match needs to be present for all clients who have 3(DMH) as a guarantor. In this specific example, it should be added as the 3 <sup>rd</sup> guarantor.	
	Q.	When customizing guarantors, for the 2 <sup>nd</sup> "level" we need to identify modes of services for each guarantor. How do we know which modes to indicate?	
	A.	Modes are already identified at the guarantor level in Avatar, so for purposes of customizing guarantors, you can safely use CTRL-A and select all modes.	
	Q.	Access originally authorized a client to our program as of 6/1, but we never saw them until 8/1. Should we contact Access and have the authorization revised to begin on 8/1?	
	A.	No, provider start date was designed to track the actual start date of services for each client. The policy at this time is that Access will not be modifying authorization dates.	
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