

# Clinician's Gateway

*Admin Support Servs & Clinical Managers*  
**HANDS-ON INTRODUCTION**  
**TRAINING**

Revised August 12, 2021

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## Clinician's Gateway

### What is Clinician's Gateway?

- ❖ Clinician's Gateway is an Integrated 'Online Progress Note System'.
- ❖ The primary objective of Clinician's Gateway is to allow HIPA-compliant electronic entry of clinical notes.
- ❖ Clinician's Gateway is designed to reduce audit exceptions due to missing data or missing notes, and assist management and staff in capturing all staff activity.
- ❖ Clinician's Gateway is a stand-alone front-end add-on to SmartCare and is the first in a series of add-on packages that can be used instead of standard built in data entry screens for SmartCare.
- ❖ Web based application utilizing Electronic Signatures
- ❖ Allows Clinic Managers and QA/QI staff to review the work of treatment staff; a daily log report is available on demand to assist in capturing all staff activity.
- ❖ Clinician's Gateway integrates progress notes with the SmartCare billing module and can be used for approximately 100% of the data entry into SmartCare.
- ❖ HIPA-compliant "Password Security" to keep your password unique and confidential. This is accomplished by allowing each User access to change their own Passwords whenever Necessary.





# Clinician's Gateway

## *Features*

- ❖ Automated creation of direct services for individual, group and case review
- ❖ Retrieval of notes for printing or review of work as well as for the sharing of information between colleagues. May also be used by medical records personnel who assist in the administrative work of treatment team members and by clinic managers to review the work of treatment staff
- ❖ Fully integrated with current system (SMARTCARE)
- ❖ Built in timesheets to track service provider activity
- ❖ Creation of client groups and group service notes with individual addendums
- ❖ Multiple co-staff notes for case review
- ❖ Medical spelling checker
- ❖ Allows you to input correct Progress Note information into the computer and have automatically bill the State.
- ❖ Client information is available on any authorized computer with a few clicks no matter where the client is located.
- ❖ Ability to track the number of completed Notes and view any Progress Notes for individual clients, or view by any given date range.
- ❖ Ability to place uncompleted Progress Notes in Pending Mode to be completed at another time.
- ❖ Addendums can be made to Finalized notes
- ❖ View interval (time lapse) between date of service and date recorded.
- ❖ View total hours accumulated per clinic, per staff, by month or day.
- ❖ No lost Notes.
- ❖ No more having to track down charts in order to review previous notes.
- ❖ All Progress Notes will be readable.
- ❖ Reduced errors in billing.
- ❖ Be in compliance with audits (a note for each billing).
- ❖ MORE REVENUE.



# Logging into Clinician's Gateway



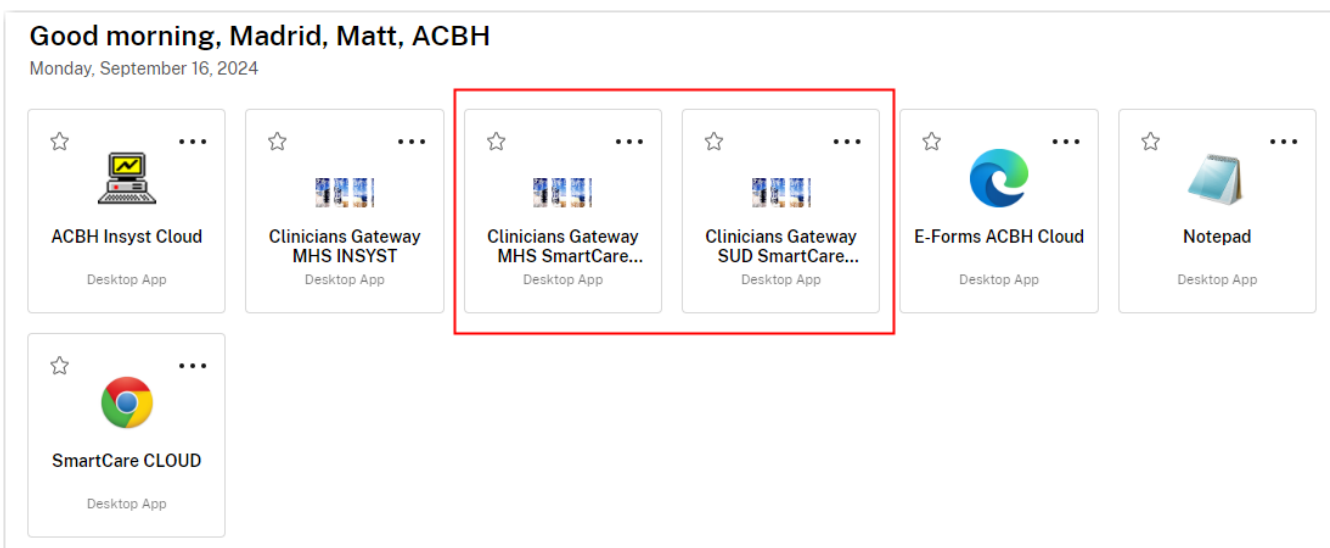
## Login – Security

FOR ACBHD STAFF: Find the link to this page at

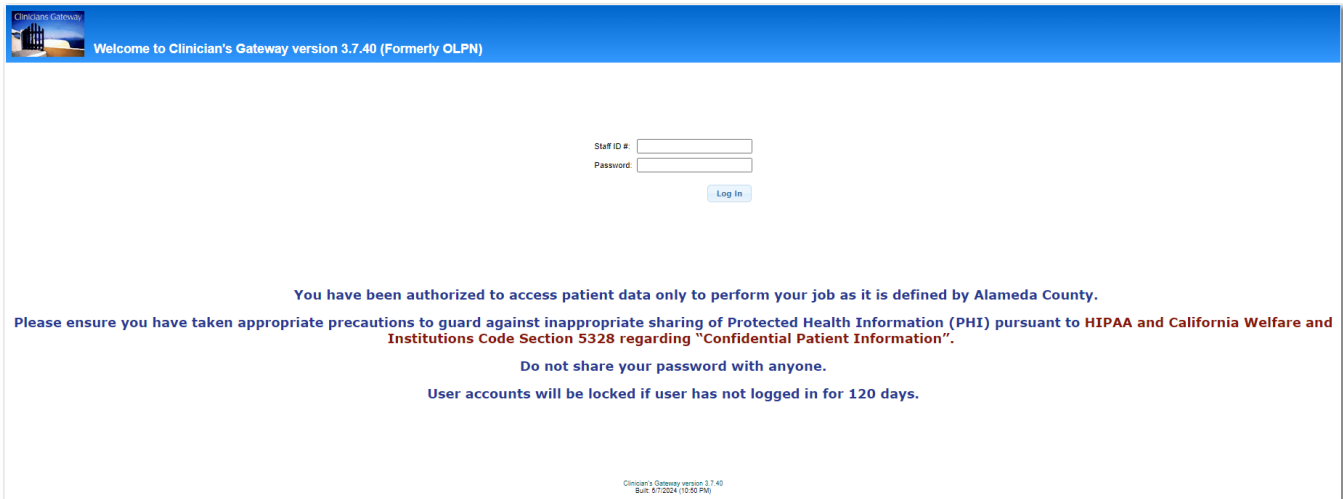
<https://acgovt.sharepoint.com/sites/BehavioralHealth>, click on Clinician’s Gateway MHS/SUD SmartCare under My Tools.



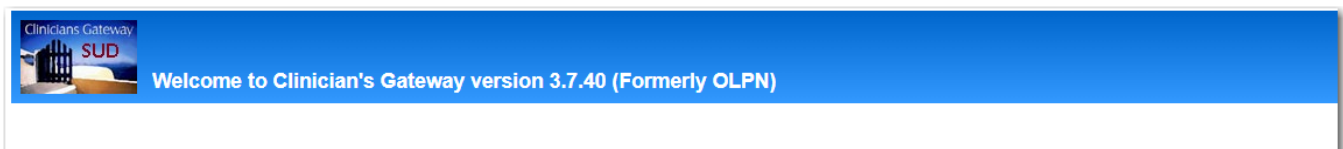
FOR CBO STAFF: Find the link via the web portal at <https://bhcsportal.cloud.com>. Click on Clinician’s Gateway MHS/SUD SmartCare







- **Log on page – This invokes your digital signature.**
- **Keep your password secure – Important: To be kept as secure as a bank card pin number.**
- **Passwords must be at least eight characters – one uppercase and one lowercase alpha character, and one numeric character.**
- **If you have three failed attempts at entering your password, your account will be locked, and you will need to contact the helpdesk at 510-817-0076 or [HCSASupport@acgov.org](mailto:HCSASupport@acgov.org) for assistance.**
- **If you are accessing SUD environment you will see this banner at the top of each page**



## *Initial Login*

1. **Sign into CG** using your SmartCare staff number and the password that was provided to you by the Help Desk. The first time you login, you will need to **update your password**. (8 characters or more, including at least 1 uppercase, 1 lowercase, and 1 number)
2. **Check personal information** via “Security/Password” at bottom of Home page

3. Make changes, if needed, and click **“update profile”** to retain changes. HINT: Use the “Tab” key to enter the Phone Number fields from the e-mail field to land in the correct spot.

### Security & Personalization

First Name:  Middle Initial:  Last Name:

Professional Suffix:

Title:

Address:

Address Cont.:

City:  State:  Zip:

Email Address:

Phone Number Day:

Phone Number Mobile:

Phone Number Night:

**3**

#### **4. The preferences tab is used to set the following:**

**1. Print On Finalize – Defaulted (Yes)**

- Yes - Print Service page will display after Finalizing, and with Daily Approval, all services will print under your Staff Log.
- No - return to the Home Page after finalizing and with Daily Approval, only the summary on the Staff Log printout.

**2. Print On Save – Defaulted (No)**

- Yes - Print Service page will display after saving.
- No - return to the Home Page after saving

**3. Print on Approve – Defaulted (Yes)**

- a. Yes - Print Service page will display after approving.
- b. No - return to the Home Page after approving.

**4. Default Service Date – Defaulted (Yes)**

- a. Yes to default today's date on a note.
- b. No to start without a date selected.

**5. Service Note Popup – Defaulted (Yes)**

- a. Service Note Popup launches an Enlarged popup textbox when double-clicking a textbox. Select no to disable.

**6. Import RXNT Manually - Defaulted (Yes)**

- a. Import RXNT Manually means the prescriber pulls the day's prescription manually onto a note. If unchecked, then a draft note is created in CG with each prescription in RXNT

**7. Click to Save changes**

## Security & Personalization

---

Print On Finalize:  1

Print On Save:  2

Print On Approve:  3

Default Service Date:  4

Service Note Popup:  5

Import RXNT Manually:  6

7

8. **Note the tabs for changing your password**, adding security questions, and seeing the expiration date for your electronic signature agreement.
9. Changing your password restarts the 90 day period before the next required password change.

Welcome: [Account Information](#)

Profile
Preferences
Change Password
Security Questions
Electronic Signature Agreement
8

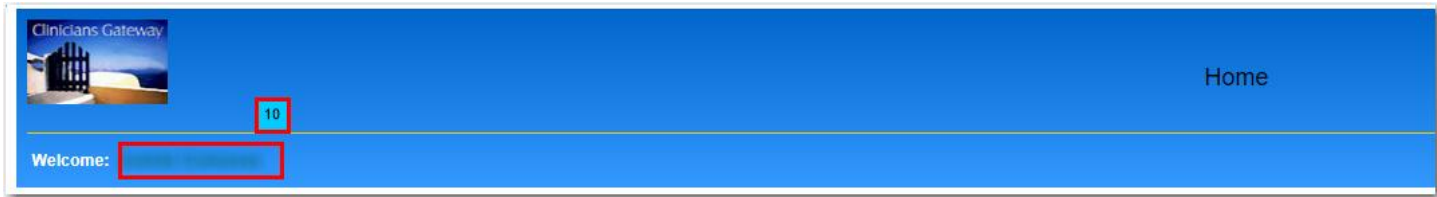
Enter your Old Password:

Enter your New Password:  9

Confirm Password:

[click here if you forgot your password](#)

10. Check your staff information. Click on your name on the Home page to bring up your staff view page.



### View Staff

**Staff Information for:** [Redacted]

SSN:	***-**-****	License #:		Start date:	5/13/2023
Gender:	Female	License Renew:		End date:	
BirthDate:	**-**-****	License State:	CA	Last Changed On:	
Ethnicity:		Taxonomy:		Record Created On:	
		National Provider Id:			

Medicaid PIN:  
 Medicare PIN:  
 DEA Number:  
 UPIN:  
 CG Code: 0 [No code yet]

Staff Type: Licensed Clinical Social Worker

Languages: None

[CG Note Delete Form](#)

---

**Statistics** Service Dates: [Date] thru [Date] All

Type of Service	Clinician Role	Number of Services	Average Interval	Time	Time Reporting
Individual	Primary Clinician	8	0	07:49	Enter Estimated Time <input type="text" value="00:00"/> <input type="button" value="Calculate"/> Est. %
	Co-Clinician	0	0	00:00	
Group	Primary Clinician	0	0	00:00	
	Co-Clinician	0	0	00:00	
Indirect	Primary Clinician	0	0	00:00	
<b>Totals:</b>		<b>8</b>	<b>0</b>	<b>07:49</b>	

---

**Daily Approval** Service Date: [Date]

Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time	# In Group	Approve Time
0 service records on 6/10/2024 for a total time of 00:00.											

---

**Procedures** 117 Results

---

**Providers** 79 Results

Id #	Name	Address	City, State, Zip	Phone
010230	BACS CIRCA60 FSP ADULT (010230)		OAKLAND, CA 94611-4567	
01041	DIVERSITY IN HEALTH TRAIING ADL (01041)		OAKLAND, CA 94607-4253	
010511	LA FAMILIA UNACCOMP YOUTH MHS (010511)		HAYWARD, CA 94544-2923	

11. **Verify basic staff information:** Basic staff information, displayed in the upper half of the page, will need to be updated via a SmartCare Staff Number Request Update form.
  
12. **Verify your Reporting Units:** To **view your reporting units**, click on the “Providers” bar. The designated RU’s allow you to write a progress note into an RU. To update them, a supervisor submits a CG Authorization Update Request e-form.



# Client Information





# Client Search

1. You can use the global search tool located at the top right of all Clinician's Gateway Pages. Select "Clients" from the drop list. (Clients is also the default for this tool)
2. Type the client's last name first, then first name. (with a space in between...no need to use a comma)
  - a. Alternately, you could type in the client's SmartCare ID number.
  - b. Alternately, you could type in the client's Social Security Number preceded by the # sign (for example, #123-33-3333. You may use dashes or not.)
  - c. If you are unsure on exact spelling you may use a percent (%) symbol as the wild card. For example, a client name Client Testerson can be found by searching 'Test% Client'
3. Click on Search

The screenshot displays the Clinician's Gateway search interface. At the top right, there is a search bar with a dropdown menu set to "Clients". The search bar contains the text "Test% Client". Below the search bar, there are buttons for "Home", "Menu", and "Log out".

The main content area shows a section titled "Enter New Service:" with a dropdown menu for "Type of Service". Below this, there are tabs for "Notes" and "Client Shortcuts". The "Client Shortcuts" tab is active, showing a table of pending services.


Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
8401097				DIVERSITY IN H...	5/15/2024	Clinician P...		○ Draft	
8415596	75130257	75130257	Testy, Cindy	ADULT FORENSI...	5/28/2024	Clinician P...	197 - CG Infor...	○ Draft	
8416222	75130257	75130257	Testy, Cindy	ADULT FORENSI...	5/29/2024	Clinician P...	H0032 Plan D...	○ Draft	
8416826	75130257	75130257	Testy, Cindy	ADULT FORENSI...	5/29/2024	Clinician P...	H2021 Comm...	○ Draft	
8418423	75130257	75130257	Testy, Cindy	ADULT FORENSI...	5/30/2024	Clinician P...	90832 Psycho...	○ Draft	
8418699			unregister, unregi...	OAKLAND AD M...	5/30/2024	Clinician P...	197 - CG Infor...	○ Draft	

At the bottom of the table, there is a "View" dropdown set to "10" and navigation buttons: "<< First", "< Prev", "1", "Next >", and "Last >>".

Search: view all close all

Search Again

**1**

Client #	Client Name	Status	Gender	Birth Date	Age	Serviceable	Services
<b>3</b> <input type="checkbox"/> 75087772	 TEST, CINCIN (TEST, CINDYTWO T)	Active	Female	02/02/1960	58	<input checked="" type="checkbox"/>	3
<input type="checkbox"/> 75226968	TEST, CINDY	Active	Female	12/12/1900	117	<input checked="" type="checkbox"/>	0
<input type="checkbox"/> 75087772	TEST, CINDYTWO T	Active	Female	02/02/1960	58	<input checked="" type="checkbox"/>	3

View: 50 **2**

**4** **5**

Start Individual Service  
**Facesheet**  
 Client Medication  
 Start Client Plan  
 Start Document  
 Account  
 Services Search  
 Vital Signs Log

PERSONAL INFO SECURITY (PASSWORD) GUIDES/HELP

Clinician's Gateway version 3.6.0  
 Built: 4/7/2017 (8:01 AM)

- The search results screen will show the list of clients.
  1. The list of “All” clients are all clients in Alameda County.
  2. The list of “Serviceable” clients are those clients for whom you can write a note.
  3. Notice that these two clients are the same person, because they have the same client number. The one with the icon is an alias name.

## *Client Face Sheet*

- To get the Face Sheet, either
  4. Click on the client’s name or
  5. Click on the blue button at the far right of the row, to bring up the menu and then click on “Facesheet” for that client.

# Client Information Facesheet

Action ▾

Generate Patient Code



## CONSUMER INFORMATION

<b>Aliases:</b> TEST, CINCIN		
TESTING, CINDYCIN T.		
TESTING, CINDYONETWO		
<b>Preferred:</b> TESTONE, CINDYTWO		
<b>Name:</b>	TEST	<b>Number:</b> 75087772
	CINDYTWO T.	<b>Birth Date:</b> 2/2/1960
<b>Issued On:</b> 10/8/2001		<b>Age:</b> 64
<b>Address:</b> 9999 STREET NW		<b>SSN:</b> 123-33-3333
FREMONT, CA 94538-0		<b>Gender:</b> Female
		<b>Account:</b> 851701
<b>Home Address:</b>		TEST, CINDYTWO
		<b>Phone:</b> (510) 999-9999 Ext:0
		<b>Ethnicity:</b> Black
<b>Language:</b> Chinese Dialect		<b>Disability:</b> Physical Impairment
<b>Education:</b> Grade 11		<b>RP Owes:</b> \$0.00
<b>Marital:</b> Never Married		<b>Veteran:</b> Unknown
<b>Staff:</b> Staff, General		<b>Deceased On:</b>
<b>Ethnic Origin:</b> Non-Hispanic		
<b>Problem:</b> None		

### ▼ Care Team Members

**5 Results**

Name	Company	Phone	Role	Removal Date
Chen, Lester	County	(510) 567-8181	Case Manager	
Madrid, Matt	County	(510) 567-8079	Probation	
Test, Mary	County	(510) 567-8181	Social Worker	
TEST, Sandy	County	(510) 567-8181	Case Manager	
Tester Testeroo	Albany USD	(510) 999-9999	School Counselor	

View: 10 ▾

### Consumer Detail Alert

**KTA Eligible From Nov 17 1858**  
 OOC AB1299 Presumptive Transfer From Santa Barbara To Alameda County on Apr 1 2021  
 AlCo AB1299 Waivered Presumptive Transfer To Butte On Apr 20 2021

