***County Representatives****:* ***Marcy Black****, Jennifer Beck, Francisco Escobedo, Jon Rogers, Joseph Rangel, Kathy Rexroat, Natalie Armistead, Elizabeth Barreneche, Justin Jimenez, Mary Johnson, Sean Patterson, Francisco Escobedo, Julie Thao, Dominica Tamayo, Michael Muro, Brian Fenne, Gregory Wongsing*

***Individual/Group Providers:*** Juan Garcia, Victoria Montufar, Valerie Curley, Curtis Donovan, Victoria Cole, Gerardo Madrigal, Laura Romero, Blanca Godinez, Elsa Quintanilla, X. Vang, Serena L, Dr. Kimberly Jones, Don Ferris, Rosalva Rivera

1. **Purpose:**

To communicate to Individual/Group Providers of status updates due to CalAIM and Payment Reform. We will discuss a few recent/past topics and allow for a Q&A.

1. **Executive/Leadership Statement:** We are diligently working to understand and push out information as quickly as possible. Ask us the questions you need to let us know, as maybe you have thought of questions that we have not thought of. We will get through this together and have the answers by the time SmartCare goes live. We want to assure everybody the department remains committed to ensuring providers are paid timely and to providing you information as soon as we get it. We will get there together, and the answers will come. We just need to be patient, even though it's difficult, when there's two weeks away. So, thank you for attending today. Please bring up any questions you have and know that we are diligently working with CalMHSA and Smart Care to gather all answers to questions and get that out to you as quickly as possible.

We will meet next week on the 23rd there after we will continue office hours July 7th then every other week after.

**Introduction:**

Thank you for partnering with DBH to continue providing SMHS to County beneficiaries and coordinating with MC team members to meet the BOS, Board date of June 20, 2023. Two things I would like to emphasize on behalf of the Department: ***County Payments*** & ***Claims Submission***

***Payments*:**

* + DBH Finance would like me to emphasize to all individual/group providers approved claims for treatment services will be paid accordingly and timely without disruption. The department would like to encourage individual/group providers to continue to focus on serving clients.

***Claims Submission***

* **Option 1 – Limited EHR User**
	+ Only applies to Bio Behavioral Health Medical Clinics
	+ County will provide, a “How To Guide”, training and technical support to access SmartCare and enter claims.
	+ DBH, IT requires, IT Contact person to act as a liaison between County and Bio
* **Option 2 – CMS 1500 Forms**
	+ ***CMS 1500 Forms:*** effective July 1, 2023, Individual/Group Providers are to continue utilizing CMS 1500 Forms.
	+ **TBD** – whether CMS 1500 Forms utilize CPT or SmartCare Procedural Codes; DBH will communicate directions. County is working with CalMHSA and Streamline (SmartCare).
	+ **Option 3 – MCO Module** *Mechanism that allows Individual/Group Providers to enter claims into County’s EHR – SmartCare.*
	+ ***Anticipation Date:*** Operational mid-July 2023.
	+ ***Testing & Approval:*** will require testing and approval prior to being released/accessible to Ind/Group Providers. DBH, Finance, Contracts, Managed Care, and IT will assess for approval.
	+ ***Individual/Group Provider Transition:*** Once approved and implemented, Managed Care team members will assist and provide technical support to individual/group providers to transition from CMS 1500 Forms to SmartCare – MCO Module.

***Continued Meetings*:**

* DBH, Managed Care Division, will seek to continue Individual/Group Provider meeting on a regular basis or as needed to communicate with all providers. Topics may include *payment for claims*, *claims process*, *technical support*, *credentialing*, *site certifications, contracts,* and other ancillary items related to deliverable services.
1. **Questions & Answers**

***Send Questions To:***

Questions related to the contract: mcare@fresnocountyca.gov

Questions related to CPT coding: DBHCompliance@fresnocountyca.gov

**Q**: **Regarding CPT and Smart Care Codes when will the date be finalized what codes we will be using?**

A: We are hoping to have it before June 20th, we will communicate as soon as we receive the information.

**Q: CMS 1500 forms, can there be a place I can go to make sure they are correctly filled out, is there a faster way to get that information as it is taking 2-3 weeks to get notice of error.**

A: We are looking at a change in our processes, but we won't know that until we figure out exactly if we're going to utilize the MCO and or if there's going to be any changes to our entry for claims from Smart line streamline smart care.

**Q. Metal health assessment form was still locked.**

A: The website is updated, and you will no longer need the password. If needed the password is hipaa lowercase

**Q:** **We had a rejection since the patient had Medicare as well as medical. Do we bill Medicare first then once we receive a rejection, would we rebill Medical?**

A: Yes, we would like you to bill Medicare first get a denial then bill us. Medical is the last to be billed as a secondar insurance Finance response: MC is correct. DBH must have a denial letter from Medicare before we can bill Medi-Cal.

**New Q&A as of June 16, 2023**

**Q**: Just to clarify, we are starting July 1st, but with June billing or will we wait till July ends to start using CPT codes for July?

**A**: We will continue to use Avatar Procedural codes until July 1st. We cannot use the new codes before July 1st. Effective July 1, 2023, we will use the CPT codes or smart care codes, we will continue with the 1500 forms. Through June 30th, 2023, continue to use Avatar codes. So, all your services that you're providing through the month of June are avatar service codes, so nothing changes until July 1st. When you submit you 15000 forms, please do not mix June & July services on your claims. On July 1st you will use the new process as to be determined. As of June, continue to use Avatar procedural codes. Please do not mix June & July services on one claim form.

