SmartCare SUPT Provider Administrative Training

## **Course Content**



- Understand the life cycle of a client
  - Inquiry and enrollment process
- State reporting
- Setting up coverage
- Supplemental data
- Entering services
- Correcting services

#### What Should I Expect From Training Today?

We will be going over SmartCare functionality Searching for clients and screens How to save and enter data How to use the filters to access specific data in reports and list pages How to navigate SmartCare

The content in training today will be shown at a high level to cover everyone's role. Each agency operates differently, your specific agency will be able to specify what screens you will be using.

You will be able to access every screen, list page, and report that we demo today after passing the quiz at the end of training.

- CalMHSA is an independent administrative and fiscal public entity representing California counties
- CalMHSA's role is to work with California counties to transform Mental Health for Californians
- CalMHSA manages the semistatewide EHR SmartCare
- CalMHSA works as the middle-man between the counties and the vendors of the EHR, Streamline

#### Who is CalMHSA?

When to Contact CalMHSA Vs. Sacramento County

- CalMHSA provides basic navigation training through the LMS Training Portal
  - This is the recorded trainings that were sent to you prior to today's training
  - If any support is needed on the LMS system (unable to login, video not working, etc.) you will need to contact CalMHSA.
    - <u>(833) 686-6801</u>
    - <u>EHR@calmhsa.org</u>
- Sacramento County EHR Team offers support on SmartCare (unable to login, navigation, error messages)
- If our team is unable to fix a problem, we will reach out to CalMHSA directly

- Prior to training you should have taken the LMS training courses on CalMHSA's webpage.
- These trainings and quizzes will need to be completed prior to gaining access to SmartCare or updating your current account.
- Since the LMS trainings cover some of the material we will be talking about today, we will not be demoing every screen in today's training.
  - Written documentation is also available for each of the modules. We will share the path to find those instructions on each information slide.
- There are a few modules shown in the LMS videos that Sacramento County does not complete, we will call those items out.
- The LMS videos can be accessed at any time, they can be re-watched as often as needed

## LMS Trainings

#### Proper Use of SmartCare



You must have permission from program to use SmartCare when you are away from your agency Do not access over unsecure Wi-Fi or in a public area



 Health Insurance Portability and Accountability Act (HIPAA)

## Username and Passwords

Provides access into SmartCare

Contains user's specific classification and permission levels for access to screens, list pages, and reports

Do not let anyone work under your username

Do not share your password with anyone, including the EHR Team

## Forgotten Username or Password

If you have forgotten your password, click on the "Forgot Password" link. If you continue to have trouble logging in call our support line to reset your password. Password resets must be done over the phone

If you have forgotten your username, your authorized approver will need to send an email to training registration requesting your username SmartCare is an internet browserbased application

- It can be used on the following internet browsers
  - Microsoft Edge
  - Google Chrome
- SmartCare is NOT compatible on the following internet browsers

Accessing

SmartCare

- Internet Explorer
- Firefox
- o Safari

#### SmartCare Webpage

- https://dhs.saccounty.gov/BHS/BHS-EHR/Pages/Avatar.aspx
  - > Behavioral Health Services (BHS) Electronic Health Record (EHR) Team Contact Information
  - Meeting Information
    - Substance Use Prevention and Treatment (SUPT) User Forum schedule and minutes
  - >SmartCare
    - Launch SmartCare
    - California Mental Health Services Authority (CalMHSA) Training Resources
      - CalMHSA documentation paths will be on the bottom of each slide, you can view the documentation resources in this section of the webpage
    - Sacramento County Training Resources
      - Tip sheet paths will be on the bottom of each slide, you can view the tip sheets in this section of the webpage
  - > Quality Management Resources

Part 1 -Creating & Setting-up a Client

- Inquiry
- > Creating a Client ID
- > Enrolling a Client into a Program
- > Treatment Teams
- > Client Flags
- > Special Population tracking
- > Client Information
- Scanning

- Inquiry screen allows staff to document requests from a client including a request for services
- If the person is only requesting information, you can log the interaction without the need to create a client ID in SmartCare
  - The requested information will be stored in SmartCare for future reference
- > Only clinical staff should determine the disposition of an inquiry
  - Admin staff can enter the disposition on behalf of clinical staff
- See "Provider Inquiries Tip Sheet" on our webpage for tips on how to complete an inquiry
  - o <u>https://dhs.saccounty.gov/BHS/BHS-EHR/Pages/EHR-Training.aspx</u>

## Inquiry Information

#### Demo

# Inquiry process

# Disposition an Inquiry

- Once you've saved an Inquiry, a new client ID can be created by selecting the button to "Link/Create Client"
  - When linking the new client, the name, SSN, and DOB will pull forward to the screen. You'll need to click on the following search buttons to enable the "New Client" button
    - Broad Search
    - SSN
    - DOB
- The client must have a client ID created prior to enrolling

#### Creating a Client ID

#### Enrolling a Client into a Program

- Once the new client has been created you can enroll them into a program
- Search "Client Programs (Client)" to enroll the client into a program
- This list page will also show any previous enrollments the client has had at your program
  - If the client has signed a Coordinated Care Consent, all programs the client has been enrolled into will be viewable here
  - Enrollments on this page are after July 1<sup>st</sup>, 2023. If there were enrollments prior to July 1<sup>st</sup> 2023, there will be a program named "Document Only Program"
    - You can see a list of those prior programs by going into "Documents (Client)" and viewing the "Avatar Face Sheet" This will be at the bottom of the list