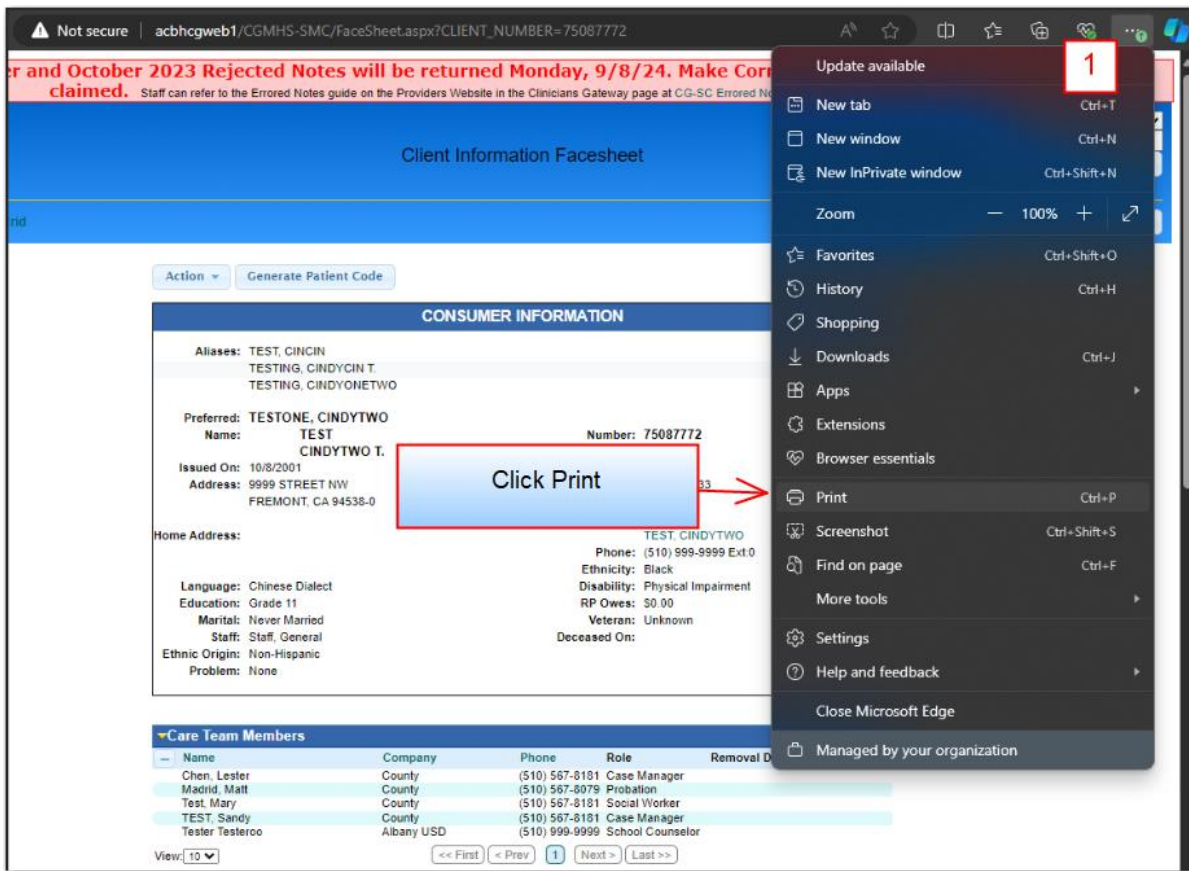
Medicaid Coverage					
Covered	Medical Number	Insured Name	Eligibility Date	Eligible County	Special Reason

Insurance					
#	Company	Policy #	Insured	Effective	Expires
2485	HEALTH PAC MCE	123333333		6/1/2012	8/31/2012

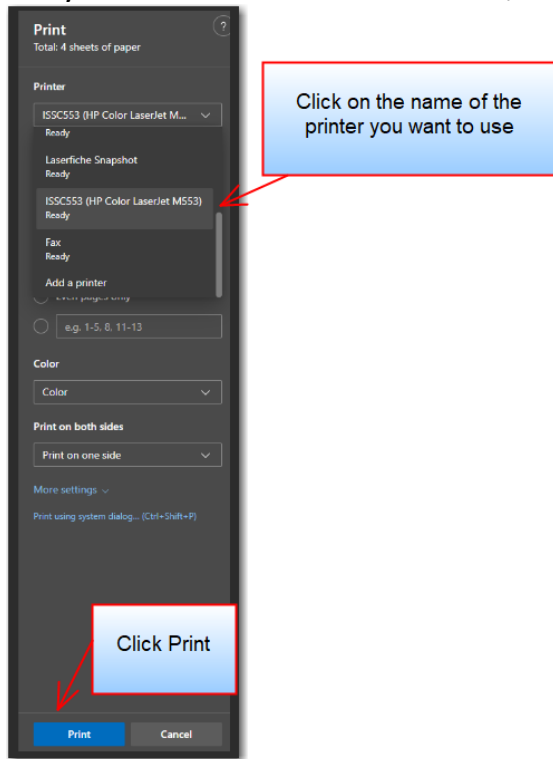
CONSUMER MESSAGES						
Effective	Expiration	Type	Author	Username	Status	
<b>TEST EMERGENCY</b>						
9/17/2021	11/16/2021	Incident	LESTER C	CHENL	Expired	THIS IS A TEST
<b>Self Harm Risk</b>						
2/27/2020	2/27/2022	Suicide Watch	SHERYL	DIEDRICK	Expired	this is only a test of the type fields
<b>Dangerous Client Alert</b>						
6/19/2009	12/18/2020	Incident	PETERSON C	PETERSONC	Expired	Known to throw marshmallows unpredictably.
<b>THIS IS ONLY A TEST</b>						
8/28/2007	10/27/2007	Other	SHERYL DIEDRICK	DIEDRICK	Expired	THIS IS ONLY A TEST

SIGNIFICANT OTHER / EMERGENCY CONTACT					
Name	Relation	Full Address	Effective	Expires	Phone

CLINICAL HISTORY						Results:9
—	Status	Provider	Clinician	Opened	Closed	Diag
	Open	BACS FSP LIFT FORENSIC PROGRAM Physician: Staff, General Med Coordinator: Svc Coordinator: Legal Status: Voluntary	Chen, Lester Primary Service: Last Service:	8/30/2022 Units: 0		Z03.89
	Open	BACS WOODROE PLACE CRT (81443) Physician: Staff, General Med Coordinator:	Chen, Lester Primary Service: Last Service:	6/4/2021 Units: 0		Z03.89

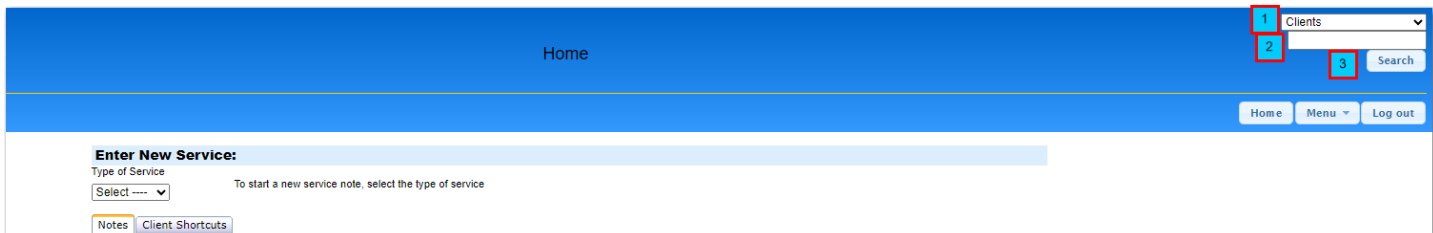


- To print the Face Sheet, click on the “...” button (1),
- Click on Print
- Then select the printer you want to send the form to, and click on “Print.”

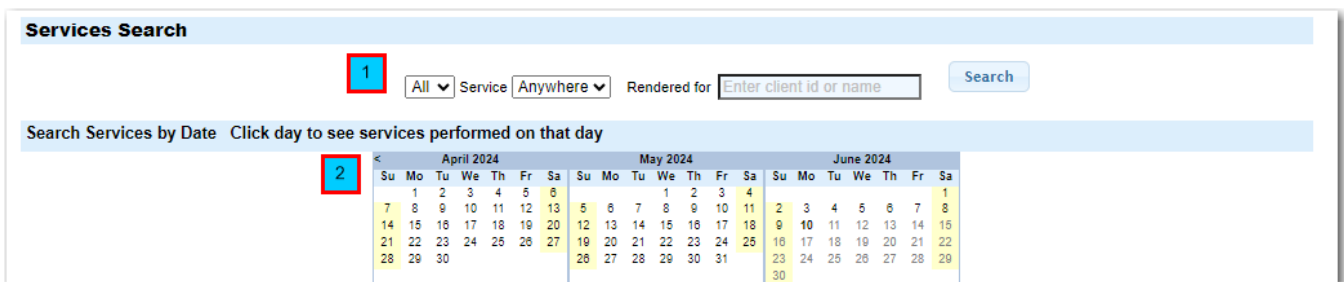


# Client Services Search

1. To create a list of Services for a client, select “Services” from the drop list.
2. Type the client’s last name first, then the first name, (with a space in between... do not use a comma) or the client’s SmartCare ID #.
3. Click on Search.



- Alternately, you can use the Services Search (1), or Search Services by Date (2), at the bottom of the Home Page



## Search Results:

To read the note, click on the Service # (1) or click on the blue button. (2)

Search for: All Services at Anywhere rendered for "Testy Cindy"

Search Again:  Services at  Rendered for

Service Records 209 Results

Svc #	Client #	Client Name	Provider	Date	Status	Template	Procedure	Type	Staff	Finalized	
8426029	75130257	Testy, Cindy	ADULT FORENSIC ...	6/5/2024	Finalized	Clinician Pro...	99484 BehavHlth...	Individual	201351	6/5/2024	<input type="button" value="v"/>
8426046	75130257	Testy, Cindy	ADULT FORENSIC ...	6/5/2024	Finalized	Clinician Pro...	99484 BehavHlth...	Individual	201351	6/5/2024	<input type="button" value="v"/>
8426069	75130257	Testy, Cindy	ADULT FORENSIC ...	6/5/2024	Finalized	Clinician Pro...	99484 BehavHlth...	Individual	201351	6/5/2024	<input type="button" value="v"/>
8426215	75130257	Testy, Cindy	ADULT FORENSIC ...	6/5/2024	Pending	Clinician Pro...	90832 Psychothe...	Individual	27773		<input type="button" value="v"/>
8424818	75130257	Testy, Cindy	ADULT FORENSIC ...	6/4/2024	Finalized	Crisis Eval	90839 (w/90840 ...	Individual	201351	6/4/2024	<input type="button" value="v"/>
8424870	75130257	Testy, Cindy	ADULT FORENSIC ...	6/4/2024	Finalized	Crisis Eval	90839 (w/90840 ...	Individual	201351	6/4/2024	<input type="button" value="v"/>
8424899	75130257	Testy, Cindy	ADULT FORENSIC ...	6/4/2024	Draft	Crisis Eval	H2011 Crisis Inte...	Individual	27773		<input type="button" value="v"/>
8424947	75130257	Testy, Cindy	ADULT FORENSIC ...	6/4/2024	Finalized	Crisis Eval	H2011 Crisis Inte...	Individual	201351	6/4/2024	<input type="button" value="v"/>
8419925	75130257	Testy, Cindy	ADULT FORENSIC ...	5/31/2024	Finalized	Crisis Eval	90839 (w/90840 ...	Individual	201351	6/3/2024	<input type="button" value="v"/>
8418423	75130257	Testy, Cindy	ADULT FORENSIC ...	5/30/2024	Pending	Clinician Pro...	90832 Psychothe...	Individual	201351		<input type="button" value="v"/>

View:

## Searching for a Single Service by Service number

To look up a service by its service number, in the Global Search area, simply precede the service number by the # sign. Click Search.

Services

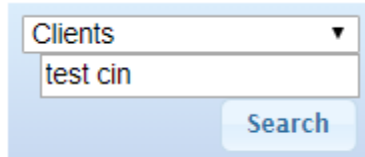


# Medication Log

The Medication Log can be called up by two methods: either by using the Client Search/Action Button or by using the Client Medication Search.

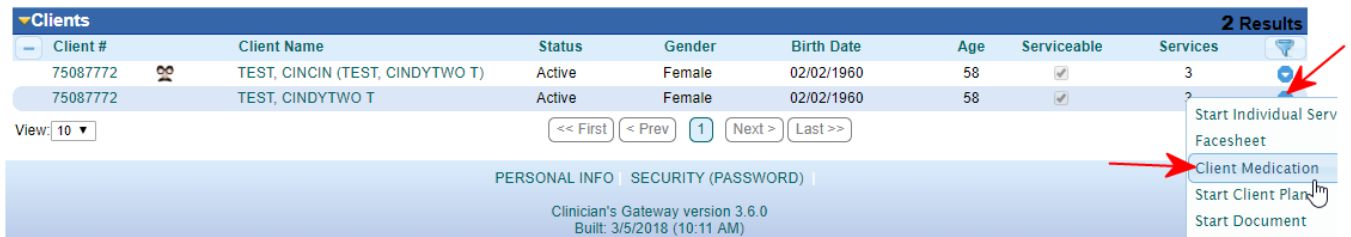
## Method # 1: “CLIENT SEARCH/ACTION BAR” SEARCH PROCEDURE:

1. In the Global Search field, leave Clients in the drop down, and enter the **client’s name**, click **Search**.



A search form with a dropdown menu set to 'Clients', a text input field containing 'test cin', and a blue 'Search' button.

2. Click the “**Action Button** ”, then click Client Medication.



A screenshot of a web application showing search results for 'Clients'. The table has columns: Client #, Client Name, Status, Gender, Birth Date, Age, Serviceable, and Services. Two results are shown for client 75087772. A context menu is open over the second result, with 'Client Medication' highlighted. A red arrow points to the 'Client Medication' option in the menu.

Client #	Client Name	Status	Gender	Birth Date	Age	Serviceable	Services
75087772	TEST, CINCIN (TEST, CINDYTWO T)	Active	Female	02/02/1960	58	<input checked="" type="checkbox"/>	3
75087772	TEST, CINDYTWO T	Active	Female	02/02/1960	58	<input checked="" type="checkbox"/>	?

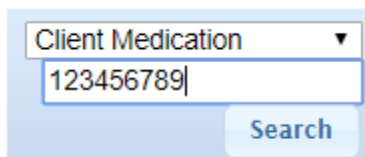
View: 10

PERSONAL INFO SECURITY (PASSWORD)

Client's Gateway version 3.6.0  
Built: 3/5/2018 (10:11 AM)

## Method # 2: “CLIENT MEDICATION” SEARCH PROCEDURE:

1. In the Global Search area, choose **Client Medication**, and enter the **client’s number** (their name is not specific enough), click Search. This will bring you directly to the Medication Log



A search form with a dropdown menu set to 'Client Medication', a text input field containing '123456789', and a blue 'Search' button.

## MEDICATION LOG:

The Medication Log displays all of the client’s medications from E-Prescribing and from the Physician’s Progress Notes.

**The top section of the Log will import all the medications that were e-prescribed in RxNT, an e-prescribing application that our physicians and nurses are using.**

**The bottom section imports the entries from the “Plan” section of the Physicians Progress Note.** History from all Physician’s Progress Notes will be displayed no matter how old.

### Sample of a Client’s Medication Log:

Connect to

▼RXNT Medications						35 Results
Details	Entry Date	Drug Name	Dosage	Prescribing Doctor	Refills	Svc. Number
	24-May-2012	Zyprexa 10 mg Tab	1 po q am	Luisito Roxas	3	1038364
	12-Apr-2012	benztropine 1 mg Tab	take 1 tablet by mouth at bedtime	Luisito Roxas	3	1002637
	12-Apr-2012	levothyroxine 50 mcg Tab	take 1 tablet (50 mcg) by oral route once daily	Luisito Roxas	3	1002637
	12-Apr-2012	Zyprexa 20 mg Tab	1 q hs	Luisito Roxas	3	1002637

▼Local Medications					73 Results
Svc. Number	Svc Date	Primary Clinician	Status	Note	
1057040	6/14/2012	ROXAS LUISITO	FINALIZED	Will continue present medications since they do appear to be effective as long as she is taking them. Will adjust the dose as indicated. Noted no hand tremors while off Depakote. She might need a other mood stabilizer to help control her mood and outburst or increase the dose of her Zyprexa to target the mood. Also discussed the possibility of trying depot medications again specifically Risperdal Consta to maximize the compliance. . Compliance with medications was emphasized. dISCUSSED WITH cm. Medications: Zyprexa 10 mg q am and 20 mg q hs; Synthroid 50 mcg po q day. Cogentin 1 mg q hs RTC: 7/5@10:00	
1044057	5/31/2012	ROXAS LUISITO	FINALIZED	Will continue present medications since they do appear to be effective as long as she is taking them. Will adjust the dose as indicated. Noted no hand tremors while off Depakote. She might need a other mood stabilizer to help control her mood and outburst or increase the dose of her Zyprexa to target the mood. . It will be easier for her to manage if she is less agitated. Compliance with medications was emphasized. Discussed with CM. Medications: Zyprexa 10 mg q am and 20 mg q hs; Synthroid 50 mcg po q day. Cogentin 1 mg q hs RTC: 6/14@11:00	
1038364	5/24/2012	ROXAS LUISITO	FINALIZED	Will continue present medications since they do appear to be effective as long as she is taking them. Will adjust the dose as indicated. Noted no hand tremors while off Depakote. She might need a other mood stabilizer to help control her mood and outburst or increase the dose of her Zyprexa to target the mood. . It will be easier for her to manage if she is less agitated. Compliance with medications was emphasized. The patient was given Zyprexa 10 mg to calm her down and to help with the voices. Discussed need to go back to the board and care . Noted need to be stable for the next 2 weeks so she can celebrate the birthdays of her children in the hotel. She agreed then to go back to the board and care via a taxi. Discussed with CM. Medications: Zyprexa 10 mg q am and 20 mg q hs; Synthroid 50 mcg po q day. Cogentin 1 mg q hs RTC: 6/14@11:00 REFILL: PAYLESS PHARAMCY: ZYPREXA 10 MG TAB 1 Q AM #30 + 3 REFILLS	

The bottom section, from the physician’s note, should contain the complete medication regimen for the client, if the physician has manually entered it.

Clicking on the Service Number will bring up the entire note.

# Vital Signs and Medical Provider Notes

**Entering Vital Signs:** Vital signs are entered via Medical Provider notes such as the Physicians Progress Note.

1. The newest reading is logged in the first column
2. The four most recent previous readings are automatically shown in the next four columns.
3. The Baseline Reading remains permanently in the last column

Vital Signs (Optional)						
DOB: <input type="text"/>	AGE: <input type="text"/>	<b>1</b>	<b>2</b>	<b>3</b>		
DATE		02/16/2023	08/19/2021	09/15/2020	04/15/2019	Baseline Reading
VITAL SIGNS						
Height (inches)	<input type="text"/>			75.	75.	<input type="text" value="69"/> 10/23/2010
Weight (lbs) (q visit x 9 mo., then q 3 months)	<input type="text"/>			160.0	165.0	<input type="text" value="160"/> 10/23/2012
BMI (FI-Up): <input type="text"/>				19	20	<input type="text" value="22"/> 10/23/2012
BP (mm Hg)	<input type="text"/>				140/90	<input type="text" value="140/90"/> 10/23/2010
Pulse (bpm)	<input type="text"/>			100	80	<input type="text" value="75"/> 10/23/2010
Smoking Status	<input type="radio"/> Current every day smoker <input type="radio"/> Current some day smoker <input type="radio"/> Former smoker <input type="radio"/> Never smoker <input type="radio"/> Smoker, current status unknown <input checked="" type="radio"/> Unknown if ever smoked <input type="radio"/> Heavy tobacco smoker <input type="radio"/> Light tobacco smoker <input type="checkbox"/> Provided Brief Smoking Cessation Counseling <input type="checkbox"/> Provided Referral to Smoking Cessation Services <input type="checkbox"/> Prescribed Smoking Cessation Medication <input type="checkbox"/> Other: (describe) <input type="text"/>					

**Find Vital Signs log using the Action Bar:** Search for the client first, then request the Vital Signs Log or the Growth Chart from the Action Bar.

Clients								2 Results
Client #	Client Name	Status	Gender	Birth Date	Age	Serviceable	Services	
75087772	TEST, CINDYTWO T	Active	Female	02/02/1960	56	<input checked="" type="checkbox"/>	1	Start Individual Service Facesheet Client Medication Start Client Plan Start Document Account <b>Vital Signs Log</b> <b>Vital Signs - growth</b> Clinical Summary
75226968	TEST, CINDY	None	Female	12/12/1900	115	<input type="checkbox"/>	0	

View: 20

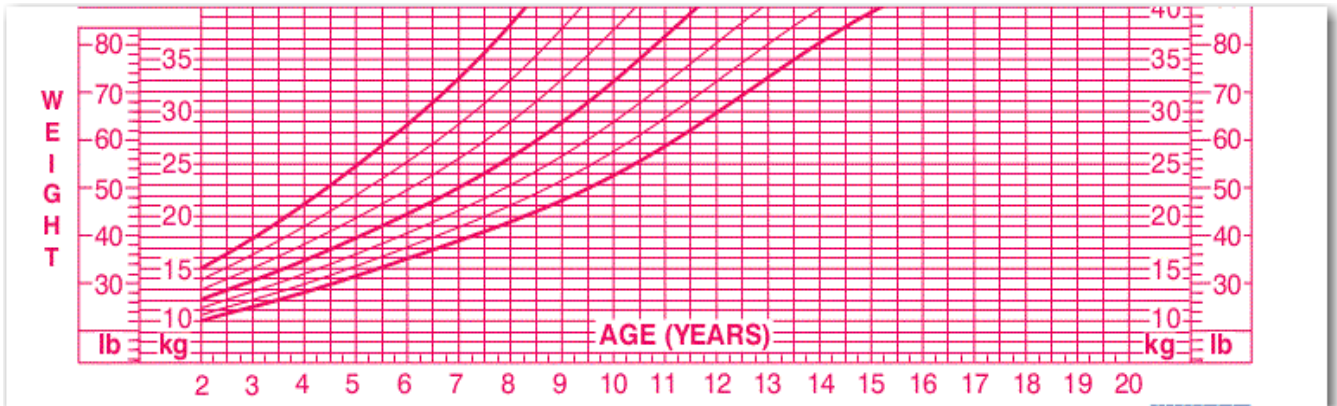
PERSONAL INFO | SECURITY (PASSWORD) | GUIDES/HELP

Clinician's Gateway version 3.6.0  
Built: 1/14/2016 (10:47 PM)

**Vital Signs Log:** displays Vital Signs over the entire history of client. (data from medical staff Vital Signs chart on notes)

Vital Signs Log for TEST, CINDYTWO T (75087772)							
Service #	Date	Height	Weight	BMI	BP	Pulse	
1410651	05/20/2014						
1182151	10/27/2012						
1182146	10/25/2012	69.0	150.0	22	125/92	78	
1182141	10/24/2012						
1182140	10/23/2012	70.0	160.0	22	150/75	70	
1182113	10/22/2012						
864829	10/14/2011	10	100	703	100/100	10	
863396	10/13/2011	70	150	21	110	65	
863407	10/13/2011	70	150	21	110	76	
805825	07/25/2011	70	170	24	110/60	70	
805828	07/25/2011	70	170	24	115/90	82	
805591	07/24/2011	70	180	25	120/80	60	
805592	07/24/2011	70	190	27	145/90	62	

**Vital Signs Growth Chart:** Plots Height and Weight against average percentiles for ages 2 – 20.



**Entering Lab results and medications:** Lab results and medications are entered via Medical Provider notes such as the Physicians Progress Note.

