



COUNTY OF YOLO

Health and Human Services Agency

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Meeting Minutes

Date & Time:	Thursday, July 18, 2019, 9:00 am – 10:30 am
Location:	HHSA Bauer Building #1600 Thomson Room, 137 N Cottonwood Street, Woodland
Subject:	DMC Organized Delivery System – Substance Use Disorder Services
Organizer:	Ian Evans, LMFT Alcohol and Drug Administrator Yolo County Health & Human Services Agency

- 1) Introductions/Program Updates: All** **10 Minutes**
 - CCHC provided update on Grant Award for Youth MAT services.
- 2) Provider Site Reviews: Sam** **10 Minutes**
 - QM Staffing Update provided
 - FY18-19 SUD Site Monitoring
 - 14 site visits conducted
 - QM will provide a summary of common deficiencies in August meeting.
 - FY19-20 Monitoring Schedule will be distributed in September.
- 3) SABG/DMC-ODS Audit: Sam** **5 Minutes**
 - High-level overview of deficiencies found by DHCS for SABG and DMC-ODS
 - CalOMS was a finding for both programs
 - Practitioner IDs and Recertification's will require changes in current processes that will be rolled out to providers in coming months.
 - A summary of findings will be provided to stakeholders in August meeting.
- 4) EQRO October: Sam** **5 Minutes**
 - The first SUD EQRO is scheduled for October 1st and 2nd. Emails will be sent out with additional information regarding what the requirements are for SUD EQRO.
 - Karen Baylor will be the lead reviewer, emphasizing HHSA's efforts towards Quality of Care, Access to Care, and Overall Outcomes.
 - Consumer focus groups will be geared towards clients and families 1) for residential tx clients; and 2) Perinatal clients.
 - QM will email providers once participations needs are identified. Additionally, invites for entrance and exit interviews will be sent out as well.
- 5) Fiscal year closeout: Ian** **10 Minutes**
 - Billing – Reminder to get all billing in through June 2019 as fiscal is working on year-end close.
 - RBA Reports – Reminder that RBA data reports are due at the end of the month. RBA summary provided by Ian, data sets should reflect 1st half (July –Dec) and 2nd half (Jan - June) of Year One of DMC-ODS.
 - Questions:

- Shannon Garza from CCHC provided updates on Episode corrections that are needed which are causing delay in billing. CCHC requests a review on granting access for providers to make corrections to their entries in Avatar to avoid such delays in the future. HHSA QM Staff Pam Sidhu responded with an update on allowing access to edit episodes. In the interim, HHSA fiscal staff are able to make corrections on behalf of providers. Samantha Fusselman from HHSA QM agreed that the process should be reviewed and would look into the request.
- Additionally, CCHC requested a continued review of including Daily Transactions/ billing function in AVATAR be developed. Continued discussions to be held to ascertain needs and capability.

6) Results First Initiative: Ian **5 Minutes**

- Ian provided an update on the Criminal Justice Partnerships and CSAC results. Phase 1 reviewed outcomes from probation criminal justice services obtained through data clearing houses. The goal, which focused on evidence-based data, was to determine a reduction in recidivism for Criminal Justice involved beneficiaries. Phase 2 would focus on population serviced by providers. A review of contracts to conduct a cost analysis based on contract award amount and number of criminal justice involved clients served would be completed. Ian to reach out to providers for additional information.

7) ASAM form in Avatar: Ian **5 Minutes**

- Ian reminded providers to complete the ASAM forms upon intake and discharge and ensure that they are being finalized as the data from the UCLA ASAM report is drawn from this form.
- Pam also noted that the Organizational Field in the ASAM Form should reflect the Provider/Organization that is completing the ASAM.
- Initial data from ASAM forms are being reviewed and updates will be made. HHSA QM staff will be reaching out to providers if any corrections/updates are needed.
- Questions:
 - CORE Medical – Cynthia Giddings requested clarification on procedures if a client unexpectedly drops out of the program. How should the ASAM be completed in this event? QM to review if an additional field can be added to the form to capture this data.
 - CCHC requested clarification if this form was a separate process than episode management. QM confirmed that it is a separate form.