#### Program Assignment (Program)

- If the client reaches out to the Sacramento County BHS-SAC Team, they will complete the inquiry and request enrollment into your program
- You can view any enrollment requests in the Program Assignment (Program) screen
  - Use your filters to select your agency and "Requested" status, this will show any pending requests
- When a request comes in you will go into that record and switch the status to "Enrolled" and add the enrollment date

#### Demo

#### Client Program (Client)

Program Assignment Details Enrollment Process

#### Program Assignment (Program)

• View client enrolled and or requested into your program

## ECM Programs

Clients who enroll in Medi-Cal have the option to choose a GMC (or Manage Care Plan) to receive services from, such as, HealthNet, Anthem, etc. These clients may be eligible to receive Enhanced Care Management (ECM) services which are additional services such as family support, health promotion, or comprehensive assessment

These clients will be enrolled in an Outpatient program, and when they are identified as eligible for ECM services will need to be enrolled in an ECM specific program

Not all agencies have ECM programs

Direct Care staff from an ECM program have their own specific training

- > This screen is used to track staff assigned to a client's care
  - Clients receiving ECM services are required to have an ECM Lead Care Coordinator assigned to them for the duration of their enrollment
- Adding a client to a staff's Treatment Team will add the client to their caseload and will show the client on the staff's client drop-down list, without having to search for them
- Discharging a client from a program won't automatically deactivate all treatment team members associated with that program. If the client has been discharged from your program but is still showing up on your caseload, go into the Treatment Team screen and see if you're still listed as active
- If you are still listed as active on the Treatment Team list page, follow the steps to add an end date and deactivate yourself from the treatment team by following the steps in the link below:
  - o <u>https://2023.calmhsa.org/how-to-view-whos-on-the-clients-treatment-team/</u>

#### Treatment Team (Client)

# Demonstration Treatment Team

#### How to Remove Someone from Treatment Team

#### The box below shows an active Treatment Team Member.

Treatment Team Member									
◯ Contact		◯ External		Staff	Active				
Start Date	02/15/2024 🛅 🕶	End Date	<b></b>						
Staff	Nine, Trainer								
Role	Clinician/Therapist 🗸	Program	APCC-TWC-14th Ave-06/09/2 🗸						

The box below shows an inactive Treatment Team Member. Notice there is an End Date, and the Active box is not checked. Do not delete an entry. End date and remove the check on Active

Treatment Team Member									
◯ Contact		◯ External		Staff	Active				
Start Date	02/15/2024 🛗 🕶		End Date	02/17/2024 🛅 🔻					
Staff	Nine, Trainer								
Role	Clinician/Therapist	$\sim$	Program	APCC-TWC-14th Ave-06	/09/2 🗸				

Client Flags (Client)

- Client Flags alert users with critical beneficiary support information. An icon which corresponds to the Client Flag will show up in the client header
- Some Client Flags are created automatically to send you an alert about the client
  - Alerts for duplicate insurance, preferred name, etc.
- Client Flags can also be created to alert others of critical information regarding the client.
- Refer to the Client Flag Tip Sheet located on our webpage:
  - <u>https://dhs.saccounty.gov/BHS/BHS-EHR/Pages/EHR-</u> <u>Training.aspx</u>



## Client Flags



#### **Special Population Tracking**

- >When should you use the Special Population form?
  - All clients will need to have their housing status entered in this form
  - Clients apart of the following populations will also need to be added
    - Foster Care, Katie A, CalWORKS, CPS, ICC, IHBS, Conservatorship, Presumptive Transfer, Probation, TFC
- > Why is it important to have accurate Start and End Dates?
- Accurate start and end dates are essential for coordinated care. It is best practice service delivery for these populations of consumers who are involved in multiple systems
- To see a demonstration of the Special Population Tracking screens, click on link below:
  - How To Identify a Client as Katie-A or Other Special Population 2023 CalMHSA

#### **Special Population Tracking**

pecial Populations Detail	
Special Populations	
Special Population Type: Housed/No Imminent Risk of Homeless ✔ Start Date 01/27/2025 📩 ▼ End Date	<b></b>
Comments: Comments here if applicable	

#### AB352

AB352 is a buffer against providing states that have criminalized certain kinds of care

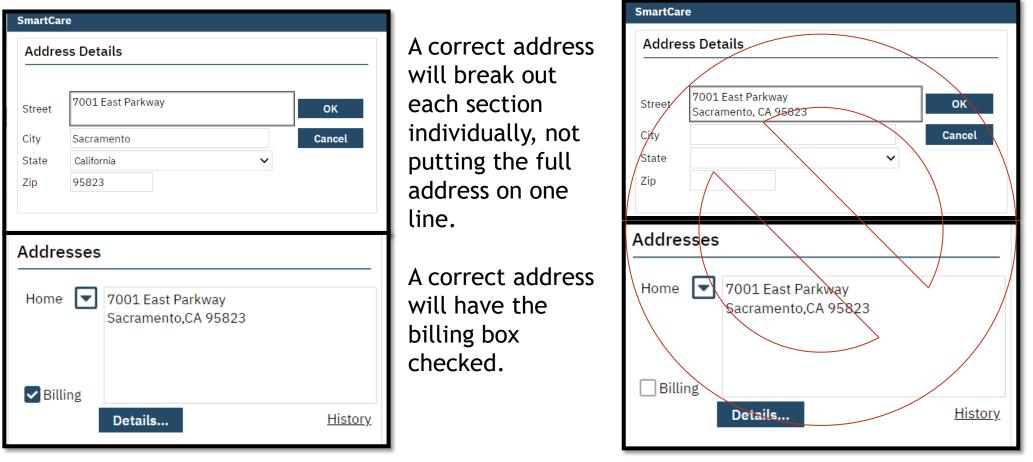
- > The system will use the following indicators to ensure that the sensitive data types outlined below are not shared out of state
- >In SmartCare use one of the three special populations:
  - AB352-Abortion
  - o AB352-Contraception
  - o AB352-Gender Affirming Care