<b>Assessment: incl. Medication Review of Efficacy, Compliance, Adverse Effects; Lab results, if any</b>	Previous Entries: (Select Note) ▼
<div style="border: 1px solid black; height: 60px;"></div>	
<b>Plan: Interventions, Including All Current Medications; Labs/Other Diagnostics Ordered</b>	Previous Entries: (Select Note) ▼
<div style="border: 1px solid black; height: 60px;"></div>	
<b>Changes in any Medical Conditions and/or Medications, Substance abuse (if applicable)</b>	Previous Entries: (Select Note) ▼
<div style="border: 1px solid black; height: 60px;"></div>	

Prescribe via RxNT first and then click on the Copy Current Prescriptions button to bring today's prescriptions onto the note automatically.

Before:

<b>Today's Prescriptions</b>	<a href="#">Copy Current Prescriptions</a>
<div style="border: 1px solid black; height: 60px;"></div>	

After:

<b>Today's Prescriptions</b>	<a href="#">Copy Current Prescriptions</a>
<div style="border: 1px solid black; padding: 5px;"><p>Prescriptions:</p><p>5/30/2024 - Rx: Adderall XR 10 mg capsule,extended release Sig: take 1 capsule (10 mg) by oral route once daily in the morning upon awakening Qty/Dur: 30 Capsules Refills: 0</p><p>1/16/2024 - Rx: Banophen 25 mg capsule Sig: take 1 capsule (25 mg) by oral route every 4 hours as needed Qty/Dur: 30 Capsule Refills: 0</p><p>1/16/2024 - Rx: Aler-Cap 25 mg capsule Sig: take 1 capsule (25 mg) by oral route every 4 hours as needed Qty/Dur: 30 Capsule Refills: 0</p></div>	

# Search and Tag

Search and Tag is used to collect, display and save sets of service notes so they may be viewed in sequence, such as a client's history of services. Notes can be filtered by one or more parameters. (Client, Service Dates, Note Status, Text, Clinician, Procedure, Record Type, Reporting Unit, Location)

Clinicians Gateway Search and Tag

Welcome: Juanita Grampsas

Search for:  Service Records  Prescriptions  Laboratory Orders  Nursing Care Plans

Include deleted records in search results

[Select search item]

[Select search item]

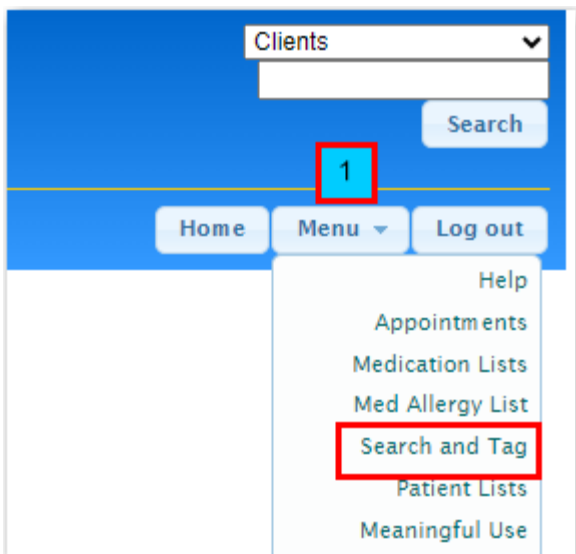
[Select search item]

[Select search item]

[Select search item]

## DEFINE YOUR SEARCH CRITERIA

1. The Search and Tag button is found in the Menu listing on the Home Page.

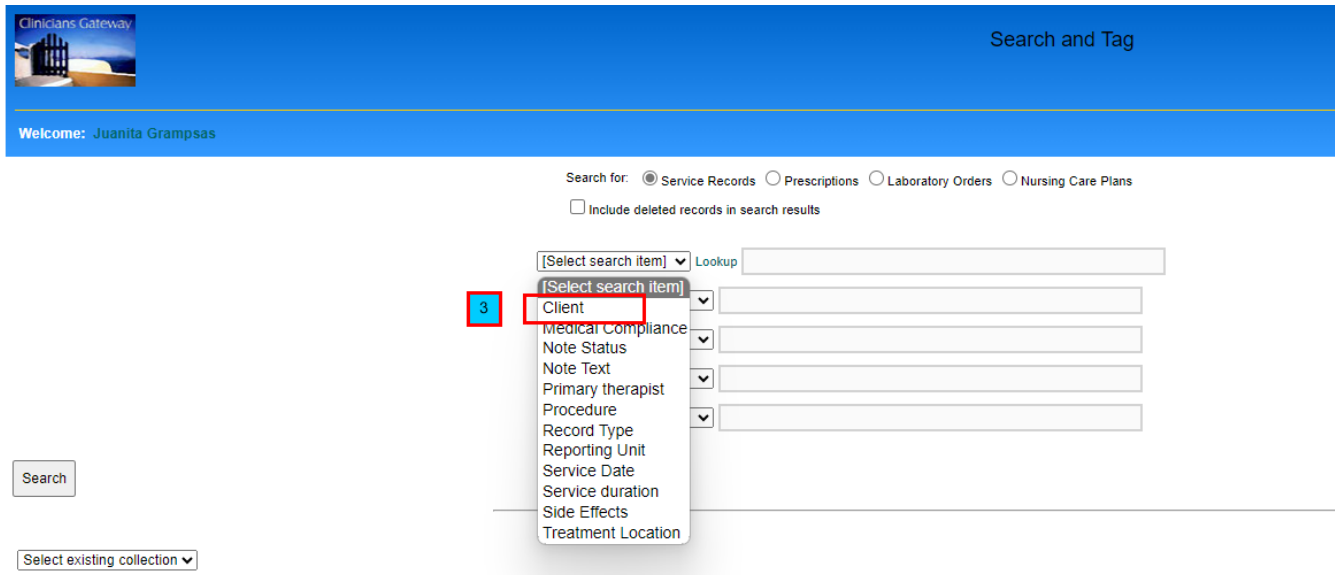


2. The Services radio button should be checked.

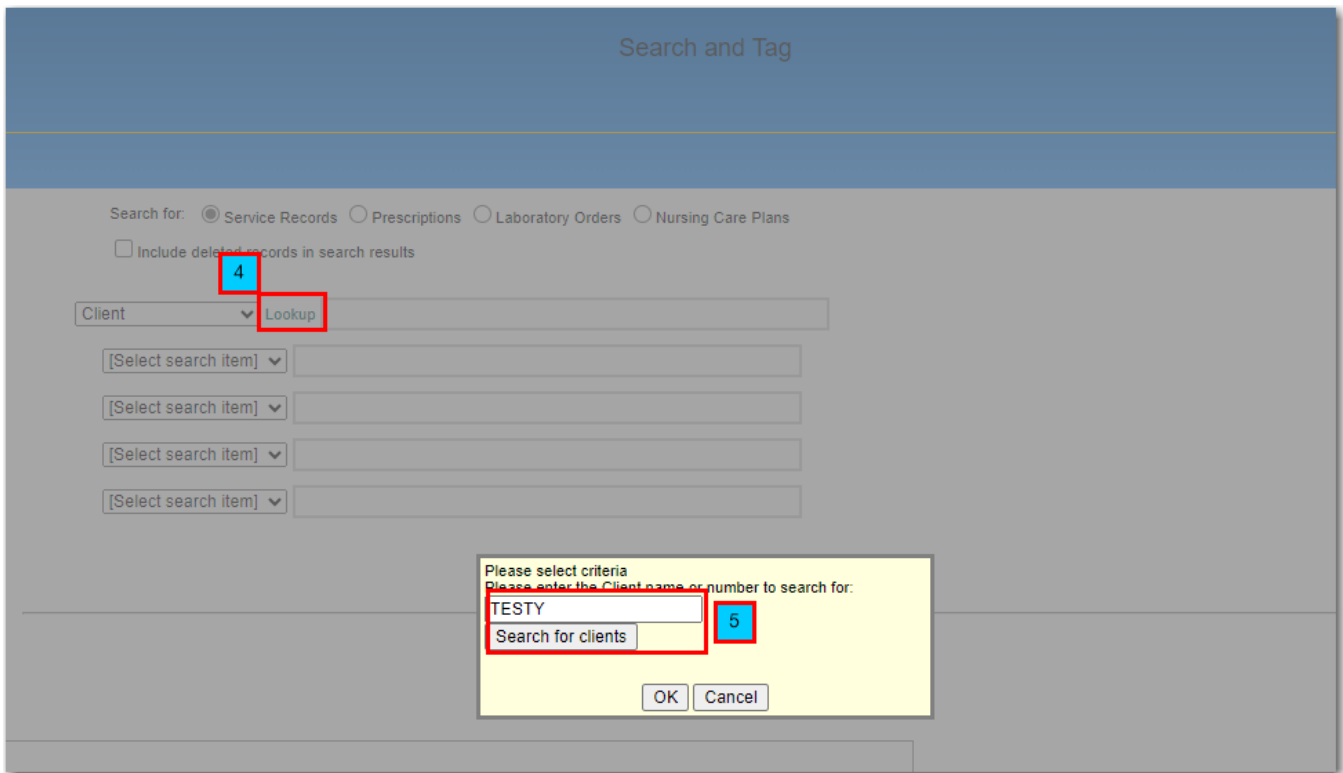
Search for:  Service Records  Prescriptions

Include deleted records in search results

3. Select the first search parameter by clicking on the “Select Search Item” drop down menu. Click on the parameter that you wish to search, such as “Client.”

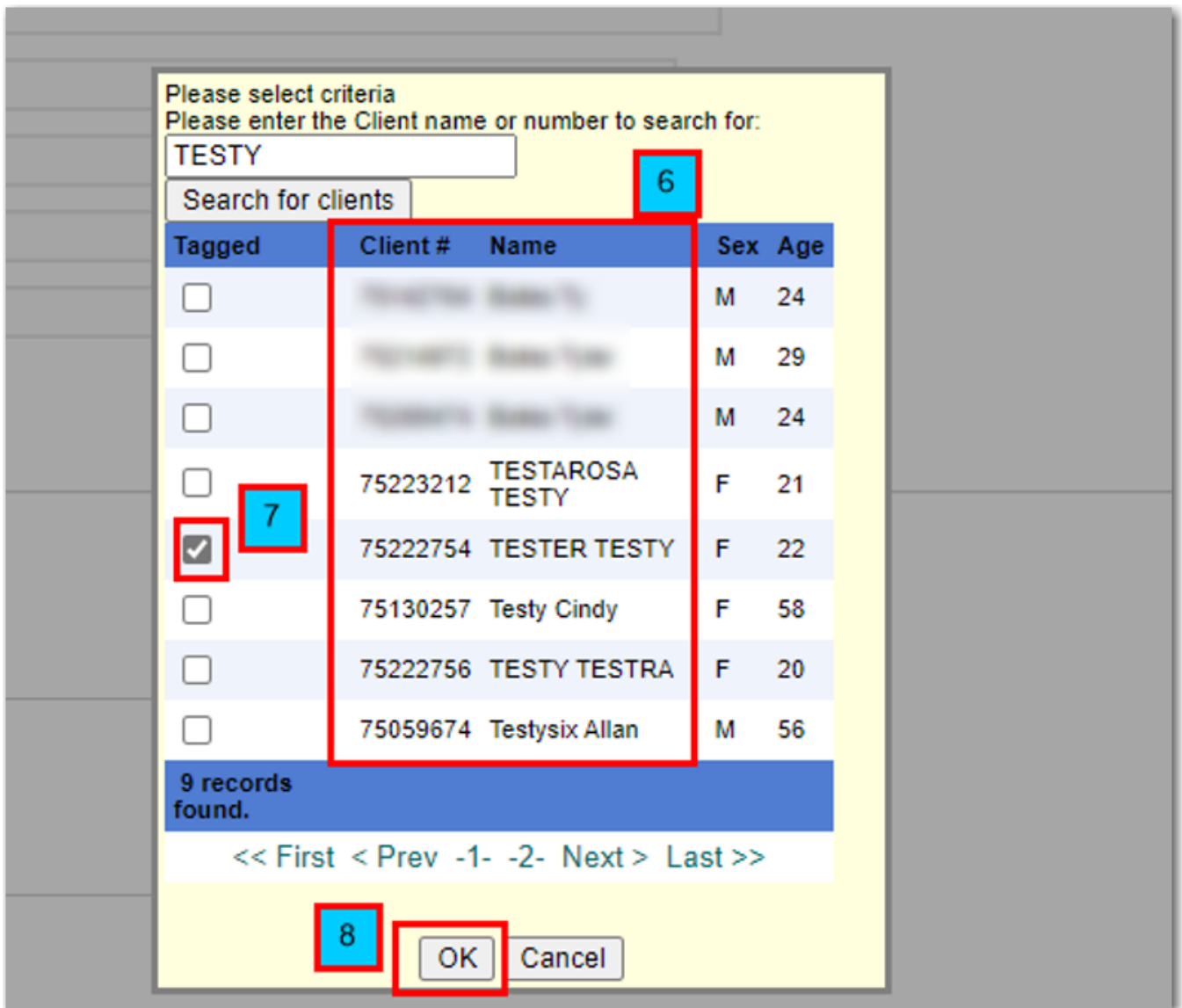


4. Click on “Lookup” and enter the specific search item
5. i.e. For Client; Search by Client Number or last name first name-no comma, click “Search for Clients”.

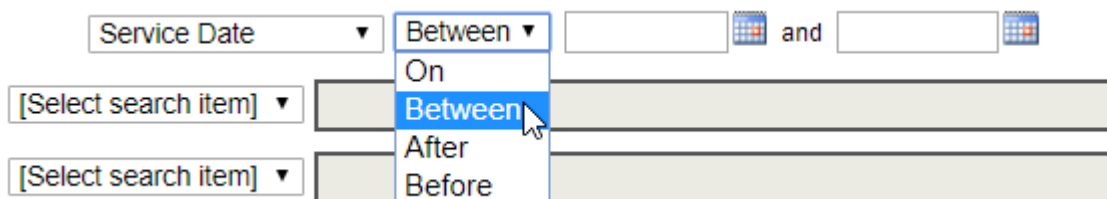


6. A list of matches for 'TESTY' come up.
7. Click the checkbox of the client you want.
8. Click on OK button





9. Continue until you have narrowed your search as many ways as possible.



10. Click the Search button to assemble your results.

Clinicians Gateway Search and Tag

---

Welcome: Juanita Grampsas

Search for:  Service Records  Prescriptions  Laboratory Orders  Nursing Care Plans

Include deleted records in search results

Client

Service Date

[Select search item]

[Select search item]

[Select search item]

10

## Results:

Clinicians Gateway Search and Tag

---

Welcome: Juanita Grampsas

Search for:  Service Records  Prescriptions  Laboratory Orders  Nursing Care Plans

Include deleted records in search results

Client

Service Date

[Select search item]

[Select search item]

[Select search item]

---

Search Results - Service Notes

Un/Check all

Tagged	Date of Service	Client	Client #	Proc. code	Procedure
<input type="checkbox"/>	22-Feb-2024	TESTER TESTY	75222754	110	401 - Mental Health Promotion

1 record found.

## REVIEW, PRINT OR SAVE YOUR RESULTS

1. To sort your items by a certain topic, click the top of that column (e.g. Date of Service)
2. Check the items that you wish to view or save.
3. Click on one of the Review/Print buttons (all checked items or all results).

4. Choose “Open” to view them or “Save” as desired.
5. To read them, use the big blue arrows at the top of the page to move through the documents.
6. Click the Printer Icon or File/Print.

#### TO SAVE A COLLECTION

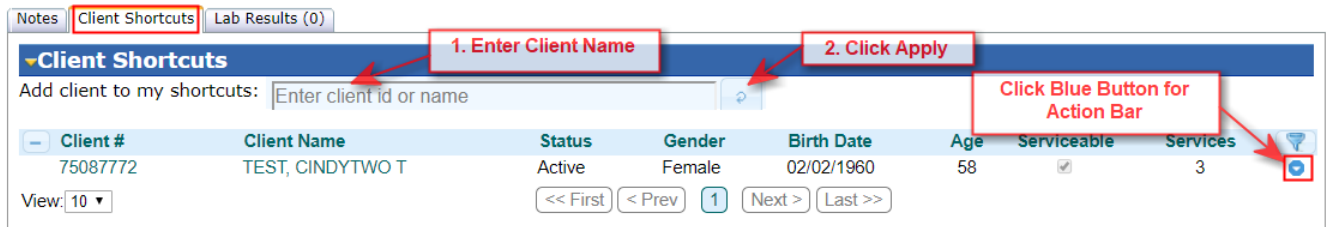
1. To retain your collection in Search and Tag for later reading, click the blue [message “click here to add a new collection name”](#)
2. Enter the name of the collection and click OK
3. Click the “Save Tagged” button and all items checked will be moved to the collection. You can do this multiple times or “tag” and move them all together.

#### TO RETRIEVE A PREVIOUSLY SAVED COLLECTION

1. Click on the words *“select an existing collection name”*
2. The Drop Down menu indicator appears. Click on the down arrow.
3. Click on the collection that you would like to view.

# Client Shortcuts

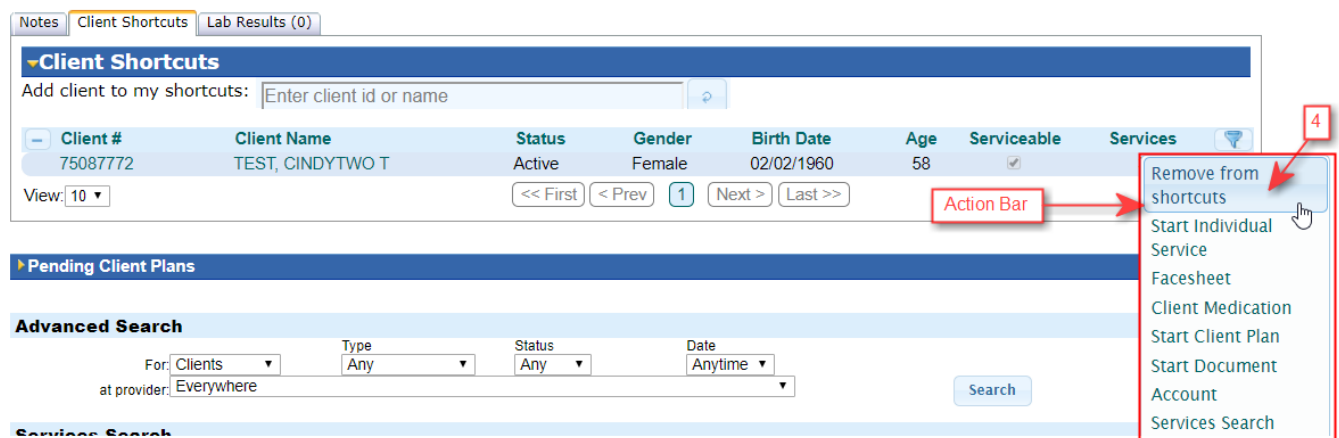
Build your custom client shortcut list on the Home Page (Does not alter SmartCare caseload records)



Above is the Client Shortcut tab on your home page. To add a client to you shortcuts; (1) enter client name to add to shortcuts, (2) click the apply button. Once added you can quickly access the Client Action Bar by clicking the Blue Button (3)

The Action Bar gives access to quick client information and common actions: view Facesheet, start a service or client plan, view medication log, etc...