8) Upcoming Trainings: Ian **5 Minutes**

- SUD Conference Aug 20-22nd
- Annual Integrated Care Conference Oct 16-17 (Topics: Mental Health, SUD, TAY, LGBTQ Services)
- Extending David Lee-Mee contract for additional ASAM trainings. Ian requests providers send him ideas and topics for what providers may find helpful or want to see through the trainings.

9) Access Line Update: Ian **5 Minutes**

- Rich Elmore is no longer over the access line contract. Any concerns with access should be sent to Ian Evans or Mila Green, Deputy Director of HHSA.
- CORE Medical provided information regarding Access Line. Access Line informed CORE Medical that they are only able to take one call at a time for Access Line Screening. Ian Evans stated that this should not be the case as they should have multiple lines available to taking access line calls. Ian to follow-up.
- CCHC also informed HHSA that the Access Line has been informing clients/caller that if they do not have Medi-Cal they are not eligible for services; therefore, the Access Line

Staff has not been completing an Access Screening. Ian Evans and QM confirmed that this should not be happening as all clients should be offered a screening as clients may be eligible through other funding sources or may be transitioning, etc.

- HHSa requests from providers to please obtain access line staff name and client info to forward on to Ian for follow-up.
- Additionally, access line test call forms can be sent out to providers to assist in tracking any issues/concerns regarding access line calls.
- QM also asks if providers are interested in completing test call, they can use the form and submit to HHSa Quality Management as this is state requirement. Bilingual test calls also needed.

10) ASAM Screening Updates: Ian

5 Minutes

- Ian informed providers that there are some necessary changes that are needed for the SUD assessment and screening forms, HHSa plans to change their Assessment to SUD Screening. This will be sent out to providers upon completion.
- Also a supplemental page will be included in the updated SUD Screening.

11) Transition of Services: Ian

5 Minutes

- Informed providers that if a client is moving through different level of cares (LOC), an access screening/ call to the access line is NOT Required. Completion of the ASAM form will capture changes in LOC for data purposes, so it's important to complete the ASAM form when clients move through the continuum.
- Questions:
 - If outpatient client is screened for a higher LOC (residential), but there is currently a waitlist to get in, should the Outpatient Provider continue to provide tx services in the interim until a bed opens up? Will this present an audit finding? **The risk of an audit finding is low as a client may opt to stay at a lower level of care if circumstances do not permit for residential tx services. This is allowable per DHCS. However, if the situation was reverse where the client screened to a lower LOC, such as Outpatient, but a provider placed and accepted the client in higher LOC, residential, this may result in an audit finding, unless there is clear and complete documentation which supports the decision for this. However, such cases should be first consulted with Ian prior to placement.**
 - If a client is currently at a 3.1 but is screened to 2.1, but there is no availability, should the provider continue to provide services? **Yes, but providers should work with each other to share ASAM screening results to facilitate smooth transition of care between different LOC providers, making sure to complete an ROI.**

12) General Questions and Information: Providers

30 Minutes

- Fourth and Hope addressed concerns regarding clients, upon successful completion of residential tx, finding that they have a GAP in service for housing for indigent clients. Ian informed providers that he intends to review year-end data and costs to determine if there is additional funding that can be found to increase funding for more Transitional Housing. More info to come.
- CCHC requested that they be given advance notice when the new DHCS Cost Report template becomes available to in order to align their cost allocation accordingly. Pam Sidhu – HHSa QM informed providers that the templates are made available to Counties through issuance of MHSUDS Information Notices which is also available to providers through the DHCS Website.

- Ian informed providers that they may have an opportunity to renegotiate rates in February 2019. Recommended that providers review their cost and prepare to submit any changes then.
- Ian informed providers that El Dorado County went LIVE for DMC-ODS in April, while Sacramento County just went LIVE this month in July. Partnership Health Plan is currently conducting their Readiness Review and will represent many of the smaller Northern California Counties and Solano County as the DMC-ODS Plan, providing general administrative support for access line, quality management activities, etc, while contracting with counties for tx services. Currently, they are negotiating a per member rate rather than by per service. More updates to come.

13) Next Meeting

5 Minutes

- Future Items to discuss?
- Future presentations desired?