**Individual/Group Providers – OFFICE HOUR**

**Question/Answers**

Send questions to mcare@fresnocountyca.gov

***Friday, April 28, 2023 (4:00pm)***

**Q**: Will there be a chance for group providers to do a data dump instead of doing the 1500’s.

**A**: Yes, we should have more info for you in a few weeks.  We last heard (this morning) we should hear more on this in a few weeks (from our lead – CalMHSA team) as far as (1) what format and (2) what fields will be included.  In sum, the system (new EHR, called SmartCare) will support this functionality at the go-live (July 1, 2023).

**Q**: Do County recommend using SmartCare program?

**A**: Yes, we would like all to use SmartCare. However, we can only transition providers who currently use our EHR on 7/1/23. Next step is to see if others can utilize the EHR.

**Q**: Recommend for individual providers to use EHR?

**A**: Plan is to have all use EHR, but will need to evaluate at a later date. How do we get all to use SmartCare. How do we onboard providers. Will need to implement for current users first. Will need to work with SmartCare and CalMHSA to set up users. Scheduled for FY 2024-2025.

**Q**: Will the rate go up or down?

**A**: Will find out next week when the rate sheet goes out. Not going down, but cannot provide the rates until next week.

**Q**: Those who bill AVATAR can transition 7/1/23. Can those who bill via 1500 work towards using EHR? ETA for transition?

**A**: There are different levels of access. Those with access will convert to SmartCare. Right now, providers submit paper claims and Managed Care enters the claim. Continue to submit paper claims. Do not have a timeframe when we can onboard new providers.

**Q**: Will the rates released next week be final or will they just be draft like the org rates were initially?

**A**: Rates will be final.

**Q**: will all counties involved in smart care be using standardized forms for things like assessments?

**A**: Yes, all will use the same forms.

**Q**: Assessment form changed. Assessment form is 2 pages. Was told to use whatever was online.

**A**: Make sure you are familiar with the billing manual. CalAIM made changes to the assessment requirements. Make sure to hit the 8 domains required by CalAIM. Documentation manual are on County website (<https://www.co.fresno.ca.us/departments/behavioral-health/home/for-providers/contract-providers>). Recommend downloading the assessment form. It is compliant with CalAIM. CPT codes are all inclusive of documentation and travel. Will not code doc time separately. Makes doc time quicker and easier.

**Q**: So looking at the assessment from your website, is that identical to what will be in SmartCare?

**A:** No, SmartCare is different.

**Q:** Cannot edit the assessment to use my heading.

**A:** County will take a look at the form to see if others can edit/personalize.

***Friday, May 5, 2023 (8:15am)***

**Q**: Why Org provider rates by the Hour and Ind/Group Rates by the Minutes?

**A**: All providers are billing by the minute = 1 CPT unit is 15 minutes; round up by whole CPT

**Q**: Will Rates improve the reimbursement time, is there is discussion that this will improve the reimbursement for payment?

**A**: DBH, is discussion, hope is that the mechanism will be available to enter claims and process in a timely manner. (*MSO, MCO, Provider Connect* – SmartCare). DBH, Contracts Division will map out claims/payment process. DBH is transitioning to a new EHR System and working with CalMHSA. DBH will provide a training regarding process for claims. DBH goal is to improve the current process.

**Q**: Will CPT Codes allow for Billing for Transportation?

**A**: ~~New Rates include Documentation/Transportation time, claims are based on Face-to-Face Time~~. Correction 5/8/2023; Individual/Group Providers will be able to bill for Transportation Services. Documentation and Travel Time billing is already built into new rates.

**Q**: Some clients are out of town, up to 60 minutes, has DBH identified how services will be reimbursed?

**A**: Travel/Documentation is already built into new rates. New standards does not allow for Transportation or Documentation. Correction 5/8/2023; Individual/Group Providers will be able to bill for Transportation Services. Documentation and Travel Time billing is already built into new rates.

**Q**: Are we only allowed to bill for an Hour?

**A**: CPT codes are based on a Unit (15 minutes), ensure that you are billing appropriate codes, <https://www.co.fresno.ca.us/departments/behavioral-health/providers/calaim> Manual identifies maximum number of codes you can bill for services (Add On Codes). Ind/Group providers encouraged to attend trainings to get a better understanding on Codes. Billing is specific to CPT

**Q**: Will grant funds be available to providers to assist with this transition?

**A**: No. DBH encourages ind/gp providers to utilize alternative ways to be more effective and efficient.

**Q**: Any changes to Telehealth and location?

**A**: No changes to Telehealth and Location, there will be a new CPT Codes as it relates to Telehealth

**Q**: When will the Draft contract be ready for review?

**A**: DBH, Managed Care will try to send out Amendment I to Agmt No. 20-236 to all ind/gp providers, week of May 8th for review and signature.

**Q**: Trainings – are invites going out to all individual/group providers?

**A:** Trainings will be recorded and links will be available to all individual/group providers, link <https://www.co.fresno.ca.us/departments/behavioral-health/providers/calaim> will take you to those trainings.

**Q:** Were or how will this Q&A be communicated?

**A:** Suggest on CalAIM page, Compliance follow up with E.V.

**Q:** Where or can we send notification to add providers to mailing list?

**A:** Suggest to provide name to Provider Relation Specialist to add them to the distribution list, PRS, *Dee Howell, Arlene Liles and Melinda Garcia*.

**Q:** Are there any samples to utilize for documentation?

**A:** Documentation Reform, manuals available can be referenced for documentation. Documentation related to CPT Coding, CalMHSA to provide additional information and require the same elements. Keep an eye out for tools and guides to assist with documentation.

***Friday, May 5, 2023 (4:00pm)***

**Q**: Will providers bill per minute?

**A**: No, providers will bill per unit based on CPT.

**Q**: County to Provider, how do you rate the transition to CPT codes?

**A**: Not sure yet, will be easy as they are familiar, as they currently utilize CPT Codes. County to provide a Crosswalk.

**Q**: Are Ind/Group Providers to use a CPT/HCPCS or SmartCare Procedural Codes?

**A**: Unsure at this time.

***Friday, May 12, 2023 (8:15am)***

**Q**: Do you know if the contract will include an increase in the number of associates? Currently we are allowed 3 each (*Navjot K. Grewal, LCSW*)

**A**:

**Q**: Will the new contract include the ability to hire Nurse Practitioners under the new AB 890 change? (*Navjot K. Grewal, LCSW*)

**A**: