



## SOLANO COUNTY QUALITY ASSURANCE

### QA INFORMATION NOTICE 23-08

AUGUST 1, 2023

**PURPOSE:** To inform our Solano County staff, contractors and general community of changes in programs, policies, or procedures at the local, State and Federal levels.

QA Information Notices (INs) are sent out monthly and posted on our [website](#).

#### GENERAL UPDATES

##### **23-08 (A) CalAIM – CALIFORNIA ADVANCING & INNOVATING MEDI-CAL (COUNTY & CONTRACTOR)**

Thank you to everyone for participating and managing all the new information, unforeseen issues, and continued updates in relation to Payment Reform. Solano BHP continues to identify and address issues as well as seek clarity from DHCS, CalMHS, and other counties as situations arise. There will continue to be clarifications and updates made moving forward as information is learned. Everyone's patience and communication are greatly appreciated! QA intends to use the QA IN as a dissemination tool for frequently asked questions and clarifications as Payment Reform unfolds. Please reach out with any questions.

**23-08 (A.1) Clarifications for Billable Time When Receiving a New Case:** When a provider is receiving a new case (e.g. receiving an assessment from CAT, receiving a transfer from another BHP program), the Psych Eval of Ext Records (90885) service code can be used for clinically appropriate evaluation of a client's medical record within the following parameters: this occurs one time upon receiving the case, no more than 15 minutes are billed, and the code is within the provider's scope. Information can also be reviewed with a client in a treatment session using the appropriate service code to capture further clinically needed evaluation of a case.

**23-08 (A.2) Billing/Service Code Selection:** QA wanted to reiterate the guidance to use the previously provided spreadsheet of Solano's current CPT codes. Staff are reminded to use the codes listed on the spreadsheet identified as "Codes to select in or upload to Avatar". For staff entering progress notes in Avatar, do not pay attention to other codes (e.g. old codes, codes with various time ranges and do not match the spreadsheet).

- For example: Select Therapy 90832 NOT 90836
- An additional simplified "At-A-Glance" guide of codes by provider type will be posted soon

**23-08 (A.3) Clarification for Comprehensive Medication Service (Telephone - Audio Only) (99441):** This code is to be used by psychiatric providers when providing a comprehensive medication visit over the phone or on a telehealth platform without video. The current guidance from DHCS is that the maximum amount of time allowed to be billed for this service is 30 minutes. It has been clarified that add-on codes are **not** allowed to be used, meaning that direct service minutes beyond 30 are not reimbursable.

- Psychiatric providers are asked to write the total direct service time, if beyond 30 minutes, within the narrative of the progress note

**23-08 (A.4) Group Progress Note in Avatar:** For right now, please enter the max time allowable for the accurate service code to be able to submit your note. In the "Default Note" that you create, please mention in there the actual time of the group (for example 48 minutes).

- Please send QA a copy of your Group Log. QA will ensure that this gets corrected on the back end so that the full and accurate time gets claimed

**23-08 (A.5) Clarifications Regarding Student Trainees:** DHCS has identified issues regarding Student Trainees not having access to appropriate service codes to reflect the work they conduct – there are steps being made at the state level to correct this. At this time, Solano BHP continues to allow Trainees to complete assessment, diagnosis, MSE, and therapy activities if they have enough training/course work to support them AND regular clinical supervision.

Until further clarification is received from DHCS, Student Trainees should use non-LPHA billing codes. Please also follow this additional guidance:

- MH Assessment (Non-LPHA & Student Trainees) (H0031) – Student trainees will bill this code for assessments
- Psychosocial Rehabilitation (Individual H2017I & Group H2017G) – Student Trainees will bill Rehab codes for therapy services. These notes will be written/documentated as therapy services
- Student Trainees require a co-signature on ALL clinical documentation

**23-08 (A.6) Guidance for Avatar Scheduling Calendar Codes:** There are issues with attempting to use the new service codes when making appointments on the Avatar Scheduling Calendar. QA has received reports that there are certain new service codes being used for appointment scheduling that populate alerts about maximum durations. This is impacting the ability to schedule accurate times for appointments. For those scheduling appointments; if you run into this situation:

- For Assessment (90791), use MH Assessment (H0031) to indicate on the calendar that it is an assessment appointment
- For other services, use the old version of that code to make the appointment
- **Providers will select the new/accurate code based upon Payment Reform when completing the progress note for the service.**

**23-08 (A.7) New Codes for Certified Peer Support Specialists (PSS):** There are 2 new codes that are available for Certified Peer Support Specialists to use.

- Self Help Peer Services (H0038) – Service billing code for Certified Peer Support Specialists when providing a service to client involving engagement and therapeutic activity. This billing code is used to document specific peer services provided to an individual.
- Peer Services – prevention education services (H0025) – Service billing code for Certified Peer Support Specialists (PSS) when providing behavioral health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior), and skill building groups. This billing code is used to document specific peer services provided to a group.