## Client Information (Client)

- If any demographic information needs to be added or changed after creating the inquiry, you can do that here
  - This includes the client's name, DOB, SSN, or address
  - Additional demographic information can be added such as the client's gender identity, pronouns, race, etc.
- > You're able to add contacts or aliases for the client if needed
  - Contacts added in this form will pull forward to other forms
- > Verify the client address is entered properly
  - The address should be broken out by each line, not all entered on one line
  - The billing box next to the address needs to be checked
  - If the client is homeless, enter "HOMELESS" on the address line and your agencies city, state, and zip code on the lines below

#### Correct Address vs. Incorrect Address

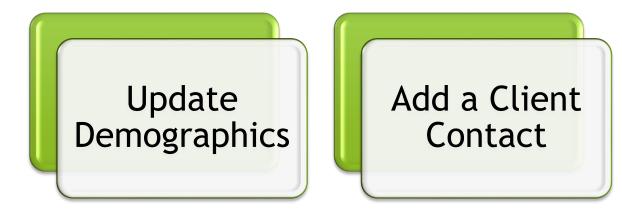
#### **Correct Address**



Incorrect Address

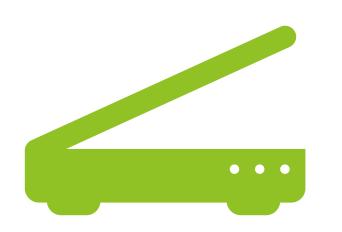
Entering an address incorrectly will cause services to not claim out and prescribers unable to prescribe medication. It's important the address is entered in the correct format.

## Demo- Client Information (Client)



#### Scanning (My Office)

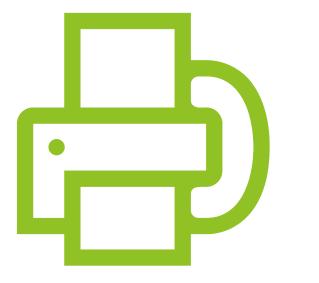
- Used to scan or upload documents into a client's record
  - You'll use the upload option, unless you have a hard scanner attached to your computer
    - If you are using the scanning option with a hard scanner, there may be installation requirements
- > There is an option to single scan or batch scan
  - Single scan is used for scanning an individual record
  - Batch scan allows you to scan multiple documents for either multiple client's or the same client
- See QM's "Sacramento County Scanned Document Naming Convention Form" to view the naming convention and folder selection for scanned documents
  - <u>Documentation Standards (saccounty.gov)</u>



- The Scanning (My Office) screen should only be used for scanning/uploading documents or correcting/deleting any documents that you scanned in
  - Corrections can be made to documents you scanned in, from this screen. You will not be able to access documents that have been scanned in by others at your agency
- Documents can be viewed by all at your program in the "Documents (Client)" screen
  - There may be documents and/or assessments scanned in by the BHS-SAC Team if the client was referred to your program from BHS-SAC
  - If the client has signed a Coordinated Care Consent form, you may see MH documents as well

Viewing Scanned Documents

#### Demo- Scanning (My Office)



- >Used to view scanned documents
- >Used to scan a single document
- How to batch scan, used when scanning multiple documents
- How to delete a scanned document
- How to view documents in "Documents (Client)"

#### Part 2 - State Reporting

CalOMS Overview

CalOMS Admission (Client)

CalOMS Standalone Update/Discharge (Client)

DMC Outpatient Timeliness Record (Client)

DMC Opioid Timeliness Record (Client)

California Outcomes Measurement System (CalOMS) CalOMS is California's data collection and reporting system for Substance Use Disorder (SUD) treatment services

Only SUPT Treatment Programs are required to report CalOMS data

 NOTE: Recovery programs are not required to submit CalOMS data

#### **CalOMS Information**

- CalOMS Admission form must have all fields and sections completed in accordance with Department of Health Care Services (DHCS) requirements
- A new CalOMS is required any time the client is changing their Level of Care (LOC). If the LOC is changing to a new program within the same agency a new CalOMS will still be required
- Below is the link to SUPT documentation, scroll down to the "State Reporting" section to view the different CalOMS Tip Sheets
  - <u>Substance Use Documentation 2023 CalMHSA</u>

- > The CalOMS must be updated on an annual basis
- SUPT providers must complete the CalOMS Update/Discharge prior to the CalOMS Discharge
- There is an option for an administrative discharge if the client left before completing services
  - This option will limit the number of questions on the form

### CalOMS Annual Update/Discharge

# Timely Access Data Tool (TADT)

All providers will use the TADT screen to track timeliness

There are four different TADT screens being used

- MH Non-Psychiatric SMHS Timeliness Record (Client)
  - Used for Medi-Cal beneficiaries who are making an initial request for non-psychiatric specialty mental health services
- MH Psychiatric SMHS Timeliness Record (Client)
  - Used for Medi-Cal beneficiaries who are making an initial request for psychiatric specialty mental health services
- DMC Outpatient Timeliness Record (Client)
  - Used for Medi-Cal beneficiaries who are making an initial request for SUPT outpatient services
- DMC Opioid Timeliness Record (Client)
  - Used for Medi-Cal beneficiaries who are making an initial request for opioid use disorder treatment services

### Timely Access Data Tool (TADT) Cont.

- The TADT should be completed whenever a new client is enrolled into your program.
  - A new client is defined as a client who has not received Medi-Cal reimbursable services within the last 12 months.
- The form is a living document, it does not need to be completed at once. Once complete the form needs to be signed.
- There are Closure Reasons at the bottom of the form. If the client does not complete the process or is a no-show for their appointment the form can be closed out.
  - Closing the form out does not discharge the client. If the client leaves your program, you will still need to discharge them.

#### Timely Access Data Tool (TADT) Cont.

- CalMHSA has written instructions on their webpage for each of the TADT forms
  - DMC Outpatient Timeliness Record (Client)
    - How to Complete the DMC Outpatient Timeliness Record - 2023 CalMHSA
  - DMC Opioid Timeliness Record (Client)
    - How to Complete the DMC Opioid Timeliness Record - 2023 CalMHSA
- Sacramento County has also put together a tip sheet for SUPT providers on the requirements prior to entering the TADT
  - o <u>SUPT TADT Tip Sheet.pdf (saccounty.gov)</u>

# Demo State Reporting:

- CalOMS Admission
- DMC Outpatient Timeliness Record (Client)

# Part 3 -Coverage

# Client Eligibility

# Coverage

# Verifying Eligibility

It is important to verify medical eligibility for scheduled and unscheduled clients

The Medi-Cal website allows you to verify Medi-Cal eligibility, as well as Other Health Care (OHC) and Medicare coverage

- Each Payor is a Plan in SmartCare
- > The start date of a plan must match the enrollment date if there was no plan previously entered
  - If there is already a plan date entered, it may have been entered by another agency where the client received services
- Coverage is client based
  - Do NOT remove a plan because the client may have that coverage with a different program
- After entering your coverage, enter a start date and add the plan. If the plan does not show up in the Plan Time Span section billing will not claim out
- If the client has insurance through a family member, that family member will need to be added as a Client Contact in the Client Information screen in order to link them to the Coverage screen
  - If the insurance from a family member is being entered, that family member will need to have their SSN, sex, and DOB entered in the client contacts fields
  - The Medi-Cal payor will always be entered as the actual client as the subscriber (even if the client is a minor)

# Coverage Information

- > Other Health Care (OHC)
- > Medicare
- > Medi-Cal DMC
- Managed Care Plan payors (ECM programs use this payor)
- > ADS DMC R Match
- To see a demonstration of the Coverage screens, click on link below, and view the Coverage/Plan section:
  - How to Add a Coverage Plan 2023
     CalMHSA

Coverage Plan Order

### Demo

# Coverage (Client)

- Adding new payors
- Setting the Coordination of Benefits (COB) order
  End dating a payor
- Client Account (Client)

- Sacramento County has created reports specific to our county
  - Search "(SAC)" on your search bar to view Sacramento County specific reports
    - This will display reports that are within your role
  - A list of available reports are posted on the EHR webpage under the Technical Support tab. This will show all reports regardless of role, keep in mind you will only have access to reports that are included within your assigned role in the system
  - To view the list of reports, Click on the link below to view "Release Information"
    - <u>SmartCare Technical Support (saccounty.gov)</u>

## **Report Information**

## Program Coverage Report (SAC)

> Displays current open enrollments with the first 4 current Payors

 This report will catch if coverage was not entered, the CIN number is missing, or if the client was not entered as the subscriber for their Medi-Cal Coverage

#### Program Coverage Report

Open enrollments Between 12/19/2024 and 12/19/2024 with First 4 Current Payers

Client ID	Client Name	÷	Enrolled /DC	÷	Cov1 ÷	Cov2 ÷	Cov3	÷	Cov4	¢
			03/14/24		Medi-Cal DMC 96634632D					
			04/24/24		Medi-Cal DMC 93534820D	ADS DMC R Match 567412748				
			12/10/24		Medi-Cal DMC 92222751D	ADS DMC R Match 92222751D				
			06/20/24		Medi-Cal DMC 92209815D					
			11/22/24		Medi-Cal DMC	ADS DM K Match				
			04/15/24		(Not Subscriber) Medi-Cal DMC 93354330D	ADS DMC R Match 18				

Part 4 -Entering Services

# Services (Client)

# Batch Services(Client)

### How are Services Entered?

#### Services/ Notes (Client)

P	rogress	s Note					
	Effective	09/14/2023		Status	New	Author	Owens, Shalina
	Service	Note	Billing Diagnosis	Warnings			
	Service						

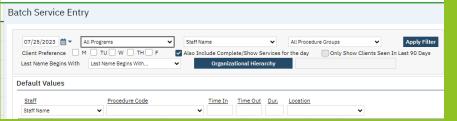
Used by direct care staff to document and create services for a client.

