



# SOLANO COUNTY QUALITY ASSURANCE

## QA INFORMATION NOTICE 22-12

DECEMBER 1, 2022

**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

#### **22-12 (A) CalAIM – CALIFORNIA ADVANCING & INNOVATING MEDI-CAL (COUNTY & CONTRACTOR)**

##### **22-12 (A.1) UNIVERSAL SCREENING & TRANSITION TOOLS: GOING LIVE JANUARY 1, 2023**

DHCS released a draft Information Notice at the end of October to introduce Behavioral Health Plans (BHPs) and Managed Care Plans (MCPs), like Partnership Health, to the Universal Screening tools for youth and adults, and to the Universal Transition tool. DHCS also held a webinar training on November 3, 2022, to provide information on how to use the tools and timelines for going live.

**Screening Tools:** There will be two different screening tools for individuals who are not current clients: a youth/parent of youth screening tool and an adult screening tool. The tools are to be used when a beneficiary is initially requesting services to determine what system of care is the best match for the beneficiary's service needs. Each tool produces a score which should direct the screener to what system of care is most appropriate.

**Transition Tool:** There will be one transition tool for Adult and Youth beneficiaries to determine if the person currently being served in one service system (either the BHP or the MCP) needs to be transitioned to the other service system to align with their care needs.

**Timing for Go-Live:** Solano BHP QA Team will put together a training as we get closer to the Go-Live date of January 1, 2023.

##### **22-12 (A.2) GUIDANCE FOR FIRST BILLED SERVICE AFTER ASSESSMENT**

New CalAIM regulations allow services to be provided before the completion of an initial assessment. Many youth programs became accustomed to the process of billing Plan Development at the first service after receiving a referral from the Centralized Assessment Team (CAT) due to reviewing the Client Service Plan and obtaining signature(s). All programs should be aware that other treatment service codes are allowable at this initial appointment based upon the service provided.

#### **22-12 (B) REMINDER: QA MONTHLY CLINICAL MEDI-CAL DOCUMENTATION TRAINING REQUIRED FOR ALL NEW STAFF (COUNTY & CONTRACTOR):**

A reminder that any new staff, within the County or in Contractor programs, are required to attend the earliest Clinical Medi-Cal Documentation training provided by Quality Assurance. This training is typically offered the first Thursday of every month. For new staff this training will meet the requirements of the CalAIM training going forward. If you have questions about documentation training, please contact your QA Liaison or [QualityAssurance@SolanoCounty.com](mailto:QualityAssurance@SolanoCounty.com).

#### **22-12 (C) UPDATED SERIOUS INCIDENT REPORTING (SIR) REFERENCE GUIDE (COUNTY & CONTRACTOR):**

QA has updated the "Serious Incident Reporting (SIR) Reference Guide" due to requests for clarifications in various areas. It includes specific examples of when to submit an SIR, details about considerations for deciding if an eSIR should be submitted, and directions on how to complete the required electronic submission process via [Symplr](#). Please carefully review the guide and use this version moving forward.

- ◆ County staff can find the guide in [Reference Materials on SharePoint](#)
- ❖ Contractor staff can find the guide under ["Reference Materials" on the Network of Care](#)

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## **22-12 (D) PROBLEM RESOLUTION REPORTING PROCESS (COUNTY & CONTRACTOR):**

It is mandated by the State to maintain a centralized beneficiary problem resolution process, housed and operated within the BHP Quality Assurance Unit. In compliance with State and Federal regulations, this provides an impartial and effective process for resolving beneficiary problems encountered while accessing or receiving behavioral health services.

Problem Resolution includes grievances, requests to change provider (RCP) and appeals received verbally or in writing (including electronic communication). Forms are in all programs' lobbies to be available to clients at all times. A beneficiary can submit a grievance, RCP or appeal even if they do not use the official form. Furthermore, any staff may assist a beneficiary with completing a form or may complete a form on behalf of a beneficiary (e.g. a beneficiary calls in an issue) and submit it to QA. All staff should assist a beneficiary in submitting any Problem Resolution item in whichever form/fashion is necessary to report the issue to QA.

In order to meet the State mandates, both County and Contractor staff receiving any grievance, RCP, appeal must forward the item to the County QA department within 24 hours of receipt for logging, review and resolution. **All County and Contracted providers are required to forward all grievances to the central BHP Problem Resolution Coordinator and cooperate with the grievance process by submitting any grievances within 24 hours as mandated by the State.** If this timeliness is not met, the BHP is out of compliance.

For Contractors that have their own problem resolution process, this process does **not** replace the requirements to report to the Solano County QA Problem Resolution Coordinator. This internal process would be parallel to the County process and requirements for reporting.

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## **22-12 (E) 274 REPORTING MONTHLY REQUESTS (COUNTY & CONTRACTORS):**

As mentioned in [Solano County's July QA Information Notice](#), DHCS has rolled out what is being called the **County Mental Health Plan 274 Provider Network Data Reporting**. This process is described in [Behavioral Health Information Notice \(BHIN\) 22-032](#) and is replacing the yearly NACT process. BHPs are required to submit complete, accurate, reasonable, and timely provider data on a monthly basis. BHPs that fail to meet the reporting requirements may be issued a Corrective Action Plan and be subject to sanctions or penalties for non-compliance.

This will be a **monthly** data submission process to ensure Solano BHP's compliance with State and Federal network adequacy standards. QA Liaisons will reach out to programs directly at the beginning of each month to provide information collection tools for programs to update regarding organization, site, and staff. **All programs are required to fully and thoroughly complete/update all information in a timely manner each month.** There are strict timelines of submitting the collected data to the State, so QA will be working closely with programs to ensure that all data is provided on time and is thoroughly completed.

As this is a new process for all involved, QA is available to offer as much support as possible. We are also asking programs to provide feedback on the process and collection tools so that improvements and efficiencies can be made. QA is also working on a way to combine this process with the current monthly tracking process to reduce the number of requests being made for this required information. Everyone's support and patience in navigating this new process is appreciated!

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## **22-12 (F) NEW BBS TELEHEALTH TRAINING REQUIREMENT (COUNTY & CONTRACTORS):**

Effective July 1, 2023, there is a new training requirement for existing licensees and applicants for licensure. The requirement is a for 3 hours of Training or Coursework in the Provision of Mental Health Services via Telehealth. For more information about the requirements for your particular status, please review the [BBS FAQ Document](#).

## **AVATAR UPDATES**

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**22-12 (G) NEW AVATAR MEDICATION PROGRESS NOTE CalAIM22 (COUNTY ONLY):**

As of December 2022, the new *Medication Progress Note CalAIM22* is to be used by psychiatric providers completing progress notes in Avatar. This progress note meets all CalAIM requirements and provides functionality to complete an assessment update/addendum as well as a Care Plan. There is an associated *Report 246P Psych Ax/Dx Update CalAIM22* that will provide a standalone assessment update/addendum completed by a psychiatric provider using that functionality within the progress note.

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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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**CONTACT QA:**

[QualityAssurance@SolanoCounty.com](mailto:QualityAssurance@SolanoCounty.com) PHONE: (707) 784-8323 FAX: (707) 427-2774