

**Provider Meeting
May 6, 2009**

Highlights

I. Outcome Tracking

Looking at Gold Standard for retaining clients for 120 days of services. Need to determine what outcomes to collect. Current data by the Feds states that less than 90 days of service is not a good way to spend dollars. Looking at building a system so clients get 120 days. How do providers keep clients engaged for this length? Feds are asking to retain clients longer for the value of funding. Asking providers to retain clients through transition from residential to outpatient.

II. CalOMS

Under CalOMS, admissions has different meanings. Under the drop down on the CalOMS admission, there is Initial Admission and Transfer or change in services. When transferring a client from Residential services to outpatient, make sure to choose Transfer or Change in Service.

III. Automated Billing

Upload has been moving smoothly. Working on resubmissions where providers can send in resubmissions directly. Looking at transitioning non-Medi-Cal providers. Working on corrections so only data is entered into SAIS and not other sources. The goal is “no monthly activity reports”.

IV. Web-based SAIS

Working on creating a web-based login for providers instead of using a VPN # in order to send billing. This will eliminate the use of a VPN #. Waiting for the Mental Health system to be developed and will add Substance Abuse. Looking to go live by either August or September.

V. NiaTx

Still openings for the Kickoff training on May 19th. Will be asking programs to put together a workplan using this model.

VI. Prevention

Working on redeveloping Prevention services. Data will dictate what prevention services will be funded. Looking at a Youth Advisory Board to advise on the trends. Will be bring plan to the ADAB, etc. by September.