#### Services (Client)

Service Deta	il							
Service Detail	Billing Diagnosis Autho	rization(s)	_					
Service								0
Client	Test, Entry	Status	Show 🗸	Start Date	09/14/2023 🛅 🔻	Program		~
Procedure		~	Modifier	Start Time		Face to Face Time	0.00	
Clinician Name		~				End Date		
Location		~	Attending		~	Referring		~
Client was present	Other Person(s) Present				Cancel Reason			$\sim$
Group	_		Charge	\$0.00	Balance		Rate ID	

Admin staff can use Services (Client) to enter individual service(s). This can be used if an agency has their own EHR system and manually enters services into SmartCare. SmartCare user may use this to enter new if a note was entered on a downtime form.

#### Batch Service Entry (My Office)



Admin staff use Batch Service Entry (My Office) to enter multiple Services for multiple days and multiple clients. This is primarily used by agencies with their own EHR.

#### Service Import

1	ClientId	ClinicianId	ProcedureC	LocationId	DateOfService	EndDateOf:	FaceToFace	TravelTime	Documenta	AttendingIE	Referringl
2			93	14	8/3/2023 14:10		50	20	5		
3			93	14	8/1/2023 13:30		60	0	5		
4			105	14	8/1/2023 14:35		55	48	9		
5			93	13	8/1/2023 08:30		58	0	6		
6			73	13	8/1/2023 07:55		26	0	8		
7			105	11	8/1/2023 10:00		26	0	4		
8			105	14	8/1/2023 10:05		30	0	2		
9			105	3	8/1/2023 08:42		20	0	4		

Service import allows providers who use their own EHR the ability to import all monthly services from their EHR into SmartCare.

# Service Status Descriptions

Cancel: Used if the appointment was cancelled

**Complete:** Service has been validated after the overnight job

**Error:** Prevents a services from claiming out

**Scheduled:** The service was scheduled on the calendar but has not occurred yet

**No Show:** The client or staff did not show for the appointment

Show: The service occurred

- Batch Service Entry allows you to enter multiple services at one time
  - Multiple clients at the same time
  - Multiple days for one client
- This is particularly helpful for residential or NTP agencies who have their own EHR
  - This allows those providers to enter their fixed fee services for a duration rather than entering them one at a time
- Below is a link to the EHR team's Batch Service Entry Tip Sheet
   <u>Batch Services Tip Sheet.pdf (saccounty.gov)</u>

# Batch Service Entry (My Office)

### Demo

# Services (Client)

# Batch Service Entry (My Office)

# Part 5 -Additional Service Information

# Diagnosis Document (Client)

Pregnancy Indicator

### Diagnosis

- All clients must have an active DSM-5/ICD-10 Diagnosis entered that covers all dates of service in your program
- Some administrative staff enter diagnoses on behalf of direct care staff
- The diagnosis permission is granted based on classification or by special request
  - For staff who are entering on behalf of a diagnosing practitioner. In the Source field of the Diagnosis screen, enter the diagnosing practitioner's name and professional classification
- > Please refer to the Diagnosis tipsheet on the EHR website:
  - Diagnosis Tip Sheet.pdf (saccounty.gov)
  - Additional resources are also available on CalMHSA's website, under Diagnosis Entry:

<u>Clinical Documentation - 2023 CalMHSA</u>

- Without a diagnosis the services will not show up on your invoice for the county
- > A diagnosis is required for all services
  - Effective dates should cover all dates of service
- > The diagnosis must be entered in the program you are providing services
- The diagnosis must be signed
- The Service Diagnosis Error report can be run to view billing errors pertaining to Diagnosis
  - We will view this report during the Corrections section of training
- > ECM providers will only use approved Z-Codes (Z55-Z65) when entering a diagnosis.

# Important Facts About Diagnosis

# Diagnosis Demo

# Entering a Diagnosis

- Medi-Cal requires providers to use a pregnancy indicator to specify when services are provided to a pregnant client
- In the "Client Clinical Problem Details (Client)" screen, Direct Care staff use SNOMED Code 248985009 (F34.90) to indicate the client is pregnant
  - Pregnancy end date is required to be entered once the client's pregnancy has ended. This date should be the last date of the month, 365 days after the end of the pregnancy
- The SNOMED code is entered by Direct Care staff in the "Client Clinical Problem Details (Client)" screen
- Agencies with their own EHR, admin staff will be entering the pregnancy indicator on behalf of the direct care staff

# Pregnancy Indicator

# Part 6 -Service Corrections



> What is an Overnight Job?

- Overnight Job validates the services entered into SmartCare
- It will assign a status to each service that was entered: Show or Complete
  - Complete: service is ready to be claimed
  - Show: there may be some issues with the service that need to be addressed

### **Overnight Job**

# **Editing Service Notes**

- Edits can be made to a service if information was entered in error
- > Only pre-claimed services can be edited
- > Only administrative staff can make corrections to a service
  - Clinical staff can make changes to their documentation
  - Admin staff can edit the service only, not the documentation

Run the "Program Staff Services Export (SAC) (My Office)" report

- The report will show service details for your program
- The status field on the report will show if a service has been claimed