Staff who are PSS but not certified will *not* use these codes but will continue to use the appropriate non-LPHA codes.

### **23-08 (B) BENEFICIARY APPEAL REMINDERS (COUNTY & CONTRACTOR):**

Following the receipt of a non-engagement or not meeting medical necessity NOABD by the BHP, a client has 60 calendar days from the date on the NOABD in which to file a request for an appeal. The BHP has 30 calendar days to resolve an appeal. An appeal may be made orally or in writing.

When staff received request for services from a client previously seen within the BHP, staff need to check in Avatar or program medical records to see if a NOABD has been sent within the past 60 days in order to determine if a request from a client is an appeal. If determined that it is an appeal, please notify the QA Unit within 24 hours of the request to keep in compliance with State Mandates.

### **23-08 (C) SOLANO COUNTY AUDITS FY23-24 (COUNTY & CONTRACTOR):**

Solano County QA will begin to conduct audits of Contractor and County programs in the fall of 2023. These audits will be expanded from the last review tool – they will focus on complete intake documentation, meeting of CalAIM requirements, and detection of fraud, waste, and abuse. Please note: QA will be sending a request to all programs who will be audited requesting a template or example of certain forms prior to the audits beginning in order to review certain requirements ahead of time. An updated *Utilization Review Handbook* will be issued to reflect the updates to this audit year's process.

### **23-08 (D) COMPLIANCE TRAINING BASICS & HIPS TRAININGS AVAILABLE FOR YEARLY REQUIREMENT (CONTRACTOR ONLY):**

Solano County Compliance has posted the Solano County versions of Compliance Training Basics and HIPS trainings on Vimeo that are provided for Solano County staff. Previously, these trainings were not available to our Contractor programs. These are not meant to replace a Contractor program's specific trainings – these are meant to be an option if needed for staff to meet the annual requirement for these trainings. County staff must continue to take these trainings, when required, via Vector Solutions in order for completion to be tracked.

**Disclaimer:** These presentations were created and intended for educational purposes of Solano County Health and Social Services department and staff. The information provided in these presentations does not and is not intended to constitute legal advice. Participants should seek independent legal advice and use professional judgement. The information provided must be adopted to your organization's business policies and procedures.

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### **23-08 (E) IHBS AUTHORIZATION CLARIFICATION (COUNTY & CONTRACTOR):**

The pre-authorization requirement for Intensive Home-Based Services (IHBS) has not changed due to CalAIM. All programs providing IHBS to clients shall request pre-authorization initially and annually. To request IHBS service authorization, a program must submit the following documents to their QA Liaison:

- CalAIM compliant Mental Health Assessment
- CalAIM compliant plan that includes IHBS as an intervention/service being provided
  - Treatment for FSP/STRTP Programs
  - Care Plan for all other programs
  - Fully completed Service Authorization Request (SAR) form

At this time programs need to coordinate with one another regarding authorization for IHBS services to make sure anyone who needs authorization received it. QA continues to review this process and will inform the system when any changes are made.

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### **23-08 (F) MYHEALTHPOINTE UPDATES (COUNTY ONLY):**

The myHealthPointe patient portal that partners with our Netsmart Avatar EHR is continuing to move forward in terms of readiness. Solano QA and DoIT staff are in the final stages of testing before we are ready to begin working with a few County programs as a pilot. Initially, the idea will be to work with clients when they show for appointments to see if they are interested in enrolling in the patient portal and then providing them instructions on how to use it. We will also need any program that has clients actively using the patient portal to be responding to appointment and medication requests and utilizing other functionality like text message appointment reminders.

Once we have successfully piloted the portal in a few programs, QA/DoIT will roll out to additional County Programs and provide training. Initial piloting expected to begin in late August or early September.

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### **23-08 (G) PROTECTIVE ORDERS POLICY POSTED (COUNTY AND CONTRACTORS):**

[QA IN 23-06](#) outlined required processes based upon a law effective February 1, 2023, requiring that healthcare providers must have protocols that will prevent the disclosure of any information of a minor client to a party identified by the court in a restraining order.

Solano County's Policy and Procedure ADM152 *Protective Orders and Children's Information* has been [posted on SharePoint](#) for County staff and will soon be [posted on the Network of Care](#) for Contractor programs. **Please have all staff review this policy as soon as possible and implement processes outlined immediately.** Please reach out the [QualityAssurance@SolanoCounty.com](mailto:QualityAssurance@SolanoCounty.com) with any questions.

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## **AVATAR UPDATES – NO AVATAR UPDATES THIS MONTH**

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We look forward to continuing to partner on implementing this and future State and Federally mandated initiatives that help to inform and protect the rights of those we serve.

Approved by Rob George, LCSW  
MH Services Manager, Sr., Quality Assurance, Access/Managed Care, Avatar Planning

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