DMC-ODS Technical Assistance Conference Call  
Tuesday, June 20th, 2017  
1-2:30PM

Call information:  
Conference line: 888-636-3807  
Participation code: 566983  
Host code: 605984 (Clara or Paula to host)

Agenda

1. Participants:  
   a. Treatment Provider Staff:  
      i. El Centro: Colin Laver, Maria Cerrillo-Hernandez  
      ii. Free At Last: Elizabeth Chewning, Sue Cortopassi, Gerardo Barragan  
      iii. First Chance: Mark, Jeanelle  
      iv. Health Right 360: Anissa Moore, Chris Kernes  
      v. Our Common Ground: Orville Roache  
      vi. Project 90: Dave Clemens, Jim Buckner, Jason Brewer, David Meeds  
      vii. Service League Hope House: Karen Francone, Morrigan Bruce  
      viii. Sitike: Joe Wagenhoffer  
      ix. Star Vista: Nancy Quiggle, Stephanie Weisner  
      x. The Latino Commission: Oscar Blancas, Maria Newson, Berman Icabalceta
   
   b. BHRS-AOD Staff  
      i. Christine O’Kelley  
      ii. Clara Boyden  
      iii. Daniel Lanzarin  
      iv. Denise Campos-Gomez  
      v. Denise Mosely  
      vi. Diana Hill  
      vii. Doreen Avery  
      viii. Eliseo Amezcua  
      ix. Kim Westrick  
      x. Matt Boyle  
      xi. Nancy Ferreira  
      xii. Paula Nannizzi

2. Announcements:
a. There will be a meeting with residential intake coordinators at 1pm at Pioneer Court, Health Right 360.
b. Santa Clara and San Francisco counties went ODS-live on June 10th.

3. **TA Call Format Feedback:**
   There is a general consensus that the current format is sufficient. Suggestions included: Put all residential items at the end of each call; continue with the monthly phone meeting plus a quarterly, in-person TA for forms, needs of treatment program; notify providers about upcoming in-person trainings to fulfill the need for hands-on training.

4. **Billing and Fiscal Workflow:**
   Fiscal reconciliation has changed. We are requiring that all providers start using the DHCS 100186 DMC claims wet signature form. Submit this form by the 10th of the month after the service has been provided. We’ll go over this at the provider meeting, including a workflow. Please review the form before the meeting. The county will set the standards on the DMC submission identifier. This aligns with your invoice process but this form should be sent straight to MIS. MIS hasn’t been able to enter the services over 90 minutes for group. We will need a training for the cost report. Paula will develop a workflow to feel comfortable certifying claims.

5. **UCLA Client Survey:**
   We’ll be implementing the UCLA client survey twice a year. We’re still settling on the dates in July and November. We want to receive your survey responses in May/June and then again in November. The questions include client satisfaction, sensitivity, and client perceptions of treatment. There are 14 questions. The expectation is that you’ll give them to all your clients over a 1 week period. The survey is given to every single client who comes to get services in one week.

6. **Continuum of Care:** What reporting needs do we have?
   What reporting needs do we have, what kinds of reports would be helpful to develop for you to know? It is an issue that only a very low percentage of clients in detox move onto treatment. What do we need to know to get clients to stay engaged and either go up or down in intensity in treatment? We will share examples of reports at an upcoming treatment provider meeting so we can discuss how you can get those reports and what other reports would be helpful to understand the continuum of care and any gaps. The purpose is to evaluate how well you’re coordinating care within your programs.

   There should be a report to know what programs clients are in before and after coming to a program. This would show if they have been to residential already. Where do they go after they leave a program? Who was referred/not referred? There should be a report showing clients whose primary or secondary drug is an opiate, who are not connected to specific opiate treatment. It would be helpful to get a report showing medications a client is on, rather than getting a list from their doctor, PCP, etc. Clara will share performance measures in a future meeting.
7. **In-take:**
When intake coordinators are out of the office, please notify the RTx team who to contact instead. To do this, please call 6400 and ask for the OD (Officer of the day).

8. **UCLA Tracking Sheet:**
We’ll ask each live provider to enter information on each client into an excel file. Ex: date of screening or assessment, Client ID Number, Name, DOB, level of care indicated. Do this when you use the initial ASAM screening tool. We’ll be sending this out to you soon so you can look at it. If the level of care they got was different than what was indicated, please use the dropdown box to share the reason why. This applies to all providers whether you’re ODS live or not. This will be general workflow for all of AOD—Clara will send this out electronically as soon as it is sent out.

9. **Provider Updates:**
Free At Last and most of StarVista’s programs will go live on July 1st
Project 90 will go live on August 1st
HR360’s EPA house DMC certification was denied. They will send a copy to their analyst.
Probation department is working on showing medical necessity using the ASAM.