# How do I Know a Service has been Claimed?

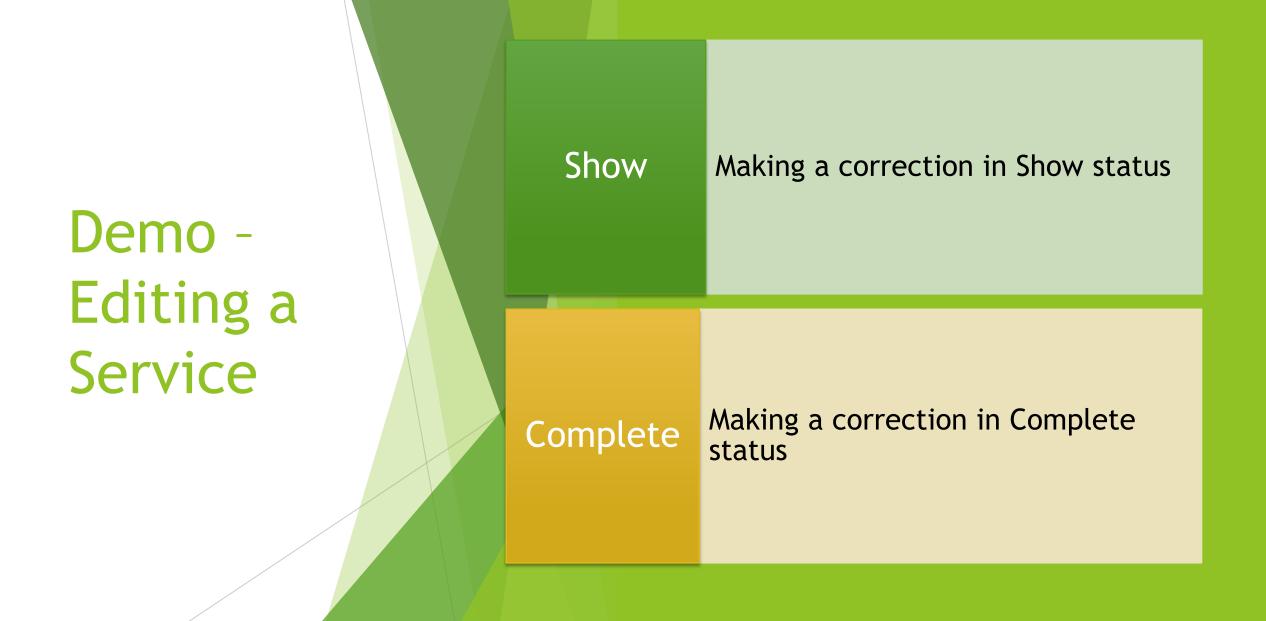
FTF	Travel	Doc	Status	Charge Code
8.00	0.00	5.00	C-Claim Sent	H2011
35.00	0.00	9.00	C-Claim Sent	H2011
50.00	60.00	10.00	C-Claim Sent	H2011
10.00	0.00	5.00	C-Paid	H2011
8.00	0.00	5.00	C-Paid	H2011
30.00	0.00	10.00	C-Claim Sent	H2011
90.00	0.00	30.00	C-Charge Created	H2011
120.00	0.00	30.00	C-Charge Created	H2011

## What Service Information can be Edited

#### Services in Show Status Services in Complete Status

- Location
- > Mode of delivery
- > Start date
- > Start time
- Program
- Procedure
- > Service Time (Duration)
- Clinician name (Only if the note is not signed)

- Location
- > Mode of delivery
- > Start date
- > Start time
- Program
- Procedure (If the note type matches the new procedure)
- Service Time(Duration) (Billing team will need to regenerate the charge)



- If your service is in Complete status and you change either of the following fields, reach out to the Billing Team to regenerate the charge
  - Duration/Unit
  - Procedure Code
- The Billing Team can be reached via email

BHS-EHRBilling@saccounty.gov

Regenerating Service Charges

### What to do if you Cannot Edit a Service

- If a service cannot be edited it will need to be put in Error Status
   Reasons why a service may need to be put in Error
  - Duplicate service
  - Billed in error
  - If there are fields that cannot be edited
    - Clinician name
    - Some procedure codes
- Change the service status to Error
  - A service in Error will not bill out
  - Putting a service in Error will also delete the attached progress note. If a progress note has been entered, make sure to work with the clinician before putting a service in Error
    - The clinician will need to save the content of their note prior to putting it in Error if applicable
- Never put a claimed service in Error status



Demo -Changing a Service to Error

Switch service status from Complete to Error

# **Service Corrections**

Fools to find corrections:

- Service Needing Attention Widget
- Services (My Office) list page
  - Scroll to the far right to view "Failure to Complete Reasons"
  - If there is no rate on the Completed service (and it is NOT a non-billable), make sure Coverage has been entered

### Errors That will Prevent a Service from Billing Out

- The errors listed below will prevent a service from billing out
- > Below each error, is the resolution to fix the error
  - Financial information has not been complete for the client
    - Refer to the Client Account Screen
  - Billing diagnosis required before completing the services
    - Run Services Diagnosis Error (Sac) (My Office) report
  - Unable to find matching rate for the selected procedure
    - Reach out to the EHR Billing team- <u>BHS-</u> <u>EHRBilling@saccounty.gov</u>

Services Needing Attention Widget

- On the SmartCare dashboard you will see the Services Needing Attention widget
  - Displays all errors within a note or service that need corrections

ervices Needing Attention	0
Total of 'Show' charges: \$ 1272.43	
View All	<u>15</u>
Billing diagnosis required for completing the service	<u>13</u>
Financial information has not been completed for this c	<u>10</u>
Unable to find a matching rate for the selected procedu	<u>10</u>

## Services Needing Attention Widget cont...

After selecting "All" in the Services Needing Attention Widget, the Services (My Office) list page will display all clients, services, and warnings to correct