**Q**: For a private provider like myself, I am contemplating contracting out with some other system, should I join SmartCare or look for an alternative while I wait?

**A**: We would like everyone to use SmartCare, that is the goal that we have shared with everyone in terms of a time frame would look like. My initial guess is we're looking at fiscal year 2023-24, so that would be starting between this July and this time next year. We will be talking about and trying to look at ways to expand and on-board vendors. There is a module in the new SmartCare EHR that we go live with July 1st called MCO that will be ready sometime the next fiscal year geared for contractors. In my opinion you do not need to invest in another platform as patience is they key now.

**Q**: Do we have the crosswalk ready for providers yet?

**A**: We were getting ready to provide the information then there were more codes added by SmartCare and CalMHSA, so it will be pushed out to you as soon as we have it updated with the additional procedural codes.

**Q**: Do all the registered providers need to take MHSA and CPT trainings?

**A**: Yes, all registered providers need to take the calling MHSA and CPT trainings

**Q**: I have been trying to get a CPT fee schedule or rate sheet. Has the County made on yet**?**

**A**: The rates are no longer based on service being provided, the rates are based on the type of practitioner or license.

**Q**: How will the county interpret the minutes when I send CPT code 99213 or 99214**?**

**A**: Based on the CPT codes given, 99213 is for 20-29 min and 99214 is for 30-39 minutes and that's for an established patient.

**99212** - Office or Other Outpatient Visit of an Established Patient, 10-19 Min

**99213** - Office or Other Outpatient Visit of an Established Patient, 20-29 Min

**99214** - Office or Other Outpatient Visit of an Established Patient, 30-39 Min

**99215** - Office or Other Outpatient Visit of an Established Patient, 40-54 Min

**Q**: where are the new CPT codes found**?**

**A**: The link is embedded in our agenda in our resources section. Cal Aim training goes over an extensive list of CPT codes. <https://www.dhcs.ca.gov/services/MH/Pages/MedCCC-Library.aspx>

1. **Board Agenda Item/Amendment I to Agreement No. 20-236**
* BOS Date: **June 20, 2023**
* Beginning July 1, 2023, there will be a total of 41 Individual/Group Providers; (four (4) discontinued and three (3) new providers added to Amendment).
* Amendment
	+ Extends the agreement for an additional 12 months (7/1/23 - 6/30/24)
	+ Includes new BHQIP, CalAIM, and County contract language
	+ New rates (revised exhibit B)
1. **Rate Sheet**
* Payment is based on the type of license, program type, and select the code
* Rates are by licensure and program Type – Face-To-Face Time (Transportation/Documentation services is already built into Rates)

|  |  |  |
| --- | --- | --- |
| **Provider Type** | **Provider Rate Per Minute** | **Provider Rate Per Hour** |
| Psychiatrist | $4.88 | $292.95 |
| NP (Nurse Practitioner) | $4.65 | $279.00 |
| Psychologist (Licensed/Registered/Waivered) | $2.01 | $120.33 |
| LICENSED - LCSW/ASW, LMFT/AMFT, LPCC/APCC, RN - MS | $2.01 | $120.33 |
| UNLICENSED - LCSW/ASW, LMFT/AMFT, LPCC/APCC, RN - MS | $1.71 | $102.60 |

1. **Trainings**
* ***May 4, 2023 Training*** – Service Coding and Documentation Coding – General Power Point
* ***May 11, 2023 Training*** – Introduction to Procedural Codes
* ***Expert User Training*** – SmartCare Self-Paced/Moodle Training for Super User Trainings (now available) Expert Users to go back and refresh as needed.
* ***June 1, 2023 – CalMHSA*** CPT Trainings
* CPT Codes Moodle training is now available and can be accessed at:

<https://moodle.calmhsalearns.org/login/index.php>

* ***End User Training*** – to begin ***June 6, 2023***
* ***June 20, 2023*** – Q&A with CalMHSA/Streamline
1. **Additional Resources**

***Individual/Group Provider******Q&A***

For up to date Individual/Group Provider Q&A please go to the Department of Behavioral Health, web page CalAIM section click on the link: [Cal AIM | County of Fresno](https://www.co.fresno.ca.us/departments/behavioral-health/providers/calaim) Office Hour Recordings can be found at: <https://www.fresnocountyca.gov/Departments/Behavioral-Health/Providers/CALAIM>

***DHCS Library of Resources****:*

<https://www.dhcs.ca.gov/services/MH/Pages/MedCCC-Library.aspx> (contains latest billing manual) or [Billing Manual](https://www.dhcs.ca.gov/services/MH/Pages/MedCCC-Library.aspx)

**Transportation:**

Transportation is transporting the person served. The Managed Care Plan (CalViva and BlueCross) are responsible for transportation. MCP’s contact info: <https://mss.anthem.com/california-medicaid/benefits/medi-cal-plan-benefits/transportation.html>

[How-to-Get-a-Ride-for-Health-Care-Services-Brochure.pdf (calvivahealth.org)](https://www.calvivahealth.org/wp-content/uploads/2022/08/How-to-Get-a-Ride-for-Health-Care-Services-Brochure.pdf)

<https://www.calvivahealth.org/wp-content/uploads/2022/08/How-to-Get-a-Ride-for-Health-Care-Services-Brochure_SPA.pdf>

<https://www.calvivahealth.org/wp-content/uploads/2022/08/How-to-Get-a-Ride-for-Health-Care-Services-Brochure_HMG.pdf>

**Documentation Manual:**

<https://www.fresnocountyca.gov/Departments/Behavioral-Health/Providers/Contract-Provider-Resources>