

SmartCare Town Q&A

Thank you for submitting your questions during the November 2023 Townhall meeting. Below we outline the your questions you provided and provide answers. We will also be hosting a monthly SmartCare Touchpoint Meeting from January – March 2024 to continue the dialogue.

1	<p>What has been launched for SmartCare?</p> <p>For both Specialty Mental Health and Substance Use Disorder Services, SmartCare has two features that are live across the board.</p> <ul style="list-style-type: none"> • SmartCare Client Registration • SmartCare Program Enrollment
2	<p>What has gone live with Clinician’s Gateway?</p> <p>For those providers that use Alameda County Behavioral Health Department (ACBH) Electronic Health Record (HER) system, Clinician’s Gateway (CG), we have gone live with:</p> <ul style="list-style-type: none"> • CG MH SmartCare • CG SUD SmartCare <p>If you are a CG SmartCare user, you are able to enter your services using CG SmartCare. We highly recommend doing the draft notes in CG SmartCare, as those notes will automatically upload into SmartCare itself.</p> <p>Even if the notes are in draft status, that’s going to help with your workflow.</p>
3	<p>You shared that the SUD discharge functionality is still not available. So for clients who discharged in January and are now coming back to the programs, providers cannot register them, because we cannot close the first episode. Is that correct?</p> <p>In Smartcare you will need to close the episode before you can re-enroll them into the program. So if the client was not closed in InSyst, you will need to close them in SC before doing a new program enrollment. We are working with the vendor to resolve the issue as soon as possible and we understand that this discharge functionality is critical.</p>
4	<p>Since SUD discharge is not working correctly, can the providers put those clients into CG without a client number? That way we can put in the draft notes under CG InSyst.</p> <p>Please <u>do not</u> enter data into InSyst, as ACBH has already migrated client episodes from that platform and is no longer accepting data from InSyst.</p> <p>NOTE: There should have a client ID in CG SC, so you would be able to do your <u>draft</u> notes for new clients. You should be able to register them in SC and that data will push to CG.</p>
5	<p>How is Clinician Gateway (CG) being used with SmartCare?</p>



	<p>Clinician’s Gateway SmartCare is live for both service lines, for Specialty Mental Health and SUD services for existing clients.</p> <p>ACBH is using the same strategy that was used with InSyst. All the services that are entered into CG, now “CG Smartcare”, will upload into SC for billing and claiming.</p> <p>You can enroll new clients or existing clients into programs in SmartCare. You do not have to use CG InSyst anymore. Instead please use CG SmartCare. Any notes that you created in CG InSyst will be migrated to CG SmartCare automatically, so you do not have to recreate them. We strongly advise you to not recreate any notes, as it is more work for you and it will cause issues with the CG data migration.</p>
6	<p>What if you <u>do not</u> use ACBH EHR system, Clinician’s Gateway (CG) and are only going to be using SC how would you handle this scenario: In the past in InSyst, you would not be able to do any service entry if an episode is closed. Is that going to be an issue coming in January when we start to do service entries?</p> <p>SC requires a program enrollment to do service entry. If the client has been discharged that would <u>not be</u> an issue. You would not be required to go back and reopen them.</p>
7	<p>For MHS Specialty services this Provider will only be using SC for Admitting and Discharging clients. They don’t use CG, so will they be able to do service entry if an episode is closed?</p> <p>SC requires a program enrollment to do service entry. If a client has been discharged that won’t be an issue, they can still go back even though the episode is closed.</p>
8	<p>How should we go about working on the backlog of registrations, program enrollments, and services?</p> <p>For both Mental Health and SUD Providers, ACBH encourage you to work on the backlog in chronological order (starting with your oldest). Our guidance is to begin with the earliest dates of your backlogs, starting with your July services first and working your way to current day. We encourage you to work on the backlog in chronological order (starting with your oldest).</p>
9	<p>Why aren’t we going live with Service Entry right now? Can we enter services into SmartCare now?</p> <p>In November and December ACBH will be completing the service entry build out, in preparation for a January go-live date. You cannot enter services into SC until the service entry module goes live.</p>
10	<p>Most of our SUD clients have been in the system somewhere along the line. Should we work on the backlog first, before we start entering new clients?</p> <p>Yes, please work on the backlog first, as ACBH wants to ensure that duplicate clients are not created.</p> <p>NOTE: For brand new clients who have never been in our system of care, you can register and enroll them now.</p>
11	<p>Since there have been so many SC launch dates that have not been met, the Service Entry go-live date gives us a lot of doubts. Service Entry is a huge lift for small billing staff and there will need to be a lot of extra time needed to pull this off. We will continue to need extra accommodations and we hope that this continues to be prioritized.</p> <p>ACBH does acknowledge there have been delays and rolling launch dates. We understand that this has created a backlog that is impacting both billing and ACBH staff.</p>