All Clients	~	All Statuses		✓ All Proce	dures		✓ All P	rograms		~	Apply F	Filter		
Custom Date	~	From	<b>*</b>	То		💼 🔹 Servi	ces With E	rrors		~	_	~		
Only include Service	es with A	dd On Codes Sta	ff			👌 Orga	anization	al Hierarchy				<b></b>		
Client	Auth	DOS	$\bigtriangledown$	Procedure	Units	Program	Status	Staff	Group Name	Comment	Cancel	Warnings	udd On Godes	Atta
<u> Test, Billy (1069)</u>		09/08/2023 11:0	<u>0 AM</u>	Psychothe		Turning P	. Signed	Owens, Shalina				Billing diag.		
<u> Test, Jamie (1206)</u>		09/08/2023 10:0	<u>0 AM</u>	Psychothe		BACS-OP	C Signed	Owens, Shalina				Financial in		
<u> Test, Bell (1046)</u>		09/08/2023 09:0	<u>0 AM</u>	Mental He		El Hogar	. Signed	Owens, Shalina				Billing diag.		
<u> Test, Bell (1046)</u>		08/29/2023 09:0	<u>0 AM</u>	Care Mana		FFS-Adult	. Signed	Owens, Shalina				Unable to fi		
<u> Test, Lawrence (1086)</u>		07/25/2023 09:0	<u>0 AM</u>	Housing P		APCC-TWO	Show	Owens, Shalina				Unable to fi		
Test, Debra (1103)		07/25/2023 09:0	<u>0 AM</u>	Housing P		APCC-TWO	Show	Owens, Shalina				Financial in		
<u>Test, Benjamin (1148)</u>		07/25/2023 09:0	<u>0 AM</u>	Housing P		APCC-TWO	Show	Owens, Shalina				Unable to fi		
Pan, Peter (1024)		07/25/2023 09:0	<u>0 AM</u>	Housing P		APCC-TWO	Show	Owens, Shalina				Financial in		
Day, Jessica (1009)		07/25/2023 09:0	<u>0 AM</u>	Housing P		APCC-TWO	C Show	Owens, Shalina				Financial in		
<u> Test, Marg (1137)</u>		07/18/2023 09:0	<u>0 AM</u>	Group Tra		APCC-TWO	Show	Owens, Shalina				Financial in		
<u> Test, Brit (1186)</u>		07/18/2023 09:0	<u>0 AM</u>	Group Tra		APCC-TWO	Show	Owens, Shalina				Financial in		
(notts, Don (1080)		07/18/2023 09:0	<u>0 AM</u>	Group Tra		APCC-TWO	C Show	Owens, Shalina				Financial in		
<u>Day, Jessica (1009)</u>		07/18/2023 09:0	0 AM	Group Tra		APCC-TWO	C Show	Owens, Shalina				Financial in		
<u> Test, Barry (1041)</u>		05/16/2023 09:0	0 AM	Alcohol &		BACS-CW	C Show	Owens, Shalina				Financial in		
Test, Barry (1041)		05/15/2023 09:0	0 AM	Hypnother		BACS-CW	C Signed	Owens, Shalina				Financial in		

# Services(My Office)

Run the Services (My Office) list page to view the Failure to Complete Reason(s):

ervices (168)										Select Action	✓ ☆
All Services	Show	✓ Include Do Not	Complete 🗸 All F	Programs V Fir	nancial Assignn	nent 🗸 Appl	y Filter				
All Locations	All Procedure Codes	✓ All Clinicians	✓ All s	Service Entry Staff 🗸 All	Service Areas	~					
Service Id	Entered From	🛗 🔻 Ente	red To	iii ▼ DOS From 09/01/20	22 📋 🔻 DO	OS To 09/30/2023	iii <b>▼</b>				
Include Services creat	ted from Claims 📃 Only	include Services wit	h Add On Codes	Only show Non-Billable	Services	Show Only Active	Clients				
Client Name		👌 Organiz	ational Hierarchy			4	<u>&gt;</u>				
elect: All, All on Pag	DOS	♥ Units	Charge (Rate Id)	Procedure	Status	Clinician	Program	Location	Comment		Failure to Complete Reason(s)
	08/29/2023 9:00	<u>0 AM</u>		Care Management Se	Show	Owens, Shali	FFS-Adult O	Office			Billing diagnosis req
	08/22/2023 11:3	30 PM	<u>40.00(22)</u>	Crisis Intervention S	Show	Duthler, Kristi	APSS-SAC-E	Office			Financial informatio.
	08/22/2023 10:0	00 AM	<u>147.90 (1</u>	Community-Based W	Show	Trainer, Four	BACS-OP CO	Telehealth			Must have a signed
	08/22/2023 8:00	0 AM	<u>1309.29 (</u>	Psychotherapy for Cri	Show	Duthler, Kristi	APSS-SAC-E	Office			Financial informatio.
	08/22/2023 12:0	<u>00 AM</u>		Engagement	Show	Duthler, Kristi	APSS-SAC-E	Office			Unable to find a mat.
	08/08/2023 3:00	<u>0 PM</u>		Housing Plan Develo	Show	Draper, Ama	BACS-CWC C	Office			Unable to find a mat.
	00/07/2022 2:0/	0.0M		Housing Blan Douala	Chow	Drapor Amo		Office			

# Financial Information has not been Completed for the Client

#### Check the Client Account screen to make sure box is checked

**Client Account** 

Overview Charge/ Pay	ment Summary								
Account Information		3rd Party Payer Information							
Client Name	Test, Entry	<u>Plan</u>		Balance	Unbilled	Amt >90 Da	ays <u>Flagged</u>		
Financially Responsible	<u>Test, Entry</u>	Blue Cross	- Van Nuy	\$19,319.	<u>53</u> <u>\$19,319</u>	<u>\$0.00</u>			
Current Client Balance	\$0.00								
Unpaid Services	\$0.00								
Unposted Payments	\$0.00								
Last Statement Sent		Payment	History L	ast 30 Days 🗸	Show Client Pay	ments Only			
Payment Arrangement Amount	0	<u>Payer</u>	Date	Amount	Check#	Unposted Amou	<u>nt</u>		
Client Fund Balance	0								
Internal Collections									
External Collections									
Don't Send Statement									
Reason	~								
<ul> <li>Financial Information is C</li> </ul>	Complete								
Accounting Notes		1							

# Services Diagnosis Error (Sac) Report

If you see a failure reason that says Billing Diagnosis Required run the Services Diagnosis Error (sac) report to find the diagnosis error and make the necessary corrections in the Diagnosis Document (Client) screen

#### Service Diagnosis Errors

SACRAMENTO

Program Name	Client Name	clientid	Error Type	First Problem Service	First DX
			First DX Effective Date AFTER Date of Service	7/1/23	7/26/23
			NO DX in Program of Service	7/19/23	
			DX on file is not signed	7/21/23	7/21/23
			First DX Effective Date	8/3/23	8/5/23

# Part 7 -Discharge

# Client Programs (Client)

# Next Steps

Important Information Regarding a Discharge

- A discharge is done when the client's treatment has ended or based on QM requirements for your program
- Make sure all required elements are completed before completing the discharge
- > Be sure to choose the correct program
- SUPT providers must complete the CalOMS Update/Discharge prior to the completing the Discharge in SmartCare
- When choosing a discharge reason, refer to the Discharge Option document provided by QM
  - <u>https://dhs.saccounty.gov/BHS/Documents/P</u> <u>rovider-Training/dischargeoptions.pdf</u>

#### Demo

#### > Discharge- Client Program (Client)

#### How can I get additional help?

- CalMHSA LMS Trainings- CalMHSA has provided many training videos and materials on their webpage <u>Home -</u> <u>2023 CalMHSA</u>. There are interactive training videos as well as training guides which can be printed out and referenced
- BHS EHR Team can be contacted by e-mail and phone
  - E-mail: <u>BHS-EHRSupport@SacCounty.gov</u>
  - Phone: 916-876-5806
  - Office Hours: Monday-Friday 8am-5pm, except for county holidays

- > BHS EHR Training- Contact for training registration or account updates
  - o BHS-EHRTrainingReg@saccounty.gov
- > **BHS EHR Billing-** Contact for billing or claiming questions
  - BHS-EHRBilling@saccounty.gov
- > Quality Management-Contact for documentation questions
  - <u>QMInformation@saccounty.gov</u>
- Quality Management Staff Registration-Contact for license updates
  - o DHSQMStaffReg@saccounty.gov

# Additional Support

#### Access to TRAIN Environment

If you would like a chance to practice before gaining access to SmartCare, access can be given to the TRAIN environment

- All trainings and quizzes must be complete before gaining access to the TRAIN environment
- Access to the LIVE environment will be removed while you are working in TRAIN
- Test client should only be used in the TRAIN environment, do not create test clients in the LIVE environment
- Email <u>BHS-EHRTrainingreg@saccounty.gov</u> to request access to TRAIN
- > Accessing TRAIN is not a requirement

#### Additional Training

- Before gaining access to SmartCare you will need to complete the LMS training modules that were sent with the training confirmation
- After completing each module you'll take the quiz on the LMS portal
  - You'll need at least 80% to pass each quiz, the quizzes can be taken more than once
  - Take a screenshot of the passing score and save on an email or Word doc
    - The training registration team may ask for a screenshot of your score to verify your results
- The trainings are found on CalMHSA's LMS portal, there is a tip sheet on our webpage which goes over how to create an account on the portal

### Required LMS Trainings

#### SmartCare Basics for all Users:

- Message from Director
- Basic Navigation
- Privacy and Security in SmartCare
- SmartCare Clinical Workflow for Clinicians (Life Cycle of a Client):
  - Life Cycle of a Client: Requests for Services, Screening, and Intake & Assessment
  - Life Cycle of a Client: Services
- > SmartCare for Billing Staff
  - Billing: Adding Coverage & Eligibility

## Next Steps...

- You will receive an email with a quiz link and training survey link shortly. Please complete the survey and the quiz as soon as possible
  - You have 30 days after the date of training to take the quiz. If you wait past 30 days, you will need to retake training
- Once you complete and submit the quiz with a score of 80% or above, please reply to the e-mail from <u>bhs-ehrtrainingreg@saccounty.gov</u> so we can verify you've passed the quiz successfully
  - Upon successful completion, permissions will be added to your profile and you will be emailed your username and login instructions

### Logging in for the first time

>When logging in for the first time you will use the username provided to you by the Training Reg Team.

>You will use a temporary password of: Smartcare1

>After you log in, you will get a message that your password expired and it will prompt you to create a new one.

>In the old password section enter: Smartcare1

>The new password must be at least 8 characters long, containing 1 uppercase letter and 1 number

If you have any trouble logging in, please contact the EHR Help desk at 916-876-5806