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| Project Meeting Name: **Individual/Group Provider Monthly Meeting** | | Date:  **October 6, 2023** |
| Meeting Location: Virtual | Start Time: 8:15 AM | End Time: 8:45 AM |
| Facilitator: Francisco Escobedo | Note Taker: Jennifer Beck | Sponsor: Marcy Black |
| Meeting Attendees: Francisco Escobedo, Jennifer Beck, Sarah Weins, Sarah Thomas, Michelle McWilliams, Arlene Liles, Meng Moua, Justin Jimenez, Rohina Fazil, Valerie Curley, Lori Lopez, Linda Nebeker, Valerie Chavez, Nadereh Fanaeian, Lucio Rosa, Blanca Godinez | | |

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| **Meeting Summary** | | |
| **Topic/Deliverable** | CalMHSA EHR | |
| **I. Announcements:** | **Lead Presenter** | **Francisco Escobedo** |
| **Status/Update** | **Purpose of Meeting:** To communicate to Individual/Group Providers any new and upcoming events/significant system and process changes to our delivery system and address and issues/concerns that impact beneficiaries.   1. **Resources:**  * **Managed Care web page -** [Managed Care - County of Fresno (fresnocountyca.gov)](https://www.fresnocountyca.gov/Departments/Behavioral-Health/Providers/Managed-Care) here you will find, Mental Health Services, Provider Directory, 5150 Re-certification and our MC Individual/Group Provider monthly meeting Agenda/Minutes/Handouts * **DBH CalAIM -** [CALAIM - County of Fresno (fresnocountyca.gov)](https://www.fresnocountyca.gov/Departments/Behavioral-Health/Providers/CALAIM) ; here you will find CalAIM Web-based Trainings, CalAIM Documentation Manual, previous Managed Care Individual/Group Provider Office Hours and trainings  1. **DBH Contact:**  * **Compliance** – questions related to Payment Reform; [DBHCompliance@fresnocountyca.gov](mailto:DBHCompliance@fresnocountyca.gov) * **Managed Care** – if you need to reach out to Managed Care call (559) 600 – 4645. * Questions can be sent to email at [MCare@fresnocountyca.gov](mailto:MCare@fresnocountyca.gov) .  1. **Add-On Codes (Board Briefing Report)**  * Interactive Complexity * Sign language/Oral interpretation * Letter to Individual/Group Providers (require signatures) |
| **Action Item(s)** | **Who:** Individual/Group Providers  **What:** Providers to return signed letters to Managed Care  **When:** Upon receipt |
| **II. Claims:** | **Lead Presenter** | **Meng Moua** |
| **Status/Update** | 1. **Provider Claims – Drop Off**  * Claims are to be hand delivered or mailed to Health and Wellness Center, 1925 E. Dakota Ave, Fresno CA 93726; email delivery is not acceptable. |
| **Action Item(s)** | **No Action Required** |
| **III. Site Certification:** | **Lead Presenter** | **Jon Rogers** |
| **Status/Update** | 1. **Moves/Telehealth**  * Reminder to notify DBH, Managed Care of any moves from current facility/office |
| **Action Item(s)** | **No Action Required** |
| **IV. Q & A:** | **Lead Presenter** | **Managed Care** |
| **Status/Update** | **Q: Is there a list of approved codes for the SmartCare System?**  **A: We do have a list we will send out. We have two new items to add**  **Q: I had a couple of claims returned as the diagnosis is not correct, but it has not been an issue in the past so I would like to make sure I use the correct codes?**  **A: If a claim is denied the reason will be submitted on the denial letter. Please review note or call Managed Care if needed.**  **Q: Does DBH MC have enough manpower to enter the load of claims submitted?**  **A: We added more staff to enter SmartCare, we do have a learning curve with the new process and the process is more time consuming than Avatar.**  **Q: Regarding SmartCare has the process been streamlined or is there some kinks that still need to work out?**  **A: We do have the process down and have found work arounds to get the process done when we run into issues. Most kinks have been fixed.**  **Q: Can you clarify how SmartCare is calculating units, is it being calculated manually or automatically?  We have seen a few errors calculating units.**  **A: Yes, SmartCare automatically calculates the rates. However, based on our understanding of the rates, SmartCare is not behaving according to our understanding. For example, procedures with a duration range of 16-37 should default to the 30-minute payment. However, what we are seeing is minutes between 31-45 defaults to the 45-minute payment, and minutes 46 and up defaults to the 60-minute payment. We need to address the issue with CalMHSA, our liaison to SmartCare and verify if this is an error or if this is how it’s supposed to behave.**  **Q: Are we any closer to SmartCare lite for users to enter their own claims?**  **A: Jan. 2024 MCO will be available**  **Q: Can we get more information on Interactive complexity?**  **A: To claim Interactive Complexity their mut be a circumstance with barriers, as in more complex language differences. An example is when a child is bilingual and the parent is not, vs. had to repeat in both languages. The CPT manual has a description that you can look further into. You cannot claim IC just because you are providing services in a clients preferred language. Providers are only allowed to add 1 unit of IC to service.** |
| **Action Item(s)** | **No Action Required** |
| **V. OTHER Items:** | **Lead Presenter** | **Francisco Escobedo** |
| **Status/Update** | 1. **Call for Agenda Items:** 2. **Next Scheduled Meeting:**  * **Friday, November 3, 2023, 8:15 am** |
| **Action Item(s)** | **No Action Required** |