	<p>After months of readjusting expectations, ACBH now understand that at some point we have to strike a balance of is this good enough? Is it usable at this point? But also acknowledging some of it depends on our vendor in terms of functionality that folks are used to in InSyst. As was shared during the SmartCare Townhall in November 2023, we are committed to launching service entry in January 2024, with continued improvements planned throughout the year.</p>
12	<p>Will you continue with SmartCare Office Hours? Providers are constantly encountering barriers and they find that office hours are very helpful.</p> <p>Yes, we will continue to provide SmartCare Office Hours.</p>
13	<p>Why are there so many SmartCare Implementation Delays?</p> <p>ACBH wants to acknowledge that there have been delays and a rolling launch schedule leading to a delayed Service Entry go live in January. We understand that it is creating backlogs for our health provider partners and that the delay has only increased feelings of anxiousness. At this point, we are working to strike a balance of “is this good enough” and “is it usable” to be able to launch. We are committed to go-live in January 2024, but it also depends on the vendor.</p> <p>We will continue to have performance improvements for service entry throughout the year.</p>
14	<p>Why are there duplicate clients and when are the duplicate migrations being corrected?</p> <p>During the data migration, unfortunately some of the data was duplicated and these duplications go back to early July. We we’re made aware of these episodes and have worked with our team to resolve them in mid-November.</p>
15	<p>With the transition to SmartCare providers have incurred great costs. How will the county support contracted providers with this?</p> <p>ACBH understands the financial impact, so what we have been able to do through Dr. Tribble’s support is to connect with our finance partners to understand where we have some flexibility.</p> <p>Even though the State DHCS has flipped the light switch in terms of a “fee for service” payment structure from County to State, effective July 1st, this year, the County (ACBH) <u>has not</u> flipped that switch with our community partners.</p> <p>Nevertheless, ACBH will continue to reimburse at a cost base structure, through the third quarter of Fiscal Year (July 2023 – March 2024). Should we need to, we will evaluate additional flexibilities and opportunities that extend beyond March 2024.</p>
16	<p>When you say that reimbursement will be cost based through the end of the year, will there be a reconciliation of costs to units of service at the end of the year?</p> <p>At this point, the invoicing portion of your contract should have a footnote in all of the rate sheets, for rate based providers, that says that the cost settlement terms are currently still expected to be as stated in your contract. As of right now, the idea is that there would still be continuing soft cost settlement to units of service. Our focus is really to help our providers draw down funding to support their contract, while SC is getting fully up and running.</p>



	<p>We are continuing to evaluate the situation and right now the focus is really on keeping the cash flow going. We are working to find ways to partner as much as we can, through this difficult startup.</p>
17	<p>Being unable to enter all services impact reports, thus billing. Are we to continue creating invoices as we have done for the last four months?</p> <p>We are still reimbursing using a cost-based structure, so please continue the process as usual.</p>
18	<p>Will service entry be manual much like the Registration data entry or will there be a copy and paste option?</p> <p>The service entry screen is manual. You can copy and paste if you have the data in another document like an excel spreadsheet, or you can pull a report from your own EHR. The batch service entry screen that we are rolling out is similar to the InSyst multi-service entry screen, that will have some default fields, to assist with auto-populating data on this screen.</p>
19	<p>There will be a massive catch up of data entry required. Will batch service entry screen be available in January?</p> <p>Yes, it will. There will be a manual, multi-service/batch service entry screen that will be available in January. Currently, there are several issues that we are working on with the vendor to resolve, so those enhancements and improvements will be rolled out throughout 2024.</p>
20	<p>Will there be an upload batch process available at go-live?</p> <p>Unfortunately, no. This functionality will be rolled out at a later date. The plan for the upload process is to pilot it in 2024. Once we have confidence in the performance of the pilot, we will provide the template and then can go-live.</p>
21	<p>Can providers get a sample spreadsheet template of the required data elements ahead of time? They would like to start to build it within their own system ASAP.</p> <p>Currently, the format for the template is very similar to other counties. There is one difference that Streamline brought to our attention, related to the Pregnancy Indicator. That column will change, but at this time we are working with Streamline on that solution. We will disseminate the template after it is finalized and approved.</p>
22	<p>Can you share what some of the functionality is, that will begin in January? And what will be in the later upgrades?</p> <p>We will go-live with standard Streamline SmartCare service entry functionality in January. Once this standard functionality is rolled out, we focus on enhancing the batch service entry. Our goal is to make this functionality easier to use, improve workflow, and reduce key strokes.</p> <p>In the future, we plan to release the Weekly Service entry screen functionality that will be similar to what we had in InSyst. We are also working with Streamline to implement the Service upload process.</p>