When a client is added to the shortcuts, a new item is added to the top of the action bar. This action will remove this client from your shortcuts list (4)

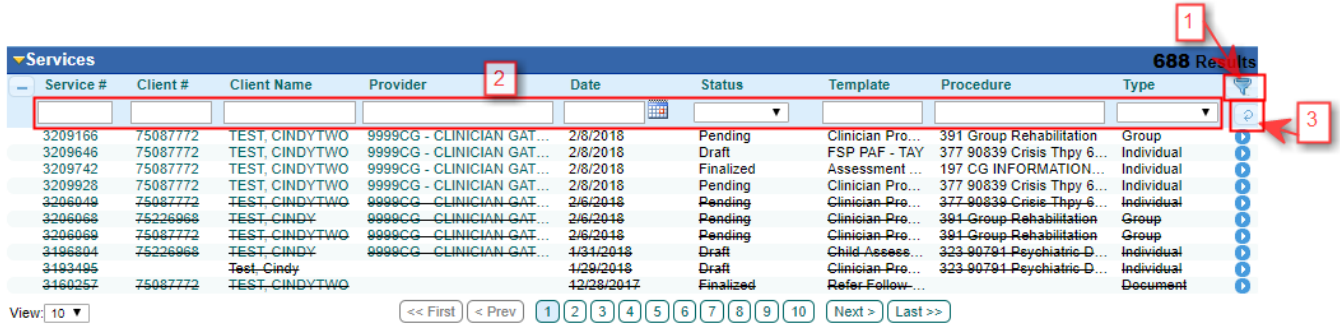


# Filtering and Sorting

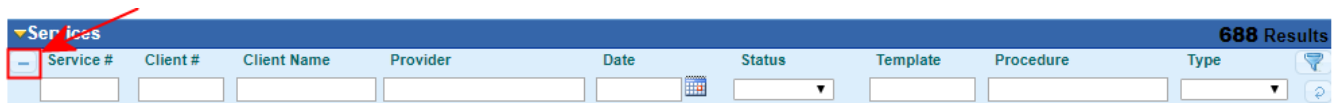
At any point when you have a large list of clients, services, etc. you may want to find specific information. This can be attained with the assistance of the various Filters and sorts.

**Enhanced Filtering** can be done over multiple parameters at the same time.

1. Click the funnel (filter icon) to open the fields.
2. Then enter the texts you want to filter for.
3. Click the Arrow to activate the filter.



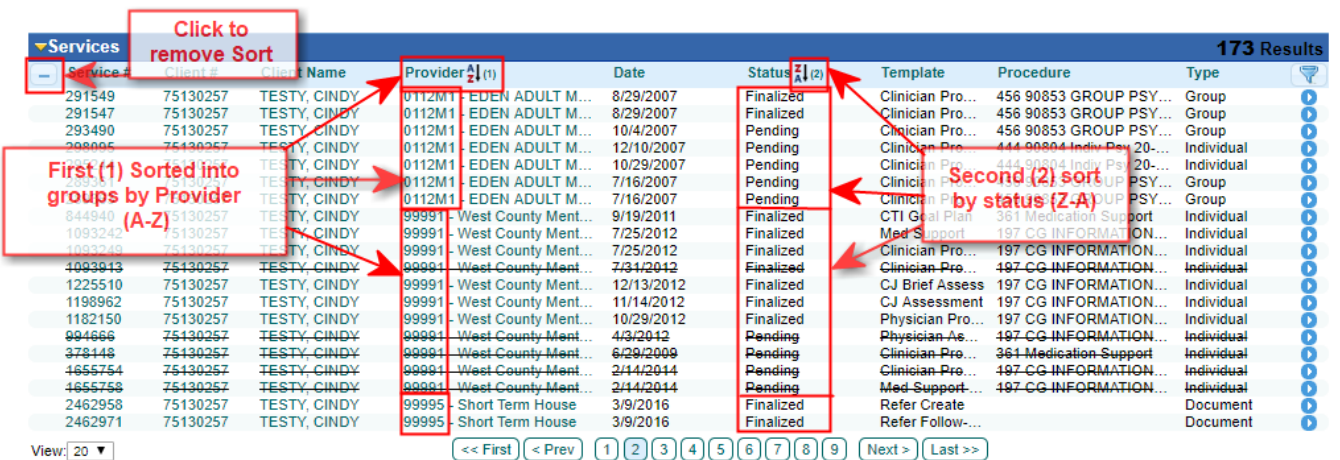
Remove Filters by clicking on the  button.



**Enhanced Sorting** can be done over multiple columns, in ascending or descending order.

Sort Order will be retained for the next time you search!

- First click = ascending. A second click = descending. Third click = remove the sort.
- Click(s) on the column you want to be the first sort.
- Click(s) on the next column you want to be the second sort, etc.
- Your custom **sort order is retained** and applied to future searches of the same type.
- Minus button clears the sort order and restores date order as default.
- Remove Sort Order by clicking on the  button.



# Individual Notes



# Individual Notes Using Client Name or Number

1. This is your home page.
2. Click on the drop arrow to select “Individual” for the type of service.
3. Verify the Primary Clinician name is correct.
4. Enter the client name (Last name then First name with no commas, ex. Mouse Mickey) or the client number.
5. Select the template name from the drop list.
6. Click on “Start Indiv Service.”

The screenshot displays the 'Clinicians Gateway' software interface. At the top, there is a navigation bar with a 'Home' button (labeled 1) and a search field. Below the navigation bar, the user is logged in as 'Juanita Grampas'. The main content area features the 'Enter New Service' form, which includes a 'Type of Service' dropdown (labeled 2) set to 'Individual', a 'Primary Clinician' dropdown (labeled 3) set to 'Grampas Juanita', a 'Client' text input field (labeled 4) containing 'Enter Client Name or ID or leave blank', and a 'Note Template' dropdown (labeled 5) set to 'Clinician's Progress Note CalAIM 23-07'. A 'Start Indiv Service' button (labeled 6) is located to the right of the form. Below the form, there is a table titled 'Pending Services' with 6 results. The table columns are: Svc #, Gsr #, Client #, Client Name, Provider, Date, Template, Procedure, Sort, and Reviewer. The table contains five rows of data, each with a blue circular icon in the Reviewer column. At the bottom of the table, there is a 'View' dropdown set to '10' and navigation buttons: '<< First', '< Prev', '1', 'Next >', and 'Last >>'.

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
8401097				DIVERSITY IN H...	5/15/2024	Clinician P...		O Draft	
8415596		75130257	Testy, Cindy	ADULT FORENSI...	5/28/2024	Clinician P...	197 - CG Infor...	O Draft	
8416222		75130257	Testy, Cindy	ADULT FORENSI...	5/29/2024	Clinician P...	H0032 Plan D...	O Draft	
8416826		75130257	Testy, Cindy	ADULT FORENSI...	5/29/2024	Clinician P...	H2021 Comm...	O Draft	
8418423		75130257	Testy, Cindy	ADULT FORENSI...	5/30/2024	Clinician P...	90832 Psycho...	O Draft	
8418699			unregister, unregi...	OAKLAND AD M...	5/30/2024	Clinician P...	197 - CG Infor...	O Draft	



1. Verify the client name.
2. Verify the status for that client. "Active" indicates that the client has an open episode.
3. Verify the appropriate provider name is indicated.
4. Select the Title of the type of note you will enter.
5. Click on "Select"

Clinician's Gateway

Client, Provider and Title

Welcome: Juanita Gramppas

Servicable Clients Matching, "test c"

Search For Different Client  
test c Search

Client #	Client Name	Status	Gender	Age	Services	Select Provider	Note Template	Results
75241441	TEST, CHRIS	Active	Male	98	3	CLINICIAN GATEWAY TEST MHS AD	Clinician's Progress Note CalAIM 23-07	Select
75226968	TEST, CINDY	Active	Female	123	7	HOSPITAL 24HR SERVICES	Clinician's Progress Note CalAIM 23-07	Select
75087772	TEST, CINDY T W O T	Active	Female	64	97	West County Mental Health Svs	Clinician's Progress Note CalAIM 23-07	Select
75264173	TESTCASE, BRETT	Active	Male	7	0	West County Mental Health Svs	Clinician's Progress Note CalAIM 23-07	Select
75053807	TESTCASE, CINDY V	Closed	Female	63	0	No matching providers	Clinician's Progress Note CalAIM 23-07	Select
75144431	TESTCASE, CINDY LOUIE W	Active	Female	75	0	West County Mental Health Svs	Clinician's Progress Note CalAIM 23-07	Select
75135386	TESTCASE, DAVE	Active	Male	74	9	CLINICIAN GATEWAY TEST MHS AD	Clinician's Progress Note CalAIM 23-07	Select
75082350	TESTCASES, TESTING T	Active	Female	14	0	CLINICIAN GATEWAY TEST MHS AD	Clinician's Progress Note CalAIM 23-07	Select

8 records found.

PERSONAL INFO | SECURITY (PASSWORD) |

Clinician's Gateway version 3.7.40  
Build: 5/7/2024 (10:50 PM)

The Note Entry page looks like this:

**Service Entry, Individual**

---

**Service #:** New    **Title:** Clinician's Progress Note CalAIM 23-07

**Potential Harm:** (Select One) ▼

**Client:** Number: 75082350    Last Name: TESTCASES    First Name: TESTING    [X] [...]

**Service date:** 06/10/2024 [calendar icon]

**Client opened:** 4/10/2018

**Procedures:** Select Procedure ▼

**Service Location:** Select Location ▼

**Mode of Delivery:** (Select One) ▼

**Med. Compliant:** N/A ▼    **Side Effects:** N/A ▼

**Emergency?**     **Pregnant/Post-Partum?**

**Principal Diagnosis:** F23 x ▼    Brief psychotic disorder x ▼

**Billing time**

**Primary Clinician:** 201351 - Grampas, Juanita ▼

**Provider:** CLINICIAN GATEWAY TEST MHS AD ▼

[Add Additional Clinicians](#)

**Care Team Members** 0 Result

Name	Company	Phone	Role	Removal Date
No Records				

**Add-on Codes:** None ▼    **Add-On Time:** [ ]    Enter the total duration for the add-on code. Units will be calculated.

**Interactive Complexity:** None ▼

**Contact/E-M Time, Service Language, Pre-Existing Diagnoses**

**Primary FF/Contact-E-M Time:** [ ] Hours [ ] Minutes

**Services were provided in:** English ▼

by  interpreter [ ] or  clinician

**ICD-10:** F23

**GMC:** 99

**DSM 5:**

Episode Diagnosis Information

	Primary	Secondary	Tertiary	SU
ICD-10: F23				
GMC: 99				
DSM 5:				

## Starting the Note:

1. When writing a progress note in Clinician's Gateway, first choose the provider from the drop down.
2. Enter the Procedure code from the drop down.
3. Enter the Principal Diagnosis for the client.
4. Choose the Service Location, where the service is to be performed: Office, Field, Hospital etc
5. Choose mode of delivery: phone, In person
6. Enter the Service Start time and Duration of the service. The Duration usually matches the procedure entered in #2
  - The Service Start field will default to 12:00 AM and can be left as such, but your program may instead require that you accurately list the start time. Follow the "Using the Time Entry Widget" instructions on page 47.
- 7 and 8. Enter Travel time and documentation if applicable.
9. Enter the Face to Face time here. This usually matches the value for #6.

Service #: 8433626 Title: Clinician's Progress Note CaAIM 23-07 Potential Harm: (Select One) v

Service date: 06/11/2024  
Client opened: 2/6/2009

Client: Number: 75136699 Last Name: TEST First Name: TRAINING

Procedures: 90834 Psychotherapy, 45 Min. w/Patient 2

Service Location: Office (Primary) 4

Mode of Delivery: Face-to-face 5

Med. Compliant: N/A Side Effects: N/A

Emergency?  Pregnant/Post-Partum?

Principal Diagnosis: F01.52 Vascular dementia, unsp severity, with psychotic disturb 3

**Billing time**

Primary Clinician: 201351 - Grampas, Juanita

Provider: FFYC STAY FSP TAY (018435) 1

Service Start: 12:00 AM 6

Duration: 00:45 6

Travel Time: 00:10 7

Documentation Time: 00:10 8

Clinician Time: 01:05

[Add Additional Clinicians](#)

**Care Team Members** 0 Result

Name	Company	Phone	Role	Removal Date
No Records				

View: 10

Add-on Codes: None Add-On Time: Enter the total duration for the add-on code. Units will be calculated.

Interactive Complexity: None

**Contact/E-M Time, Service Language, Pre-Existing Diagnoses**

Primary FF/Contact/E-M Time: 00:45 9

Services were provided in: English

ICD-10: by  interpreter or  clinician GMC:

Episode Diagnosis Information  
Primary Secondary Tertiary SU

10. (For Progress Note specifically) Enter text on Narrative textbox. This describes the service
11. (For Progress Note specifically) Enter text on co-staff if it's a group service
12. (For Progress Note specifically) Enter text on Next Steps to describe an update to the problem and next steps.
13. Check 'Note is Complete' checkbox (only shows if you are doing a Daily Staff Log).
14. Click Save as Pending.

**Narrative** Previous Entries: (Select Note) ▼

Describe the service, including how the service addressed the beneficiary's behavioral health need (e.g., symptom, condition, diagnosis, and/or risk factors).

10 this service is to help this patient improve symptoms of dementia

**Co-Staff (Group Services ONLY)** Previous Entries: (Select Note) ▼

Note text needs to be a least 3 characters long

**Instructions:** Information about co-staffing is only required when one staff is documenting a group service facilitated by multiple providers for both providers on one progress note. In that situation, the progress note must clearly document the specific involvement and the specific amount of time of involvement of each provider of the group activity, including documentation time.

**Reminder:** All group services require a list of participants to be maintained outside of the beneficiary's health record due to privacy concerns.

11 not a group therapy

**Next Steps** Previous Entries: (Select Note) ▼

Including, but not limited to, planned action steps by the provider or by the beneficiary, collaboration with the beneficiary, collaboration with other provider(s), and any update to the problem list as appropriate.

12 patient needs to eat balanced meals and take medications as prescribed

13  Note is complete.

14

Cancel
Spell Check
Save and Continue
Save as Pending
Save as Draft

Once the service is saved you will be returned to the Home screen and see this message (unless you clicked Save and Continue, then you will stay on the same page).

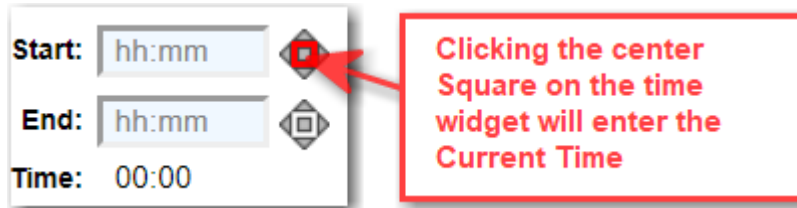
Service record 8433626 was successfully saved.

## Using the Time Entry Widget

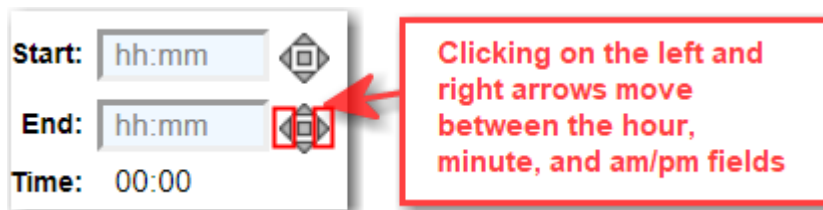
The format for all time entry fields are HH:MM AM/PM.

1. When typing directly into the fields use a zero when necessary, (e.g typing 0806pm will display as 08:06 PM)
2. The widget to the right of the text box can default and adjust time

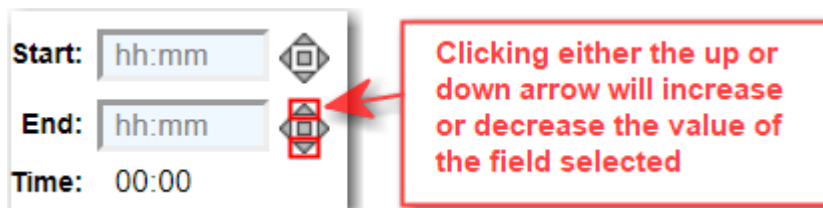
- Clicking the center square will enter the Current Time



- Clicking on the left and right arrows move between the hour, minute, and am/pm fields



- Clicking either the up or down arrow will increase or decrease the value of the field selected



## Adding a note with an Add-On code

Repeat steps 1-9 from above (starting a note)

1. In the add-on Code drop down, choose the add on code that goes with the primary code you chose for #2 (above)
2. In the Add-on Time text box, manually enter the number of minutes, i.e 45 minutes.

The screenshot shows the 'Care Team Members' interface. At the top, there is a table header with columns: Name, Company, Phone, Role, Removal Date, and 0 Result. Below the header, there is a 'No Records' message and a 'View: 10' dropdown. A pagination bar shows '<< First < Prev 1 Next > Last >>'. Below this, there are two red boxes: box 1 highlights the 'Add-on Codes' dropdown menu, which is currently set to '96121 Neurobehavioral Status Exam, Each Add'l Hour'. Box 2 highlights the 'Add-on Time' text box, which contains '00:45'. To the right of the text box is the instruction 'Enter the total duration for the add-on code. Units will be calculated.' Below the text box is an 'Interactive Complexity' dropdown menu set to 'None'.

**To Complete the note with an Add-On, Repeat steps 10-14 from above (starting a note)**

## How a note with an Add-On Code appears on the Staff Log

**To view the note with the add-on code you created click on your name next to the 'welcome'**



**Once you click on your name you will see Daily Approval and your note with the primary code (time 1:05) and the add on code (time: 0:45) for a total of 1 hour and 50.**

View Staff

Staff Information for: Grampas, Juanita (201351)

SSN: \*\*\*-\*\*-\*\*\*\*\* License #: Start date: 5/13/2023  
 Gender: Female License Renew: End date:  
 BirthDate: \*\*/\*\*/\*\*\*\* License State: CA Last Changed On:  
 Ethnicity: Taxonomy: Record Created On:  
 National Provider Id:  
 Medicaid PIN:  
 Medicare PIN:  
 DEA Number:  
 UPIN: 0  
 CG Code: [No code yet]  
 Staff Type: Licensed Clinical Social Worker  
 Languages: None

CG Note Delete Form

Statistics Service Dates: 05/11/2024 thru 06/11/2024 All Search

Type of Service	Clinician Role	Number of Services	Average Interval	Time	Time Reporting
Individual	Primary Clinician	8	0	07:49	Enter Estimated Time <input type="text" value="00:00"/> Calculate Est. %
	Co-Clinician	0	0	00:00	
Group	Primary Clinician	0	0	00:00	
	Co-Clinician	0	0	00:00	
Indirect	Primary Clinician	0	0	00:00	
Totals:		8	0	07:49	

Daily Approval Service Date: 06/11/2024 Search

Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time
84336266/11/2024	Indiv.75136699	TEST TRAINING	018435	FFYC STAY FSP TAY (018435)	96116	(w/96121 Add-on) Neuro-behavioral Status Exa	PENDING	Pending	01:05	1	01:05
84336266/11/2024	Indiv.75136699	TEST TRAINING	018435	FFYC STAY FSP TAY (018435)	96121	Neurobehavioral Status Exam, Each Add'l Hour	PENDING	Pending	00:45	1	00:45

1 service record on 6/11/2024 for a total time of 01:50. Approve Time

If you click 'approve time' button, you will see the individual Staff log with the times. Please be aware one row for the Primary code and another row for the add on code. **REMEMBER THAT APPROVING TIME WILL FINALIZE ANY PENDING NOTES!!!**







## Codes: Add-on Codes and Time

Certain procedure codes exist that are designed to be used in sets. Total Time (including documentation and travel) and Face-to-Face<sup>1</sup> times are now recorded for each code. Please refer to QA training resources on the ACBHCS Providers website for coding guidelines.

### SITUATION ONE: Note with automatic add on code

1. Choose the right provider from the drop down
2. When writing a progress note in Clinician's Gateway for a **Crisis service, first choose the 90839 Primary code (With 90840 add on)**. Documentation and Travel will be added to Primary Code time.

The total time for this procedure code is from 30 to 74 min but if it takes longer than that, system will automatically add the add-on code 90840

3. Add the service location: i.e field, hospital etc
4. Choose mode of delivery: face to face, video, telephone etc
5. Change the service start time or leave it as default (12:00 AM).

**Example:** (2:00) service duration time and 20 minutes documentation + travel time = 2:20 Clinician's time.

Service #: 8024998 Title: Crisis Evaluation 23-07 Potential Harm: (Select One)

Service date: 06/11/2024

Client opened: 8/21/2023

Util. review date:

Client Plan due date:

Number	Last Name	First Name
75130257	Testy	Cindy

2 Procedures: 90839 (w/90840 Add-on) PsychThpy for Crisis

3 Service Location: Field

4 Mode of Delivery: Face-to-face

Med. Compliant: N/A Side Effects: N/A

Emergency?  Pregnant/Post-Partum?

Principal Diagnosis: Z03.89 x Encounter for observation for other suspected diseases and conditions rul... x

**Billing time**

Primary Clinician: 201351 - Grampsas, Juanita

1 Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)

5 Service Start: 12:00 AM

6 Duration: 02:00

7 Travel Time: 00:10

8 Documentation Time: 00:10

**Clinician Time: 02:20**

[Add Additional Clinicians](#)

In this case above we have added more time (2 hours) than what procedure code 90839 allows (max 74 minutes), in this case the system automatically adds the add-on code 90840. **The user doesn't have to manually add the add on, its automatically done.**

In the Daily Approval section the service with the automatic addon is shown as 1 row only. To get to the Daily Approval section, click on your name next to the 'Welcome' top left.

Note that the status is still Pending, **once you click on Approve time button, it will Finalize the note and the service will transfer to SmartCare.**

View Staff

---

**Staff Information for: Grampas, Juanita (201351)**

SSN: ***-**-****	License #: _____	Start date: 5/13/2023
Gender: Female	License Renew: _____	End date: _____
BirthDate: **/**-****	License State: CA	Last Changed On: _____
Ethnicity: _____	Taxonomy: _____	Record Created On: _____
	National Provider Id: _____	

Medicaid PIN: \_\_\_\_\_  
 Medicare PIN: \_\_\_\_\_  
 DEA Number: \_\_\_\_\_  
 UPIN: 0  
 CG Code: [No code yet]

Staff Type: Licensed Clinical Social Worker

Languages: None

[CG Note Delete Form](#)

▼ Statistics
Service Dates: 05/12/2024 thru 06/12/2024 All Search

Type of Service	Clinician Role	Number of Services	Average Interval	Time	Time Reporting
Individual	Primary Clinician	0	0	00:00	Enter Estimated Time <input type="text" value="00:00"/> <span>Calculate</span>
	Co-Clinician	0	0	00:00	
Group	Primary Clinician	0	0	00:00	Est. % <input type="text"/>
	Co-Clinician	0	0	00:00	
Indirect	Primary Clinician	0	0	00:00	
<b>Totals:</b>		<b>0</b>	<b>0</b>	<b>00:00</b>	

▼ Daily Approval
Service Date: 06/11/2024 Search

Srv. #	Date	TypeClient #	Client Name	Reporting Unit	Procedure	Status	Approve Time #	In Group	Approve Time
80249986/11/2024	Indiv.75130257	Testy Cindy	81142 ADULT FORENSIC BEHAVIORAL HLTH (81142)		90839 (w/90840 Add-on) PsychThpy for Crisis	PENDING	Pending 02:20	1	02:20

1 service record on 6/11/2024 for a total time of 02:20. Approve Time

Once you have clicked on the Approve time button in the Daily Approval, then you should see the Individual Staff Log as below.

As mentioned earlier the Primary procedure time and add on are combined into one row.

**ALAMEDA COUNTY** Behavioral Health Care Services

[Home](#) | [Help](#) | [Log Out](#)

### Individual Staff Log

**Service Date:** 6/11/2024

Svc #	Type	RU	Client #	Client Name	Procedure	Time	Grp Ct	Loc	Rec.	Flags
						H:M				
8024998	Indiv.	81142 ADULT FORENSIC BEHAVIORAL HLTH (81142)	75130257	Testy Cindy	90839 (w/90840 Add-on) PsychThpy for Crisis	02:20	1	Field		E/
1 service record on 6/11/2024 for a total time of						02:20				

I hereby certify, under penalty of perjury, that the information contained in this document is accurate and free from fraudulent claiming.

**Grampsas, Juanita, Admin/Clerical**
**6/11/2024**
**Licensed Clinical Social Worker**

6/12/2024 1:39:58 PM  
 ELECTRONIC PROTECTED HEALTH INFORMATION

SITUATION TWO: CPT service codes putting more time than allowed for that Primary Code

1. Choose the right provider from the drop down
2. When writing a progress note in Clinician's Gateway, **first choose the 90791 Primary code.** Documentation and Travel will be added to Primary Code time.
3. Add the service location: i.e field, hospital etc
4. Choose mode of delivery: face to face, video, telephone etc
5. Add principal diagnosis

6. Change the service start time or leave it as default (12:00 AM).
7. Add the Duration i.e 30 min (more than the 22 min allowed for this procedure code. Add the Travel time and Documentation time)
8. Under the Contact/E-M Time heading, enter primary FF/Contact/E-M time (usually this matches duration time, in this case 30 minutes)
9. Fill out the rest of the form: Narrative, Co-Staff (Group Services ONLY) and Next Steps.
10. Make sure to check the checkbox 'Note is Complete'
11. Save by clicking on 'Save as Pending'

The total time for this procedure code MAX 22 minutes, if you go above 22 minutes you will get an error like in screenshot below. In this case you need to manually add an add on code. Please see below: Situation THREE.

**This service cannot be saved until the following issues are resolved:**  
 \* The clinician's time is more than the maximum allowed at the selected provider (22 minutes).

Service #: New Title: Clinician's Progress Note CalAIM 23-07 Potential Harm: (Select One)

Service date: 06/13/2024  
 Client opened: 8/21/2023  
 Util. review date:  
 Client Plan due date:  
 Last assessment: 6/11/2024

Client: 75130257 Festy Cindy

2 Procedures: 90791 Psychiatric Diag Evaluation, 15 min.

3 Service Location: Office (Primary)

4 Mode of Delivery: Face-to-face  
 Med. Compliant: N/A Side Effects: N/A  
 Emergency?  Pregnant/Post-Partum?

5 Principal Diagnosis: Z03.89 Encounter for observation for other suspected diseases and conditions rul...

**Billing time**

1 Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)

6 Service Start: 12:00 AM  
 7 Duration: 00:30  
 Travel Time: 00:10  
 Documentation Time: 00:10  
 Clinician Time: 00:50

[Add Additional Clinicians](#)

**Care Team Members** 0 Result

Name	Company	Phone	Role	Removal Date
No Records				

Add-on Codes: None Add-On Time: Enter the total duration for the add-on code. Units will be calculated.  
 Interactive Complexity: None

**Contact/E-M Time, Service Language, Pre-Existing Diagnoses**

8 Primary FF/Contact/E-M Time: 00:30 Services were provided in: English ICD-10: GMC:

**Narrative** Previous Entries: (Select Note) ▼

Describe the service, including how the service addressed the beneficiary's behavioral health need (e.g., symptom, condition, diagnosis, and/or risk factors).

htrhjtrjtr

**Co-Staff (Group Services ONLY)** Previous Entries: (Select Note) ▼

**Instructions:** Information about co-staffing is only required when one staff is documenting a group service facilitated by multiple providers for both providers on one progress note. In that situation, the progress note must clearly document the specific involvement and the specific amount of time of involvement of each provider of the group activity, including documentation time.

**Reminder:** All group services require a list of participants to be maintained outside of the beneficiary's health record due to privacy concerns.

jytrjytrjytr

**Next Steps** Previous Entries: (Select Note) ▼

Including, but not limited to, planned action steps by the provider or by the beneficiary, collaboration with the beneficiary, collaboration with other provider(s), and any update to the problem list as appropriate.

jytrjytrjytr

10 Note is complete.

11

Cancel Spell Check Save and Continue Save as Pending Save as Draft

### SITUATION THREE: CPT service code adding second code or modifier (interactive complexity, child bed day, conrep home visit)

#### Case: Interactive Complexity

Login to Clinician Gateway Mental Health. [Clinician's Gateway version 3.7.42 \(Home\)](#)

Open a note for a specific client. Select all required fields from the drop down: Provider, Procedure, Location, mode of delivery, principal diagnosis, duration, travel time and documentation time.

Welcome: **Juanita Grampsas** Home Menu Log out

Service #: 8526656 Title: Clinician's Progress Note CalAIM 23-07 Potential Harm: (Select One)

Service date: 08/01/2024  
 Client opened: 8/21/2023  
 Last assessment: 6/4/2024

Client: Number: 75130257 Last Name: Testy First Name: Cindy  
 (Smartcare #: 75130257)

Procedures: 90832 Psychotherapy, 30 min. w/Patient

Service Location: Field  
 Mode of Delivery: Face-to-face  
 Med. Compliant: N/A Side Effects: N/A  
 Pregnant/Post-Partum?

Principal Diagnosis: F01.511 Vascular dementia, unspecified severity, with agitation

**Billing time**

Primary Clinician: 201351 - Grampsas, Juanita  
 Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)

Service Start: 12:00 AM  
 Duration: 00:30  
 Travel Time: 00:10  
 Documentation Time: 00:10  
 Clinician Time: 00:50

[Add Additional Clinicians](#)

Under the section Care Team members under Interactive Complexity drop down select the code listed i.e 90785 + Interactive Complexity.

**Care Team Members** 0 Result

Name	Company	Phone	Role	Removal Date
No Records				

View: 10

Add-on Codes: None Add-On Time:  Enter the total duration for the add-on code. Units will be calculated.  
 Interactive Complexity: 90785 + Interactive Complexity

Fill out remaining sections of the form, make sure to include Primary FF/Contact/E-M Time: Hours: minutes, list any allergies and add the progress notes : Narrative, Co-Staff (Group Service ONLY) and Next Steps. Once everything has been completed, check on 'Note is complete' checkbox and click on button 'Save as Pending'.

If no errors, your note should be under Pending Services (Click on Home button)

Pending Services										10 Results
Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer	
8401097				DIVERSITY IN H...	5/15/2024	Clinician P...		○ Draft		
8415596		75130257	Testy, Cindy	ADULT FORENSI...	5/28/2024	Clinician P...	197 - CG Infor...	○ Draft		
8416222		75130257	Testy, Cindy	ADULT FORENSI...	5/29/2024	Clinician P...	H0032 Plan D...			
8416826		75130257	Testy, Cindy	ADULT FORENSI...	5/29/2024	Clinician P...	H2021 Comm...	○ Draft		
8418423		75130257	Testy, Cindy	ADULT FORENSI...	5/30/2024	Clinician P...	90832 Psycho...			
8418699			unregister unregi...	OAKLAND AD M...	5/30/2024	Clinician P...	197 - CG Infor...	○ Draft		
8467233				ABODE SERVIC...	6/24/2024	Refer Follo...		● Review	Gramp...	
8512823		75130257	Testy, Cindy	ADULT FORENSI...	7/17/2024	Clinician P...	90885 Psych. ...			
8512834		75130257	Testy, Cindy	ADULT FORENSI...	7/17/2024	Clinician P...	90837 Psycho...			
8526656		75130257	Testy, Cindy	ADULT FORENSI...	8/1/2024	Clinician P...	90832 Psycho...			

View: 10 << First < Prev 1 Next > Last >>

### Case: Conrep home visit (MHS ONLY)

Login to Clinician Gateway Mental Health. [Clinician's Gateway version 3.7.42 \(Home\)](#).

Open a note for a specific client. Select all required fields from the drop down: Provider, Procedure, Location, mode of delivery, principal diagnosis, duration, travel time and documentation time.

Client: <input type="text"/>	Service date: 08/02/2024
Procedures: 90834 Psychotherapy, 45 Min. w/Patient	Client opened: 3/4/2024
Service Location: Field	Util. review date:
Mode of Delivery: Face-to-face	Client Plan due date:
Med. Compliant: N/A    Side Effects: N/A	
Principal Diagnosis: Z03.89    Encounter for observation for other suspected diseases and conditions rul...	
<b>Billing time</b>	
Primary Clinician: 201351 - Grampsas, Juanita	Service Start: 12:00 AM
Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)	Duration: 00:40
	Travel Time: 00:15
	Documentation Time: 00:10
Clinician Time: 01:05	

[Add Additional Clinicians](#)



Under the section Care Team members under Add-On Codes drop down menu, select the 611 CONREP Home Visit. Enter the amount of minutes of the home visit in the Add-on Time text box.

Fill out remaining sections of the form, make sure to include Primary FF/Contact/E-M Time: Hours: minutes, list any allergies and add the progress notes : Narrative, Co-Staff (Group Service ONLY) and Next Steps. Once everything has been completed, check on 'Note is complete' checkbox and click on button 'Save as Pending'.

If no errors, your note should be under Pending Services (Click on Home button)

Case: Child Bed Day (SUD ONLY)

Login to Clinician Gateway Substance Abuse Disorder: [Clinician's Gateway version 3.7.42 \(Login\)](#).

Under Type of Service drop down select : Individual, enter client name and choose template from the drop down menu. The only template that has the Child Bed Day field is the Service Note Daily RES CalAIM 24-04. Click on the 'Start Indiv Service' button to open the form.

**Enter New Service:**

Type of Service: Individual (dropdown) | Primary Clinician: [ ] | Client: [ ] | Note Template: Service Note Daily RES CalAIM 24-04 (dropdown) | Start Indiv Service (button)

Edit Primary Clinician List (link)

Select all required fields from the drop down: Provider, Attending Physician, Procedure, Location, mode of delivery, principal diagnosis. Make sure the Service Date is accurate.

Service #: New | Title: Service Note Daily RES CalAIM 24-04 | Potential Harm: (Select One) (dropdown) | Service date: 09/16/2024 (calendar icon)

Client: Unknown (dropdown) | [ ] (Last Name) | [ ] (First Name) | [ ] (More)

Procedures: Select Procedure (dropdown)

Service Location: Select Location (dropdown)

Mode of Delivery: (Select One) (dropdown)

Med. Compliant: Uncertain (dropdown) | Side Effects: Uncertain (dropdown)

Pregnant/Post-Partum?

Principal Diagnosis: (Select ICD-... (dropdown)) | (Select ICD-10 description (dropdown))

**Billing time**

Primary Clinician: 64207 - Madrid, Matt (dropdown)

Provider: MAGNOLIA WMNS REC RES ADLT OAK (dropdown)

Attending Physician: Select a Clinician (dropdown)

Add Additional Clinicians (button)

Under Instructions & Pre-Existing Diagnoses is the field Secondary Procedure (Child's Bed Day). Set the dropdown to 303 Child's Bed Day, then enter the Number of Children after that field appears.

**Instructions & Pre-Existing Diagnoses**

Progress notes must be completed within 3 business days of providing a service, with the exception

Primary FF/Contact Time: [ ] Hours:Minutes | Services were provided in: English (dropdown)

by  interpreter [ ] or  clinician [ ]

Secondary Procedure (Child's Bed Day): 303 Child's Bed Day (dropdown) | Number Of Children: 1 (input)

Summary of Daily Services: None (dropdown) | 303 Child's Bed Day (dropdown)

## Pending versus Draft, Archive, and Finalize

**Drafts:** **Save as Draft** when you have incomplete information. Perhaps you need to leave the note before finishing it. Perhaps you are writing a note for a client before they are registered or may never be registered (Pre-episode Note). Drafts can be found on your Home Page Pending list or the View Staff Page Draft list.

**Pending:** **Save as Pending** when the note has been completed, including client ID #. This note is ready to be finalized. Be sure to check the “Note is Complete” box before saving.

**Archive:** **Save to the Archive** when you want to store a Draft you *probably* will not need to retrieve. This will unclutter your Home Page Pending list. Only Drafts may be stored to the Archive. Think of the Archive as an attic, a place to store things you *probably* will not need, however, you are not 100% sure. Drafts may be retrieved from the Archive via a services search or from the Drafts list on your View Staff page.

**Finalize:** When you are sure all of the information on a Note is correct and complete, including the client account # and your time, you may finalize. This will seal it with your electronic signature and add it to your services that are transferred nightly to SmartCare for claiming.

**Save and Continue:** Quick save while continuing to work on Note that may take a few hours to complete. You may want to save frequently if you have lost notes in the past. This saves a draft note, unless already in pending status, with all the current information on note and stays on the edit page so you may continue working. **\*\*Please be aware if you leave date blank and use save and continue it will enter today's date\*\***

# Archiving Draft Notes

Draft notes that will not be needed immediately can be sent to the Archive to remove them from your pending list. They can be recalled using a Services Search by client name.

## Archiving the Note:

1. Write up your Draft Note as completely as possible.
2. Click the "Save as Draft" button.
3. Find the Draft Note in your Pending List on your Home Page or in the Draft List on your View Staff Page
4. Click "Update" or the specific Service # that you want to archive.
5. Click the "Archive" button in the lower right hand corner.
6. The service is no longer listed in your pending services list.

## Recalling the Archived Note:

1. You can find the note in three ways:
  - a. Do a Services Search from your Home Page (found in the middle of the page) using the client name (last name first name with no comma).
  - b. Do a services search using the Search Box in the upper right hand corner by choosing "Services", entering the client name (last name first name no comma) and clicking "Search"
  - c. Look for the service in the Draft List on your View Staff page.
2. A search results list will appear. Find the service in the list.
3. Click on "View" or the service # of the desired Draft note.
4. Click the "Edit" button in the bottom right hand corner.
5. Make changes as needed. (Use the  button to search for a new client if they now have a client account #. Use the [X] button to delete a client first if you need to replace one client account # with another).
6. Click the "Save as Draft" button to save changes and return it to your Pending List.

# Co-staffed Individual Notes

1. Start all notes from your home page.
2. Click on the drop arrow to select “Individual” for the type of service.

1. Verify the Primary Clinician name is correct.
2. Enter the client name (Last name then First name with no commas, ex. Mouse Mickey) or the client number.
3. Select the template name from the drop list.
4. Click on “Start Indiv Service.”

Client #	Client Name	Status	Gender	Age	Services	Select Provider	Note Template	Select
75087772	TEST, CINDYTWO	Active	Female	58	3	9999CG - CLINICIAN GATEWAY TEST MHS AD	Clinician's Progress Note	Select
75135386	TESTCASE, DAVE	Active	Male	68	1	9999CG - CLINICIAN GATEWAY TEST MHS AD	Clinician's Progress Note	Select

1. Verify the client name.
2. Verify the status for that client. “Active” indicates that the client has an open episode.
3. Verify the appropriate provider name is indicated.
4. Select the Title of the type of note you will enter.
5. Click on “Select”

- Complete the billing information above the Staff Time Section.

Service #: New Title: Clinician's Progress Note CalAIM 23-07 Potential Harm: (Select One)

Service date: 09/16/2024

Client: 75130257 Testy Last Name First Name Cindy (Smartcare #: 75130257)

Client opened: 8/21/2023

Last assessment: 6/4/2024

Procedures: 197 - CG Informational Note

Service Location: (Select Location)

Mode of Delivery: (Select One)

Med. Compliant: N/A Side Effects: N/A

Pregnant/Post-Partum?

Principal Diagnosis: (Select ICD-... (Select ICD-10 description)

**Billing time**

Primary Clinician: (Select)

Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)

Service Start: 12:00 AM

Duration: 00:00

Travel Time: 00:00

Documentation Time: 00:00

Clinician Time: 00:00

**1** Add Additional Clinicians

- Click on "Add Additional Clinician's."
- Choose the Co-staff from the drop down menu.
- Enter time for both clinicians

**Billing time**

Primary Clinician: (Select)

Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)

Service Start: 12:00 AM

Duration: 00:00

Travel Time: 00:00

Documentation Time: 00:00

Clinician Time: 00:00

Co-Clinician: (Select) **2**

Provider: ADULT FORENSIC BEHAVIORAL HLTH (81142)

Service Start: 12:00 AM

Duration: 00:00 **3**

Travel Time: 00:00

Documentation Time: 00:00

Clinician Time: 00:00

Total Staff Time: 00:00

Add Additional Clinicians

- Complete all of the progress note entries. Check “Note is Complete.”  
**\*Note is complete is only visible if you have ‘Daily Approval’**
- Click on “Save as pending.”



- The note will be listed on the primary and co-staff’s pending lists with a yellow dot and the word “wait” which displays the message “Waiting for clinicians to approve this service” when pointed at with the cursor. This is an advisory message only.
- Best Practice is that co-staff review and approve their addendum to the notes before the Primary Clinician finalizes this service.

Primary Staff:

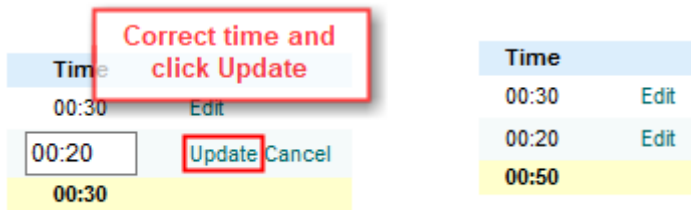
Pending Services										4 Results
Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer	
1410813		75087772	TEST, CINDYTWO	9999CG - CLINIC...	3/7/2018	Clinician P...	197 CG INFO...	Wait		
1410800		75087772	TEST, CINDYTWO	9999CG - CLINIC...	2/22/2018	Interim Ass...	323 90791 Ps...			
1410792		75087772	TEST, CINDYTWO	9999CG - CLINIC...	2/8/2018	FSP PAF - ...	197 CG INFO...	Draft		
1410814			Unregistered, Client	9999CG - CLINIC...	3/7/2018	Clinician P...	197 CG INFO...	Draft		

Co-Staff:

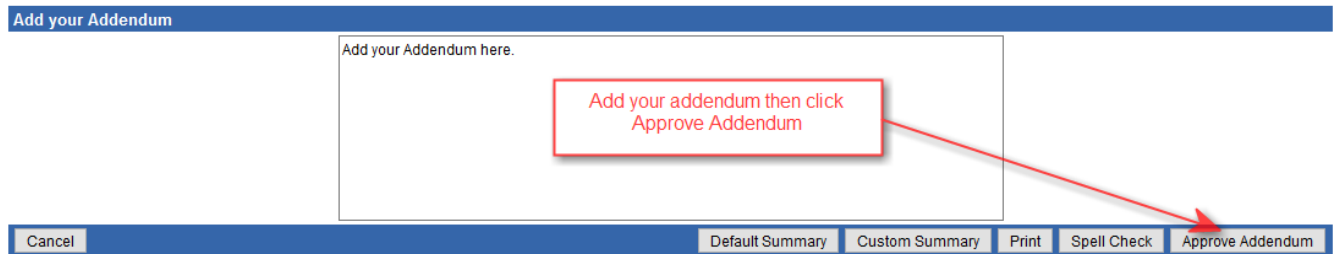
Pending Services										1 Result
Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer	
1410813		75087772	TEST, CINDYTWO	9999CG - CLINICI...	3/7/2018	Clinician Pr...	197 CG INFOR...	Wait		

- The co-staff have the opportunity to edit their time and add an optional addendum to the note before the Primary finalizes.
- To edit, click the service #
- Co-staff may edit their time before the Primary finalizes.

Role	Staff #	Staff Name	Time		Approved
Primary Clinician			00:30	Edit	<input checked="" type="checkbox"/>
Co-Clinician			00:10	Edit	<input type="checkbox"/>
<b>Total Staff Time</b>			<b>00:40</b>		



- Add the addendum at the bottom of the note and click “Approve Addendum”
- Best Practice is that co-staff review and approve their addendum to the notes before the Primary Clinician finalizes this service.



- When the co-staff approve their addendum
  1. A checkmark is placed in the “Approved” checkbox at the top of the note  
**\*Note: Co-staff approval is optional.**

Role	Staff #	Staff Name	Time	Approved
Primary Clinician			00:30 Edit	<input checked="" type="checkbox"/>
Co-Clinician			00:20 Edit	<input checked="" type="checkbox"/>
Total Staff Time			00:50	

2. The note will disappear from the Co-Staff’s Home Page Pending service list. It is no longer available for editing.



3. The dot on the Primary’s Home Page Pending list then turns green.

Pending Services										4 Results
Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer	
1410813		75087772	TEST, CINDYTWO	9999CG - CLINIC...	3/7/2018	Clinician P...	197 CG INFO...	Approved		
1410800		75087772	TEST, CINDYTWO	9999CG - CLINIC...	3/7/2018	Interim Ass...	323 90791 Ps...	Approved		
1410792		75087772	TEST, CINDYTWO	9999CG - CLINIC...	2/8/2018	FSP PAF - ...	197 CG INFO...	Draft		
1410814			Unregistered, Client	9999CG - CLINIC...	3/7/2018	Clinician P...	197 CG INFO...	Draft		



4. The Primary Clinician then finalizes the note and the services drop into SmartCare for both primary and co-staff.

## Duplicate Notes

When you create duplicate notes for same patient with same clinician, same date and same duration, you may get a popup like the one below where you need to state the reason for the duplicate.

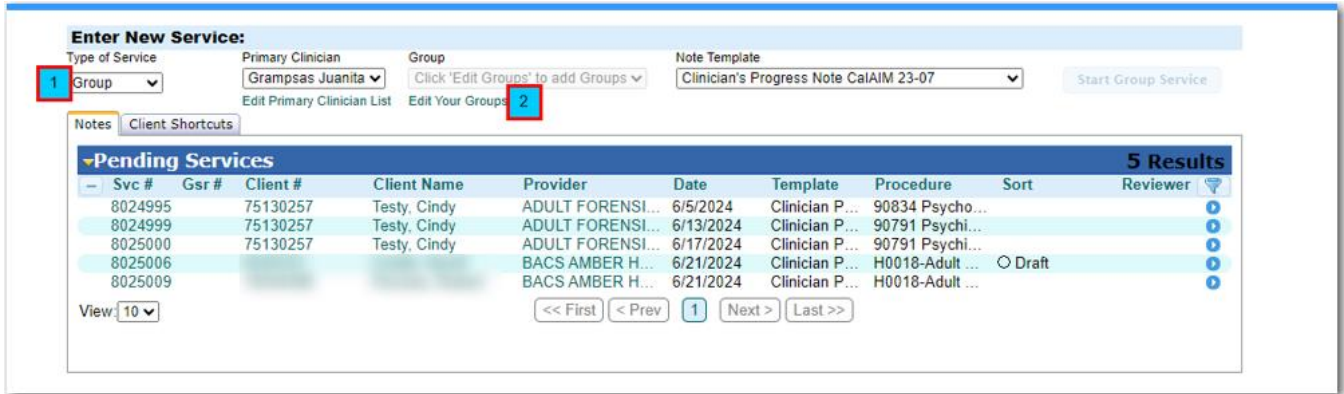
A warning dialog box titled "Warning" with a close button (X) in the top right corner. The main text reads: "Warning!!! There already exists a service record for this client with this service date, reporting unit (CDS provider code), procedure (HCPCS code), and time! If you wish to save this service please provide a reason for the duplication:". Below this text is a table with three columns: "Reason", "Current Service", and "Duplicate Service". The "Reason" column contains a dropdown menu with the selected option "76 - Repeat procedure by same person". The "Current Service" column contains details for Service Id 8025004, Staff 18821 - Chen, Lester, and Procedure ADULT FORENSIC BEHAVIORAL HLTH (... 90839 (w/90840 Add-on) PsychThpy for Crisis). The "Duplicate Service" column contains details for Service Id 8025003, Staff 18821 - Chen Lester, and Procedure ADULT FORENSIC BEHAVIORAL HLTH (... 90839 (w/90840 Add-on) PsychThpy for Crisis). A "Time" column shows "00:40". At the bottom right of the dialog, there is a question "Are you sure you want to continue?" and two buttons: "Ok" and "Cancel".

Reason	Current Service	Duplicate Service	Time
76 - Repeat procedure by same person	8025004 18821 - Chen, Lester ADULT FORENSIC BEHAVIORAL HLTH (... 90839 (w/90840 Add-on) PsychThpy for Crisis	8025003 18821 - Chen Lester ADULT FORENSIC BEHAVIORAL HLTH (... 90839 (w/90840 Add-on) PsychThpy for Crisis	00:40

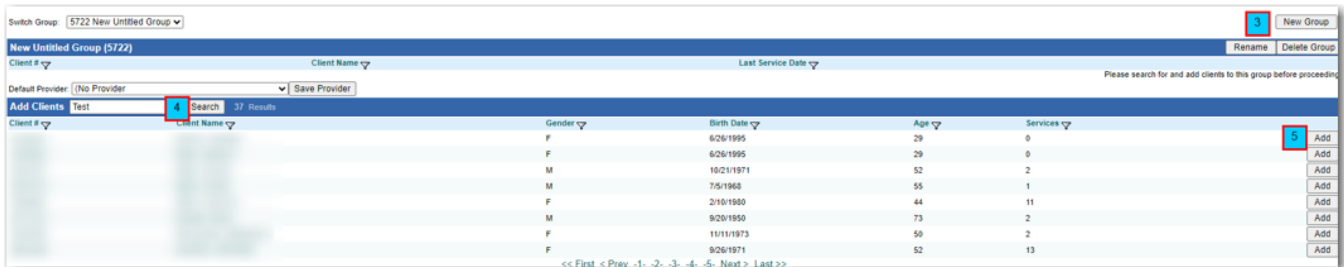
# Group Notes

# Creating Groups

1. Select “group” under “type of service.”
2. If this is a new group then click on “Edit your groups”



3. To create a new group click on the button ‘New Group’
4. Type in the client’s name in the “Add Clients” field (Last name then first name, with a space between) then click on the “Search” button and wait for the list to populate.
5. When the client information appears, click on the “Add” button.  
(The client will move above to the group section)



# Writing Group Note

1. Select group under “Type of service.”
2. Select the group.
3. Select note template.
4. Click on “Start group service.”

**Enter New Service:**

1. Type of Service: Group

Primary Clinician: Grampsas Juanita

2. Group: 5721 New Untitled Group

Note Template: 3. Clinician's Progress Note CalAIM 23-07

4. Start Group Service

Group: Friday Improv (5411) Title: Clinician's Progress Note CalAIM 23-07

Present or Represented	Client #	Name	Procedure	Provider
<input type="checkbox"/>	75241442	TEST, ALANTINE	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	CLINICIAN GATEWAY TEST MHS AD
<input checked="" type="checkbox"/>	75241441	TEST, CHRIS	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	CLINICIAN GATEWAY TEST MHS AD
<input checked="" type="checkbox"/>	75226968	TEST, CINDY	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	CLINICIAN GATEWAY TEST MHS AD
<input type="checkbox"/>	75087772	TEST, CINDYTWO	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	BACS WOODROE PLACE CRT (81443)
<input type="checkbox"/>	75138646	TESTING, TEN	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	CHILDRENS SPECIALIZED SVS MHS (81092)

Additional participants in group: 0

Service Location: [Select Location] Mode of Delivery: [Select One] Service Date: 12/20/2023

Billing time: Primary Clinician: 27773 - Madrid, Matt

Service Start: hh:mm Duration: 00:00 Travel Time: 00:00 Documentation Time: 00:00 Clinician Time: 00:00

- Click on the square box under the “Present” column for each client in attendance. A check mark should appear.
- Complete the fields for the procedure, service location, co-staff, service date, service start, duration, travel time, documentation, and co-staff time (if co-staff were entered).
- **Be sure to select the correct provider for the client from the Drop list!**
- Enter the number of additional participants (clients without open episodes)

Presenting Problem(s) Previous Entries: (Select Note)

Evaluation Previous Entries: (Select Note)

You can use the drop arrow to select from the list of available entries

- Complete each text box as appropriate.
- View previous notes if desired.

Cancel Spell Check **Save as Draft**

- When all of the fields have been completed click on the “Save as Draft” button.

**▼ Pending Services** 3 Results

Svc #	Gr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
3259487		75087772	TEST, CINDYTWO	9999CG - CLINICIAN GA...	3/7/2018	Clinician Pro...	377 90839 Crisis Thpy...	Wait	
3259524	27926	75226968	TEST, CINDY	9999CG - CLINICIAN GA...	3/7/2018	Clinician Pro...	391 Group Rehabilitation		
3259525	27926	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GA...	3/7/2018	Clinician Pro...	391 Group Rehabilitation		

View: 10 << First < Prev 1 Next > Last >>

- You will see your group service listed in your ‘Pending Services’ split into individual notes for each client present.
- Click on the Service Number (1) or the blue action button (2) to view/edit the individual notes for each of the clients in the group.

**Presenting Problem(s)**  
N/A

**Evaluation**  
N/A

**Intervention**  
N/A

**Response**  
N/A

**Plan**  
N/A

Click here to edit Service

Cancel Default Summary Custom Summary Print Delete Service **Edit Service**

On the next screen, click on “Edit Service” to add information for the client you have selected.

Group: testing SMC 7/17 (5646) Title: Clinician's Progress Note CalAIM 23-07 Client: [REDACTED] Individual: 8190833

**Group Members** 4 Members Show client RUs for: 27773 - Madrid, Matt, Admin/Clerical

Present or Represented	Client #	Name	Gender	Age	Procedure	Compliant	Side Effects	Med	Provider
<input type="checkbox"/>	[REDACTED]	[REDACTED]	Male	39	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	N/A	N/A	Med	ADULT FORENSIC BEHAVIORAL HLTH (81142)
<input checked="" type="checkbox"/>	[REDACTED]	[REDACTED]	Male	79	Procedure: H2017 Group Psychosocial Rehab. per 15 Min. or 1 Compliant: N/A Side Effects: N/A	N/A	N/A	Med	ADULT FORENSIC BEHAVIORAL HLTH (81142)
<input type="checkbox"/>	[REDACTED]	[REDACTED]	Male	53	Procedure: Select Procedure Compliant: N/A Side Effects: N/A	N/A	N/A	Med	ADULT FORENSIC BEHAVIORAL HLTH (81142)
<input checked="" type="checkbox"/>	[REDACTED]	[REDACTED]	Male	28	Procedure: H2017 Group Psychosocial Rehab. per 15 Min. or 1 Compliant: N/A Side Effects: N/A	N/A	N/A	Med	ADULT FORENSIC BEHAVIORAL HLTH (81142)

Additional participants in group: 0

Service Location: Office (Primary) Emergency?  Mode of Delivery: Face-to-face

Service Date: 12/20/2023  
Util. review date: 9/21/2022

**Billing time**

Primary Clinician: 27773 - Madrid, Matt

Service Start: 12:59 PM  
Duration: 00:15  
Travel Time: 00:00  
Documentation Time: 00:00  
Clinician Time: 00:15

Add-on Codes: None Add-On Time: [ ] Enter the total duration for the add-on code. Units will be calculated.

Interactive Complexity: None

Contact/E-M Time, Service Language, Pre-Existing Diagnoses

Primary FF/Contact/E-M Time: [ ] Hours:Minutes

Services were provided in: English

by  interpreter [ ] or  clinician

ICD-10: Primary F41.9 Secondary F43.10 Tertiary F11.20 SU  
GMC:  
DSM 5:

Primary ICD-10 and DSM 5 do not match - you must update SmartCare or CG

**Narrative**

Describe the service, including how the service addressed the beneficiary's behavioral health need (e.g., symptom, condition, diagnosis, and/or risk factors).

Client Specific Narrative

Co-Staff (Group Services ONLY)

Instructions: Information about co-staffing is only required when one staff is documenting a group service facilitated by multiple providers for both providers on one progress note. In that situation, the progress note must clearly document the specific involvement and the specific amount of time of involvement of each provider of the group activity, including documentation time.

Reminder: All group services require a list of participants to be maintained outside of the beneficiary's health record due to privacy concerns.

N/A

Now you can enter client specific notes for the group service. You will see that the (1) Med compliant and (2) Side effects drop lists can be utilized, (3) Add On codes and time can be added if necessary, (4) Face-to-Face time will need to be entered, and the (5) note fields can be used to enter additional information specific to that client.

**Assign to be reviewed by**

Reviewer: [Select Reviewer]

Notes: [ ]

Cancel Spell Check Submit for review Save as Pending

Click on "Save as Pending" when your entries are completed. If you need your notes reviewed, you will instead select a reviewer and click "Submit for Review".

Each individual service note will be listed separately on your Daily Staff Log.

Each service will be given part of the time, according to how many participants attended. If you gave services to clients who did not have an open episode, their time will not be added to your staff log. Write up their time as an indirect service.

Daily Approval										Service Date:	03/07/2018	Search
Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time	
3259525	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30	
3259524	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30	
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	PENDING	Pending	01:30	1	01:30	

3 service records on 3/7/2018 for a total time of 02:30.



## Additional Participants Feature

Occasionally, there will be a client in a group who does not have an open episode and cannot be claimed. Using the Additional Participants feature, the additional clients are added into the group total, increasing the accuracy of the claim for Medical billing. Only the part of the time dedicated to clients with open episodes is claimed. The remainder of the time can be reported using an Indirect service note for the clients without an open episode.

- Start the group note as usual. Click on the square box under the “Present” column for each open client in attendance. Verify the Reporting Units.
- **Enter the number of additional participants (clients without open episodes) into the “Additional Participants in group” field. CG will calculate the group total by adding the additional participants to the clients checked present.**

Group Members
5 Members
Show client RUs for: ▼

Client #	Name	Gender	Age	Present	Med Compliant	Side Effects	Provider
75241442	TEST ALANTINE	F	5	<input type="checkbox"/>	N/A ▼	N/A ▼	99999 HOSPITAL 24HR SERVICES ▼
75134621	TEST BABY	F	68	<input type="checkbox"/>	N/A ▼	N/A ▼	99991 West County Mental Health Svs ▼
75135515	TEST BOB	M	27	<input type="checkbox"/>	N/A ▼	N/A ▼	99999 HOSPITAL 24HR SERVICES ▼
75226968	TEST CINDY	F	117	<input checked="" type="checkbox"/>	N/A ▼	N/A ▼	9999CG CLINICIAN GATEWAY TEST MHS AD ▼
75087772	TEST CINDYTWO	F	58	<input checked="" type="checkbox"/>	N/A ▼	N/A ▼	9999CG CLINICIAN GATEWAY TEST MHS AD ▼

Additional participants in group:

1

Enter the number of additional participants without an open episode

- Complete the group note and the individualizations as usual.
- Each individual service will be listed separately in Daily Approval.
- Each service will be given part of the total time, divided by how many total participants attended. (open clients plus additional participants)

▼Daily Approval
Service Date: 03/07/2018
Search

Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time
3259546	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	3	00:20
3259545	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	3	00:20
3259525	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30
3259524	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	PENDING	Pending	01:30	1	01:30

- If you gave services to clients who did not have an open episode, their time will not be added to your staff log. Notice two services were given 20 minutes for the 01:00 spent. Time given to each note equals the total time divided by the number in group.  $01:00/3 = 00:20$ .
- **Note: To add the time to your Staff Log for the additional participants, write an indirect note for group time not given to opened clients listed on the Log. (see next page)**

- To add the time to your Staff Log for the additional participants:
  - Write an indirect note.
  - Use an appropriate procedure code.
  - Use the amount of group time not given to opened clients already listed on your Daily Approval list and Staff Log

Daily Approval										Service Date: 03/07/2018	Search
Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time
3259557	3/7/2018	Indirect			9999CG CLINICIAN GATEWAY TEST MHS AD	401 Mental Health Promotion	PENDING	Pending	00:20	1	00:20
3259546	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	3	00:20
3259545	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	3	00:20
3259525	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30
3259524	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	PENDING	Pending	01:30	1	01:30

6 service records on 3/7/2018 for a total time of 03:30. Approve Time

The opened client's time plus the indirect time should equal your total group time. (In this example, 2 open clients at 20 minutes each, plus the indirect time for the unopened client at 20 minutes = 60 minutes total group)



# Indirect Notes



## Indirect Notes

- From the “Enter new service” (1) section, click the “Type of service” (2) drop arrow and select “Indirect”; click the “Reporting unit” (3) drop arrow and select the appropriate RU.
- Click on “Start indirect service.”(4)

**Enter New Service:**

Type of Service 2

Indirect 1

Primary Clinician

TESTCARE TESTCARE 3

[Edit Primary Clinician List](#)

Reporting Unit

9999CG CLINICIAN GATEWAY TEST MHS AD 4

Note Template

Indirect Note 5

[Start Indirect Service](#)

- (1) If no client is involved with the Indirect Service, leave the client field blank (it will default to “AAA-INDIRECT SERVICE CLIENT (80002450)” when transferring to SmartCare). If an **unregistered** client is involved, type their name in the Last Name and First Name fields (again, the service will transfer to SmartCare with the “AAA” client). If a **registered** client is involved, click on the “...” button and follow the prompts to look up and add the client to the note (the registered client will be attached to the service instead of the “AAA” client).
- Select diagnosis (2), service location (3), Procedure(4), Service date (5), and primary Clinician time. (6) Enter notes as needed
- Click on “Save as pending.”

Client: 1

Number: Unknown    Last Name:    First Name:    ...

Procedures: OS (673) Screening Engagement - Adolescent 4

Service Date: 08/15/2024 5

Service Location: Field 3

Mode of Delivery: Other

Principal Diagnosis: Z03.89 2

Encounter for observation for other suspected diseases and conditions rul...

Reporting Unit: LA FAMILIA JPEC-YFC OS SCH (A010KJ)

Primary Clinician: TESTCARE TESTCARE

Recipient Code:

Primary Clinician Time: 00:00 6

- After you click “Save as pending” you will be returned to your “Home” screen, where you will see the pending services listed.

**Pending Services** 1 Result

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
1410790				9999CG - CLINIC...	3/7/2018	Indirect	680 General A...		

View: 10 
[<< First](#)
[< Prev](#)
1
[Next >](#)
[Last >>](#)



# Documents





# What is a Document?

A Document is a note for a client that will not be tracking time or entered under a procedure code. Depending on the agency, Environment (MHS or SUD), and Staff configuration you will only see a select set of templates under Documents.

## Starting a document

- From the 'Enter new service' section (1); click the 'Type of service' (2) drop arrow and select 'Document'; enter the clients name or number (3); Select the correct 'Note Template'.
- Click on 'Start Document.'(5)

The screenshot shows the 'Enter New Service' form. Callout 1 points to the 'Enter New Service:' section header. Callout 2 points to the 'Type of Service' dropdown menu. Callout 3 points to the 'Client' text input field. Callout 4 points to the 'Note Template' dropdown menu. Callout 5 points to the 'Start Document' button.

- If there are multiple results find the correct client and click select

Clients Matching, "test c"


Search For Different Client  
test c

Client #	Client Name	Status	Gender	Age	Services	Note Template	
75071453	TEST CASE, JOE	None	Male	30	0	Document	Select
75087772	TEST, CINDYTWO T	Active	Female	58	3	Document	Select
75087772	TEST, CINDYTWO T	Active	Female	58	3	Document	Select
75053807	TESTCASE, CINDY V	Closed	Female	57	0	Document	Select
75144431	TESTCASE, CINDYLOUIE W	Active	Female	69	0	Document	Select



# Completing the Document

- The Document Must have a Client
- Fill in the Document Date
- Complete all Notes Fields that may be required based on the document Template
- Follow the same procedures to finalize a document as you would a Note.

Service #: New Title: Document 

Client: Number: 75087772 Last Name: TEST First Name: CINDYTWO   Document date: 03/07/2018

Comment Previous Entries: (Select Note) ▼

Note is complete.

Cancel

---



# **SUD Specifics Notes, Forms, and Authentication**



# Forms

Some Service Note Types will be referred to as Forms. These Notes will all have Zero time and time spent will be entered on your Progress/Service Daily Note.

Forms will still be entered under Documents with the following Templates:

- Timeliness Tracking
- ALOC Initial/Review
- Assessment Full ASAM
- Diagnosis Form
- Discharge Plan
- Discharge Summary

**Enter New Service:**

Type of Service: Document | Primary Clinician: Madrid Matt | Client: Enter Client Name or ID or leave blank | Note Template: Assessment Full ASAM | Start Document

When entering one of these forms there will be no fields to select a procedure code or enter time. These will be entered on the Progress/Service Daily Note.

Service #: New Title: Assessment Full ASAM Potential Harm: (Select One)

Client: Number: Unknown | Last Name: | First Name: | Date: 09/17/2024

**Billing time**

Primary Clinician: 64207 - Madrid, Matt | Provider: NEW BRIDGE FOUND ADULT RES | Add Additional Clinicians

No fields to select a procedure code or enter time

When a form is completed, it may be require to be submitted for Authentication in order to be finalized. (e.g. Assessment Full ASAM or Diagnosis Form).



# Authentication

At the bottom of specific Forms you will notice you are unable to finalize. You will need to use the 'Submit for Authentication' button.

Assign to be authenticated by

Authenticator:  
Select Authenticator ▼

Notice the 'Authenticator' dropdown, 'Submit for Authentication' button, and the missing 'Finalize' Button

Cancel Spell Check Submit for Authentication Save and Continue Save as Pending Save as Draft

The Steps for Authentication are similar to notes that require review:

1. Complete the form
2. Select Authenticator from the drop down and click 'Submit for Authentication'
  - Note the dropdown will have specific staff based on the Note Template, RU, and Staff Mask in SmartCare
  - If you are included in the dropdown you may submit to yourself

Assign to be authenticated by

Authenticator:  
Select Authenticator ▼  
Select Authenticator

Cancel Spell Check Submit for Authentication Save and Continue Save as Pending Save as Draft

3. There will be a 'Pending Authentication' service on your home page and the home page of the Authenticator.

Notes Client Shortcuts Lab Results (0)

Pending Services 1 Result

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
2123		10087955	TEST, GANDALF	999CGR - CLINI...	7/23/2018	Initial Medi...	881 SUD TRA...	Needs Auth...	

View: 50 << First < Prev 1 Next > Last >>

4. The Authenticator will then open the service and select 'Edit Service'.
5. After reviewing and making any necessary edits the Authenticator can then click 'Authenticate'.  
**\*Authenticate will Finalize the Note.**

Spell Check Authenticate



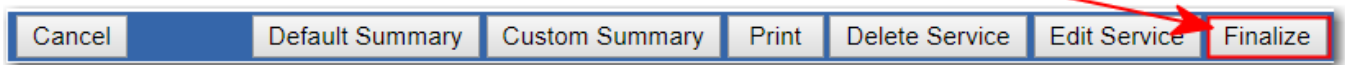
# Finalizing Notes



## Without Review Required

When you are not required to submit your notes for review, you will Finalize your Note one of two ways:

1. At the bottom of each service, select the 'Finalize' button.



2. Or if your profile is setup with Daily Approval Follow the steps in the section [Individual Staff Log \(Daily Approval\)](#)

Note in SUD 'Authenticate' will also Finalize a Note

## With Review Required

### CG account Setup for Review Required

For Staff who need their notes approved by Supervisor:

Add 'Review Required' to their CG account

For Supervisor who will review the notes for Staff:

Add 'Can Review' to their CG account

RU# required to be added to Staff and Supervisor CG accounts

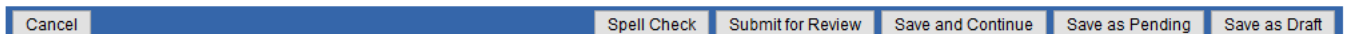
### Procedure: Staff creates Progress note and Supervisor "Accepts" the notes

1. At bottom of the Progress note (after completing the note boxes), complete the "Assign to be reviewed by" section:

Assign to be reviewed by

Reviewer:  Notes:

Note is complete.



2. Select Reviewer from the drop down box:

Assign to be reviewed by

Reviewer:  Notes:

Note is complete.

Spell Check Submit for Review Save and Continue Save as Pending Save as Draft

- Complete Notes and click “submit for review.” Note is sent to Supervisor for review and approval:

Assign to be reviewed by

Reviewer:

Notes:  
Please Review and Approve this Note!?

Note is complete.

Cancel    Spell Check    **Submit for Review**    Save and Continue    Save as Pending    Save as Draft

- The Progress Note appears in “pending services” of the Supervisor’s home page and waiting for approval:

Notes    Client Shortcuts    Lab Results (0)

**Pending Services** **1 Result**

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
1410819		75087772	TEST, CINDYTWO	9999CG - CLINIC...	3/7/2018	Clinician P...	381 Individual ...	Review	

View: 10    << First    < Prev    1    Next >    Last >>    Waiting for reviewer to accept or reject this service.

- The Supervisor will need to review the note. First click the service # or the Blue Button

Notes    Client Shortcuts    Lab Results (0)

**Pending Services** **1 Result**

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
1410819		75087772	TEST, CINDYTWO	9999CG - CLINIC...	3/7/2018	Clinician P...	381 Individual ...	Review	

View: 10    << First    < Prev    1    Next >    Last >>

**Click Service Number or blue 'Action Button' to view Note**

- At the bottom of the note complete ‘Review Notes’ section with comments, then click ‘Accept’. Depending on how CG is setup the note will then be Finalized (in which case, you are all done!), or the note will be removed from the Supervisor’s ‘Pending Services’ section of their home page and updates the note on the Staff’s ‘Pending Services’ (proceed to step 7).

**Review Notes**

Date	Staff	Action	Notes
3/28/2018		Submit	Please Review and Approve this Note!?

This service has currently been submitted to be reviewed by:     Update

Notes:  
Accepted!

Cancel    Default Summary    Custom Summary    Print    Spell Check    **Accept**    Reject

7. Note is now ready to be “Finalized” via [Individual Staff Log \(Daily Approval\)](#) or opening the note and selecting ‘Finalize’: **\*Unless you intend to make changes, do not click ‘Edit Service’ if you have review required and it’s been approved. If you do you will be required to resubmit for approval.**

Notes Client Shortcuts Lab Results (0)

▼ Pending Services 1 Result

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
1410819		75087772	TEST, CINDYTWO	9999CG - CLINICI...	3/7/2018	Clinician Pr...	381 Individual ...	● Accepted	

View: 10 << First < Prev 1 Next > Last >>

Cancel Default Summary Custom Summary Print Delete Service Edit Service **Finalize**

**Procedure: Staff creates Progress note and Supervisor “Rejects” the notes before “Accepting” the note**

- Follow steps 1 through 5 above
- At the bottom of the note complete ‘Review Notes’ section with comments, then click ‘Reject’. The note will be removed from the Supervisor’s ‘Pending Services’ section of their home page and updates the note on the Staff’s ‘Pending Services’

Review Notes

Date	Staff	Action	Notes
3/28/2018		Submit	Please Review and Approve this Note!

This service has currently been submitted to be reviewed by: [dropdown] Update

Notes:

Rejected - Notes on what the Clinician may need to correct.

Cancel Default Summary Custom Summary Print Spell Check Accept **Reject**

**Supervisor ‘Rejected’ the note:**

Notes Client Shortcuts Lab Results (0)

▼ Pending Services 1 Result

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
1410819		75087772	TEST, CINDYTWO	9999CG - CLINICI...	3/7/2018	Clinician Pr...	381 Individual ...	● Rejected	Sales, ...

View: 10 << First < Prev 1 Next > Last >>

7. Staff will open note to view. Click 'Edit service', Make necessary changes, verify the correct Supervisor is listed in the 'Reviewer' box and complete the 'notes' section with comments back to the Supervisor. Click 'Submit for Review'. The note is sent to Supervisor for review and approval:

Assign to be reviewed by

Reviewer: 19072 - Sales, Cameren

Notes: Corrected Note!

Note is complete.

Cancel Spell Check **Submit for Review** Save and Continue Save as Pending Save as Draft

8. Supervisor will open the note. At the bottom of note complete 'Review Notes' section with comments, then click 'Accept'. Depending on how CG is setup the note will then be Finalized (in which case, you are all done!), or the note will be removed from the Supervisor's 'Pending Services' section of their home page and updates the note on the Staff's 'Pending Services' (proceed to step 9).

Review Notes

Date	Staff	Action	Notes
3/28/2018		Submit	Please Review and Approve this Note!
3/28/2018		Reject	Rejected - Notes on what the Clinician may need to correct.
3/28/2018		Submit	Corrected Note!

This service has currently been submitted to be reviewed by: [dropdown] Update

Notes: Accepted!

Cancel Default Summary Custom Summary Print Spell Check **Accept** Reject

Supervisor 'Approved' the note:

Notes Client Shortcuts Lab Results (0)

**Pending Services** 1 Result

Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer
1410819		75087772	TEST, CINDYTWO	9999CG - CLINICI...	3/7/2018	Clinician Pr...	381 Individual ...	Accepted	

View: 10 << First < Prev 1 Next > Last >>

9. Note is now ready to be 'Finalized' and the Staff can view the note to see Supervisor's comments:



**Review Notes**

Date	Staff	Action	Notes
3/28/2018		Submit	Please Review and Approve this Note!
3/28/2018		Reject	Rejected - Notes on what the Clinician may need to correct.
3/28/2018		Submit	Corrected Note!
3/28/2018		Accept	Accepted!

Cancel      Default Summary      Custom Summary      Print      Delete Service

# **Individual Staff Log (Daily Approval)**



## Approval printout and Finalizing Notes

1. From your home screen, click on your name to get the “View staff screen.
2. In the daily approval section of the screen,
3. Enter the service date for the Staff Log (MAA) you wish to create.
4. Click on “Search.”

**Clinicians Gateway** View Staff

Welcome: [Red Box 1] Home Menu Log out

**Staff Information for:**

SSN:		License #:		Start date:	
Gender:		License Renew:		End date:	
BirthDate:		License State:		Last Changed On:	
Ethnicity:		Taxonomy:		Record Created On:	
Medicaid PIN:		National Provider Id:			
Medicare PIN:					
DEA Number:					
UPIN:					
Staff Type:	Unlicensed Worker				
Languages:	English				

▶ **Statistics** Service Dates: 02/23/2018 thru 03/07/2018 All Search

▶ **Daily Approval** [Red Box 2] [Red Box 3] Service Date: 03/07/2018 [Red Box 4] Search

▶ **Procedures** 95 Results

# IMPORTANT!

It is very important that you review all of the information on the daily log before approving!

When you click on **“APPROVE TIME”**, you are finalizing all of the services listed.

Finalized services cannot be changed!

# IMPORTANT!

# IMPORTANT!

## Please be sure to

**REVIEW THE DAILY LOG BEFORE YOU CLICK ON “APPROVE TIME”**

Once you click on “Approve Time,” the Services are finalized.

Daily Approval											Service Date: 03/07/2018	Search
Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time	
3259557	3/7/2018	Indirect			9999CG CLINICIAN GATEWAY TEST MHS AD	401 Mental Health Promotion	PENDING	Pending	00:20	1	00:20	
3259546	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	3	00:20	
3259545	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	3	00:20	
3259525	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30	
3259524	3/7/2018	Group	75226968	TEST CINDY	9999CG CLINICIAN GATEWAY TEST MHS AD	391 Group Rehabilitation	PENDING	Pending	01:00	2	00:30	
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	PENDING	Pending	01:30	1	01:30	

6 service records on 3/7/2018 for a total time of 03:30.

- To edit any “Pending” note click on the “Srv. #”
- Add any additional service to the log, click on “Home,” and enter a new note.
- Continue to repeat these steps until you are satisfied with the log----then click on the “Approve Time” button.

# IMPORTANT!

# IMPORTANT!

**REVIEW THE DAILY LOG BEFORE YOU CLICK ON “APPROVE TIME”**

Srv. #	Date	Type	Client #	Client Name	Reporting	Status	Approve	Time #	In Group	Approve Time
3259557	3/7/2018	Indirect			9999CG C	PENDING	Pending	00:20	1	00:20
3259546	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG C	PENDING	Pending	01:00	3	00:20
3259545	3/7/2018	Group	75226968	TEST CINDY	9999CG C	PENDING	Pending	01:00	3	00:20
3259525	3/7/2018	Group	75087772	TEST CINDYTWO	9999CG C	PENDING	Pending	01:00	2	00:30
3259524	3/7/2018	Group	75226968	TEST CINDY	9999CG C	PENDING	Pending	01:00	2	00:30
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	PENDING	Pending	01:30	1	01:30

**Once you click on “Approve Time,” the service notes are finalized.**

**Service Notes are sealed with the clinician’s Electronic Signature**

Use the print icon on the Individual Staff Log

Print Daily Approval

ALAMEDA COUNTY Behavioral Health Care Services

### Individual Staff Log

Service Date: 3/7/2018

Svc #	Type	RU	Client #	Client Name	Procedure	Time		Loc	Rec.	Flags
						H:M	Grp Ct			
		9999CG								

1. Decide which pages to print using the blue arrows and page numbers.
2. Click on the printer icon – this will print the electronic Individual Staff Log form (MAA) as well as direct and indirect services. You may specify which pages to print, eliminating unneeded pages.

All printed electronic Individual Staff Log (MAA) forms **must be signed!**

## Co-staff Individual Logs

**PRIMARY CLINICIANS MUST FINALIZE THE NOTE FIRST. CO-STAFF WILL BE UNABLE TO GET TIME ON THEIR STAFF LOG UNTIL THE PRIMARY FINALIZES.** (Time will ONLY be transferred into SmartCare on the day the Primary finalizes.)

- The Co-staff and Primary will both see the service listed on their Daily Approval tally and added into their total time. In the example below, the co-staff is given credit for the one hour of co-staff time, even though the Primary has not finalized. (“Waiting on Finalization”)

Daily Approval										Service Date: 03/07/2018	Search
Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	PENDING	Waiting on Finalization	01:00	1	01:00
3259682	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	PENDING	Pending	01:00	1	01:00

2 service records on 3/7/2018 for a total time of 02:00. Approve Time

- If you attempt to Approve Time before the primary you will notice the service will not be displayed on your Staff Log’s print out

Individual Staff Log										
Service Date: 3/7/2018										
Svc #	Type	RU	Client #	Client Name	Procedure	Time H:M	Grp Ct	Loc	Rec.	Flags
3259682	Indiv.	9999CG CLINICIAN GATEWAY TEST MHS AD	75087772	TEST CINDYTWO	377 90839 Crisis Thpy 60 min	01:00	1	Office		
<b>1 service record on 3/7/2018 for a total time of</b>						<b>01:00</b>				
I hereby certify, under penalty of perjury, that the information contained in this document is accurate and free from fraudulent										



- Inform the Primary clinician they will need to finalize their service
- Once the service is Finalized (1) return to Daily Approval and View Report (2)

Daily Approval										Service Date: 03/07/2018	Search
Srv. #	Date	Type	Client #	Client Name	Reporting Unit	Procedure	Status	Approve	Time #	In Group	Approve Time
3259682	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	FINALIZED	Approved	01:00	1	01:00
3259487	3/7/2018	Indiv.	75087772	TEST CINDYTWO	9999CG CLINICIAN GATEWAY TEST MHS AD	377 90839 Crisis Thpy 60 min	FINALIZED	Approved	01:00	1	01:00

2 service records on 3/7/2018 for a total time of 02:00. [View Report](#)

Individual Staff Log										
Service Date: 3/7/2018										
Svc #	Type	RU	Client #	Client Name	Procedure	Time H:M	Grp Ct	Loc	Rec.	Flags
3259682	Indiv.	9999CG CLINICIAN GATEWAY TEST MHS AD	75087772	TEST CINDYTWO	377 90839 Crisis Thpy 60 min	01:00	1	Office		
3259487	Indiv.	9999CG CLINICIAN GATEWAY TEST MHS AD	75087772	TEST CINDYTWO	377 90839 Crisis Thpy 60 min	01:00	1	Office		
<b>2 service records on 3/7/2018 for a total time of</b>						<b>02:00</b>				

**\*\*Note:**

Both primary and co-staff times are transferred to SmartCare, the evening that the note is finalized by the primary clinician.

The time will appear on the SmartCare reports the day after the Primary clinician finalizes, not on the day that the Co-Staff clinician finalizes.

The service is listed in the Primary Clinician's Finalized Services, not the Co-Staff's Finalized Services.

# Printing





**Print**  
Total: 1 sheet of paper

**Printer** 1  
ISSC553 (HP Color LaserJet M... ▾

**Copies**  
1

**Layout**  
 Portrait  
 Landscape

**Pages**  
 All 2  
 e.g. 1-5, 8, 11-13

**Color**  
Color ▾

**Print on both sides**  
Print on one side ▾

More settings ▾ 3  
Print using system dialog... (Ctrl+Shift+P)

4

---

**ALAMEDA COUNTY** Behavioral Health Care Services  
Home | Help | Log Out

**Individual Staff Log** Service Date: 6/26/2024

Svc #	Type	RJ	Client #	Client Name	Procedure	Time HM	Grp Ct	Loc	Rec.	Flags
8471499	Indiv.	81142 ADULT FORENSIC BEHAVIORAL HLTH (81142)	75130257	Teszy Cindy	90832 Psychotherapy, 30 min. w/Patient	00:30	1	Office (Primary)		

1 service record on 6/26/2024 for a total time of 00:30

I hereby certify, under penalty of perjury, that the information contained in this document is accurate and free from fraudulent claiming.

**Madrid, Matt, Admin/Clerical** 6/26/2024 Licensed Clinical Social Worker

9/17/2024 9:02:40 AM  
ELECTRONIC PROTECTED HEALTH INFORMATION

1. Select your Printer
2. Chose which pages to print (I selected current page to print only page 1)
3. Click on More Settings to change settings like scale, paper size, quality, etc.
4. Click 'Print'

# Deleting a Note

## Are there any requirements for having a note deleted?

- Yes. If an error is made to any billing information, the note has to be deleted from SmartCare and redone by the clinician/physician in Clinician's Gateway. We cannot modify any notes that have been finalized. Notes are deleted **ONLY** if there is an error in any of the billing information such as:
  - Wrong client number
  - Wrong staff number
  - Wrong procedure code
  - Wrong reporting unit
  - Wrong service hours
  - Wrong service date
  - Wrong treatment location
  - Wrong number of clients in group
- Incorrect text is **NOT** an acceptable reason for deleting electronic notes.

## What do I do to get my note deleted?

- Submit a 'Service Delete Request' eform
  - Complete the form and click submit
  - You will receive a Pending request in your email
  - Contact the Help Desk via phone at **510-817-0076** to inform them that the request has been submitted so they may process as soon as possible

**Be sure to submit delete requests as soon as an error is discovered. If note deletes are submitted after the service has been claimed, the note cannot be deleted.**

**Note Delete Requests are found in BHCS E-Forms in the Clinicians Gateway section.**













Contact Information

**Do Not delete a Service if only the body of the note needs to be corrected, just do an addendum.**

### SmartCare-CG Service Delete Request

Please complete this form and allow 3 business days for processing. This Service Delete Request form is to be used for requesting SmartCare Service and Clinicians Gateway Service Notes to be Deleted by the ACBH IS Support Group.

**Use the TAB key to navigate through each field.** Click on the GREEN circles for help on each field. When you have completed the form, click on the "Submit Service Delete Request" button. The completed form will be emailed to Information System Desk ([HCSASupport@acgov.org](mailto:HCSASupport@acgov.org)) and you will receive a copy for your records. Note: To process another request, simply press the Refresh icon or the F5 key to reload the form.

● Today's Date :	09/17/2024	 
Time Submitted:	04:54 PM	
● Clinician's First Name :	<input type="text"/>	
● Clinician's Last Name :	<input type="text"/>	
● Clinician's Phone / Ext :	<input type="text"/>	
● Clinician's Email :	<input type="text"/>	
● Select Provider Name (dba) - acronyms not used:	<input type="text"/>	 
● Enter Name of Clinic / Program :	<input type="text"/>	
Select The Type of User :	<input type="text"/>	 

#### Clinician's Gateway Note Deletion Request

Please fill out a separate e-form for each service delete requested. There are two kinds of deletes:

- A. **Submitted / Transferred Service** - A Submitted Service delete is for a service that was TRANSFERRED or ENTERED into SmartCare.
- B. **Already Claimed Deletes** - Already Claimed Deletes are for services that have already been claimed.

Follow the claims correction process found on the Providers website (<http://www.acbhcs.org/providers/Forms/Forms.htm>). If a Clinicians Gateway note has not been finalized and is still pending, the Information Systems Desk cannot delete it, you must delete it yourself.

1. Indicate if this is either a Submitted Service or an Already Claimed service that you want deleted. If this is an Already Claimed note, use the Claims Correction Form (CCF) instead.
2. Indicate the Service Details / Clinician's Staff Number and the Reason for the deletion.
3. If you have printed any copies of the service note that have gone into the client's electronic chart, be sure to mark on the note that it has been deleted from the system, but do not remove from the paper chart.
4. If the service was entered via Clinicians Gateway, you can either scan a copy of the note and attach it to this form as an electronic document OR copy the web address of the note from Clinician's Gateway and paste it into the available web address field below.
5. Submit this form. You will receive a confirmation. ACBH Billing and Benefits Support will evaluate the request, erroring out the service and forwarding it to the ACBH IS Support Desk to delete the corresponding CG note if applicable. If the service has already been claimed, BBS will refer the request to the CCF process.

Indicate if this deletion is for the	<input type="checkbox"/> Submitted / Transferred Delete
● Submitted / Transferred or Already Claimed:	<input type="checkbox"/> Already Claimed Delete



**Group Delete Information**

---

• Service Type (MHS / SUD)

---

Is this a Group Delete Note:  


---

2-CG Service Number :  
(Please confirm the  
• service number, once submitted this number cannot be changed)  


---

Client ID Number :  


---

• Service Date :   


---

• Service Program :  


---

Clinician's Staff Number :  


---

If this note was re-entered and finalized, check the box.  Yes 


---

Reason for Note Deletion, (Please specify):  
(If corrected note  
• already re-entered, describe the difference between the deleted note and the corrected note)\*.  


---

**Supporting Documentation**

You can either scan a copy of the note and attach it to this form as an electronic document OR copy the web address of the note from Clinician's Gateway and paste it into the available web address field below.

---

• CG Note Link (URL):  


---

File Attachment :   (6 MB max) 


---



# Problem List

The Problem List is a dynamic log which is available to record problems for a client.

- The Problem list is accessible by all clinicians who have access to the client according to security protocols.
- Problems may be added and ended by multiple, different staff over time
- Staff who add or end problems are automatically pre-populated into the Problem List
- Active problems are listed at the top of the chart
- End-dated problems are moved to the bottom of the chart
- Current problems will populate onto the Progress Note edit screen for reminders
- Availability to add specific problem codes will be governed by the staff type

**Check the box to display Instructions**  
Unchecked is the default value

Show Instructions

**Instructions:** A problem list shall be created and maintained for SMHS, DMC, and DMC-ODS beneficiaries by the provider(s) responsible for the beneficiary care. The problem list is a listing of symptoms, conditions, diagnoses, and/or risk factors identified through assessment, psychiatric diagnostic evaluation, crisis encounters, or other types of service encounters. A problem identified during a service encounter (e.g., crisis intervention) may be addressed by the service provider (within their scope of practice) during that service encounter, and subsequently added to the problem list. At a minimum, the problem list must include:

- Diagnoses (and Diagnosis- specific specifiers from the Diagnosis and Statistical Manual-5 (DSM-5) shall be included, when applicable) identified by a Licensed Practitioner of the Healing Arts (LPHA) acting within their scope of practice, if any.
- Problems identified by other providers acting within their respective scopes of practice, if any.
- Problems identified by the beneficiary and/or significant support person, if any.

SMHS, DMC, and DMC-ODS providers shall add to or remove problems from the problem list when there is a relevant change to a beneficiary's condition. DHCS does not require the problem list to be updated within a specific timeframe or have a requirement about how frequently the problem list should be updated. However, providers shall update the problem list within a reasonable time and in accord with generally accepted standards of practice.

Client  
(75087772) TEST, CINDYTWO T

**ADD PROBLEM**

**Problems listed chronologically**

Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By	Job Title/Credential Level
1	D69.0	Allergic purpura	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current		
3	G44.00	Cluster headache syndrome, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current		
4	F06.2	Psychotic disorder with delusions due to known physiological condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current		
5	B27.0	Gammaherpesviral mononucleosis	56789 - Platonix, David A.	Admin/Supp Consultant	2022-07-05	Current		
6	Z59.2	Discord with neighbors, lodgers and landlord	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-07	Current		
7	<del>Z59.00</del>	<del>Homelessness-unspecified</del>	<del>10904 - Peterson, Camille E</del>	<del>Admin/Supp Information Systems Analyst</del>	<del>2022-07-08</del>	<del>Current</del>		
8	Z59.00	Homelessness unspecified	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current		
10	Z59.02	Unsheltered homelessness	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current		
44	Z66-92	Military deployment status	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-22	Current		
42	Z91.49	Other personal history of psychological trauma-not elsewhere classified	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-27	Current		
13	F25.1	Schizoaffective disorder, depressive type	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-09	Current		
14	Z59.9	Problem related to housing and economic circumstances, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-09	Current		
9	Z59.01	Sheltered homelessness	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current		
2	V30.5	Allergic rhinitis due to food	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	2022-07-28	2022-07-02	27773 - Madrid, Matt 10904 - Peterson, Camille E

Deleted problems, entered in error, have strike through

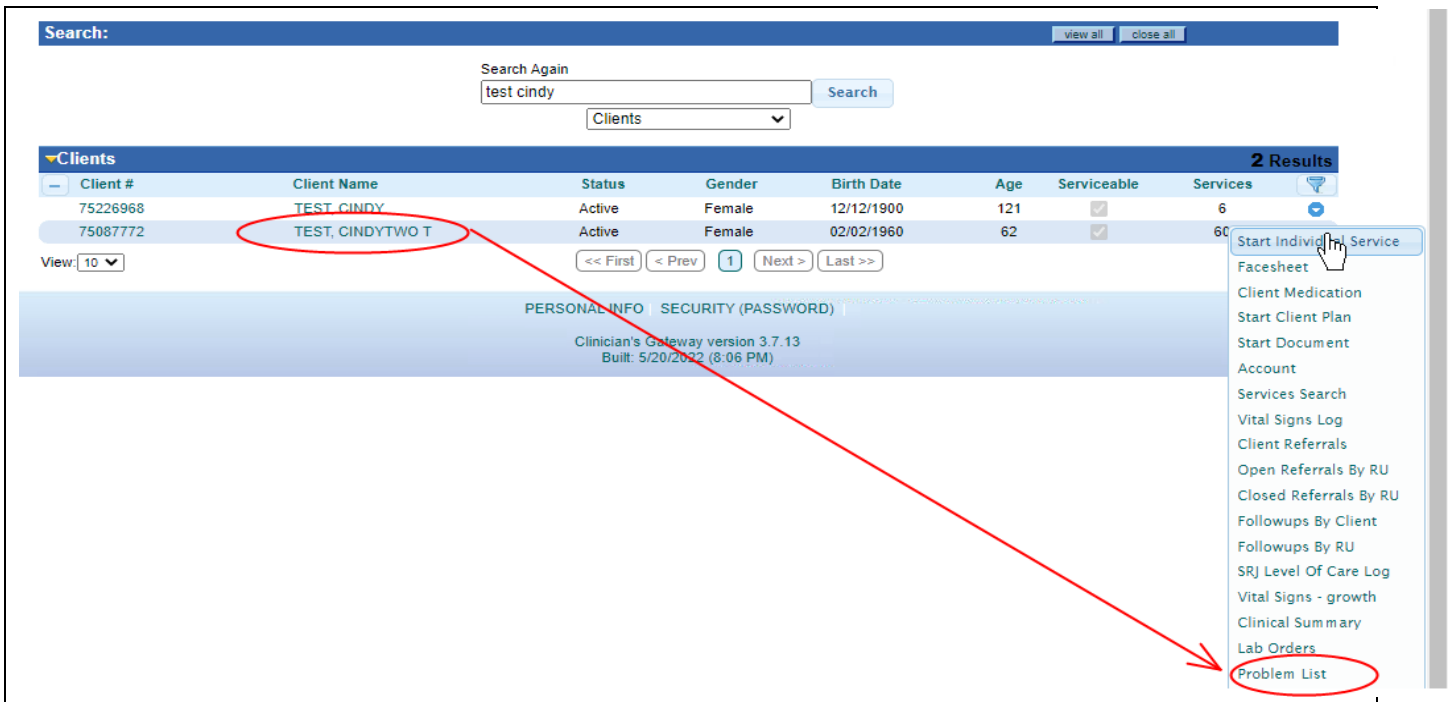
Problems with End Dates move to the bottom

View: 15 << First < Prev 1 Next > Last >>

The Problem List may be accessed via the Action menu from the Client Facesheet or the Client Search Results



Using Client Search Results – Find the Problem List on the Action Menu



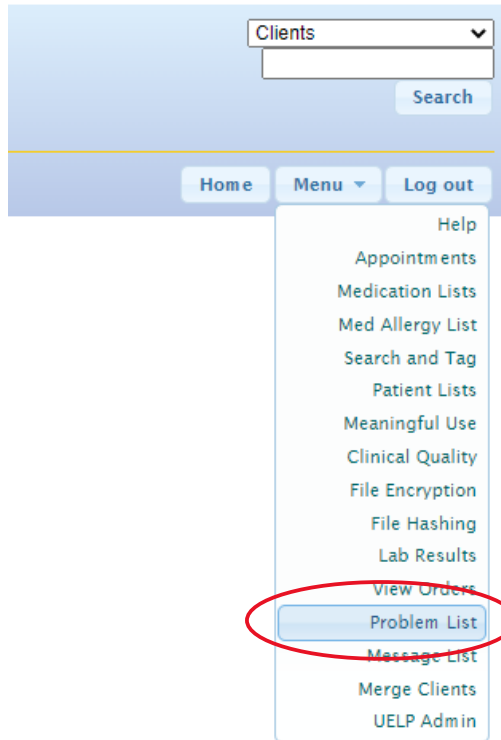
The Client Problem List screen displays referencing the client.

Client: (75087772) TEST, CINDYTWO T

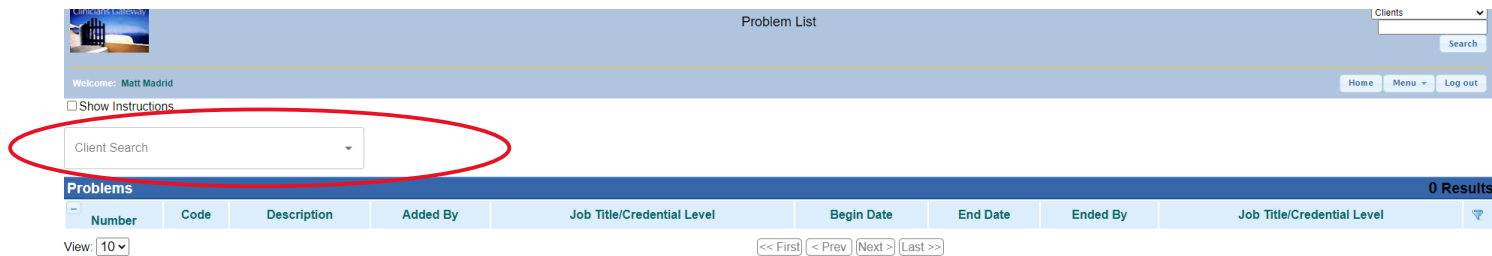
ADD PROBLEM

Problems										14 Results
Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By	Job Title/Credential Level		
1	D69.0	Allergic purpura	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current				0
3	G44.00	Cluster headache syndrome, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current				0
4	F06.2	Psychotic disorder with delusions due to known physiological condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current				0
5	B27.0	Gammaherpesviral mononucleosis	56789 - Platonix, David A.	Admin/Supp Consultant	2022-07-05	Current				0
6	Z59.2	Discord with neighbors, lodgers and landlord	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-07	Current				0

Alternately, you can select the Problem List from the Menu dropdown on any page in CG.



When you start from the Menu drop down, the Problem List page appears but the client is not yet identified. Enter the client name or number in the Client Search box and select the correct option when it appears in the dropdown.



The Problem List would then show as it does below with the option to “Add Problem”.

Client  
(75087772) TEST, CINDYTWO T

**ADD PROBLEM**

Problems										14 Results
Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By	Job Title/Credential Level		
1	D69.0	Allergic purpura	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current				
3	G44.00	Cluster headache syndrome, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current				
4	F06.2	Psychotic disorder with delusions due to known physiological condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current				
5	B27.0	Gammaherpesviral mononucleosis	56789 - Plattonix, David A.	Admin/Supp Consultant	2022-07-05	Current				
6	Z59.2	Discord with neighbors, lodgers and landlord	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-07	Current				

**Problems** (Codes & Descriptions) will be available in a drop down and Clinicians Gateway Users should be able to search and select by code or description.

Problems will only be able to be “Added By” and “Ended By” staff practicing within their license type scope. See table below.

- Behavioral Health diagnoses (DSM/ICD10 Diagnosis) (Select F Codes allowed by professional BH staff)
- Physical Health conditions (ICD10/SNOMED Codes) (Only allowed by doctors, NP, CNS, PA)
- Social Determinants of Health Needs (SDoH) (Select Z Codes Z55-Z65 can be added by any staff)

Job Title/ Credential Level In ShareCare	Job Title/ Credential Level In Clinicians Gateway			
Doctors Advanced Practice Med with Rx	Doctors NP, PA, CNS, Pharmacist	Social Determinants of Health (SDoH)	Behavioral Health Dx (DSM/ ICD10 Diagnosis)	Physical Health conditions (ICD10/ SNOMED Codes)
Licensed Clinical Staff Licensed Clinical Psychologist Waivered Clinical Psychologist Registered MH Intern Graduate Student	LMFT, LCSW, LPCC Licensed Clinical Psychologist Waivered Clinical Psychologist AMF, ASW, APCC Graduate Student	Social Determinants of Health (SDoH)	Behavioral Health Dx (DSM/ ICD10 Diagnosis)	
Certified AOD Counselors Registered AOD Counselors Unlicensed Staff Medical Staff Peer Support Specialist (we need to add)	SUDCC SUDRC MHW, QMHW, MHRS PT, LVN, RN	Social Determinants of Health (SDoH)		

To add a problem to the problem list, click on the “Add Problem” button.

Problem List

Welcome: Matt Madrid

Client (75087772) TEST, CINDYTWO T

**ADD PROBLEM**

Client Search: TEST, CINDYTWO T (75087772)

Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By	Job Title/Credential Level
1	D69.0	Allergic purpura	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current		
3	G44.00	Cluster headache syndrome, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current		
4	F06.2	Psychotic disorder with delusions due to known physiological condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current		
5	B27.0	Gammaherpesviral mononucleosis	56789 - Plattonix, David A	Admin/Supp Consultant	2022-07-05	Current		
6	Z59.2	Discord with neighbors, lodgers and landlords	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-07	Current		
7	Z59.00	Homelessness-unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-08	Current		
8	Z59.00	Homelessness unspecified	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current		
9	Z59.01	Sheltered homelessness	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current		
10	Z59.02	Unsheltered homelessness	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current		
11	Z56.82	Military deployment status	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-22	Current		

View: 10

<< First < Prev 1 2 Next > Last >>

After clicking on “Add Problem”, the page below appears. Find a Diagnosis by starting to type either the ICD-10 code or the description into the dropdown labeled “Diagnosis”. Click on the correct option when it appears in the dropdown. Select the begin date.

Problem List

Client (75087772) TEST, CINDYTWO T

Diagnosis: z59

Begin Date: 08/10/2022

- Z59 : Problems related to housing and economic circumstances
- Z59.0 : Homelessness
- Z59.00 : Homelessness unspecified**
- Z59.01 : Sheltered homelessness
- Z59.02 : Unsheltered homelessness

If you are not allowed to use a code, the Diagnosis drop down list will remain in “Loading” status.



**Problem List**

Client (75138646) TESTING, TEN BACK

Diagnosis z99

Loading...

Begin Date 06/23/2022 End Date mm/dd/yyyy

Identified by beneficiary and/or significant support person SAVE

If the diagnosis code is not allowed, the "Loading" message doesn't resolve

Please note for SUD users, there is an additional Reporting Unit field as seen below. This field is required. This field determines viewing privileges. Viewing is restricted according to 42CFR pt. 2 regulations. Staff will only be allowed to see problems reported within their RUs.

Clinicians Gateway SUD Problem List

Welcome: Matt Madrid

Show Instructions

**Problem List**

Client (10067802) TEST, ADAM R ARCHIVE BACK

Diagnosis Reporting Unit Select a Reporting Unit Begin Date 07/25/2022 End Date mm/dd/yyyy SAVE

A "By Report" checkbox is available for use by Professional BH staff. This checkbox allows Professional BH staff to add any problem that is allowed for the medical staff when it has been identified by beneficiary and/or other significant support person.

- Check the "Identified by beneficiary and/or significant support person checkbox.

Client (10087955) TEST, GANDALF BACK

Diagnosis

Reporting Unit Select a Reporting Unit Begin Date 08/29/2022 End Date mm/dd/yyyy  Identified by beneficiary and/or significant support person SAVE

Professional BH staff may check the "By Report" button to unlock medical staff Dx

- Search for the diagnosis that is usually restricted to medical staff. SAVE your choice!

**Problem List**

Client (10087955) TEST, GANDALF BACK

Diagnosis: diabetes

E08 : Diabetes mellitus due to underlying condition

E08.0 : Diabetes mellitus due to underlying condition with hyperosmolarity

E08.00 : Diabetes mellitus due to underlying condition with

2022 End Date mm/dd/yyyy  Identified by beneficiary

**19 Results**

- An icon (raised hand) will appear on the Problem List to indicate that the problem was “By Report” (Identified by beneficiary and/or other significant support person)

**Problems** 4 Results

Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By	Title/Cr Le
1	Z59.01	Sheltered homelessness	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-10	Current		
2	F11.10	Opioid abuse, uncomplicated	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-15	Current		
3	T74.01XD	Adult neglect or abandonment, confirmed, subsequent encounter	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-19	Current		
4	E08	Diabetes mellitus due to underlying condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-29	Current		

View: 10 << First < Prev 1 Next > Last >>

Select the Begin Date (required) and click Save. You should see a message appear at the bottom of the screen that says the problem was successfully inserted to the list.

Diagnosis  
F25.0 : Schizoaffective disorder, bipolar type

Begin Date 08/29/2022 End Date mm/dd/yyyy  Identified by beneficiary and/or significant support person **SAVE**

The problem was successfully inserted

You may now add additional problems or click the Back button to return to the Problem List page

Client (75130257) TESTY, CINDY **ARCHIVE** **BACK**

Diagnosis Begin Date 08/10/2022 End Date mm/dd/yyyy **SAVE**

**Add another problem or click "Back" to return to the problem list**

PERSONAL INFO | SECURITY (PASSWORD) |  
Clinician's Gateway version 3.7.18  
Built 7/11/2022 (10:13 PM)

The problem was successfully inserted

## END DATING A PROBLEM

To add or update the end date (and update the reporting unit if in SUD) to an existing problem, click on the blue button to the very right of the specific problem. You may have to scroll to the right of your screen if you don't see it.

11 Results				
Begin Date	End Date	Ended By	Job Title/Credential Level	
022-07-01	Current			🔍
022-07-01	Current			🔍
022-07-01	Current			🔍
022-07-05	Current			🔍
022-07-07	Current			🔍
022-07-08	Current			🔍
022-07-15	Current			🔍
022-07-15	Current			🔍
022-07-15	Current			🔍
022-07-22	Current			🔍

Enter an End Date and click Save. You should see a message at the bottom of your screen that says the problem was successfully updated. Note that no other fields can be changed here.

Show Instructions

### Problem List

Client (75087772) TEST, CINDYTWO T ARCHIVE BACK

Diagnosis Z59.01 : Sheltered homelessness Begin Date 07/15/2022 End Date 07/25/2022 SAVE

When end-dated, the problem moves to the bottom of the Problem List.

15 Results									
Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By	Job Title/Credential Level	
1	D69.0	Allergic purpura	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current			🔍
3	G44.00	Cluster headache syndrome, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current			🔍
4	F06.2	Psychotic disorder with delusions due to known physiological condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current			🔍
5	B27.0	Gammaherpesviral mononucleosis	58789 - Platonix, David A.	Admin/Supp Consultant	2022-07-05	Current			🔍
6	Z59.2	Discord with neighbors, lodgers and landlord	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-07	Current			🔍
7	Z59.00	Homelessness unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-08	Current			🔍
8	Z59.00	Homelessness unspecified	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current			🔍
10	Z59.02	Unsheltered homelessness	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	Current			🔍
11	Z56.02	Military deployment status	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-22	Current			🔍
12	Z94.49	Other personal history of psychological trauma, not elsewhere classified	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-27	Current			🔍
13	F25.1	Schizoaffective disorder, depressive type	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-09	Current			🔍
14	Z59.9	Problem related to housing and economic circumstances, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-10	Current			🔍
15	Z59.01	Sheltered homelessness	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-08-10	Current			🔍
9	Z59.01	Sheltered homelessness	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	2022-07-15	2022-07-28	27773 - Madrid, Matt	Admin/Supp Information Systems EHR Dev Spec	🔍
2	J30.5	Allergic rhinitis due to food	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	2022-07-02	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	🔍

View: 20 << First < Prev 1 Next > Last >>

## **REMOVING PROBLEMS ADDED IN ERROR**

The Archive button is available to certain defined staff in CG. It is used to remove a problem that was erroneously added to a client. It is not for end-dating a problem. Staff who can enter problems onto the Problem List, will be able to remove errors using the Archive button.

### Problem List

Client  
 (75087772) TEST, CINDYTWO T

ARCHIVE
BACK

Diagnosis ▼

Begin Date

End Date

SAVE

An archived problem can only be seen by IS staff. The row will be marked with a strike-through.

Problems							
Number	Code	Description	Added By	Job Title/Credential Level	Begin Date	End Date	Ended By
1	D69.0	Allergic purpura	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current	
3	G44.00	Cluster headache syndrome, unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current	
4	F06.2	Psychotic disorder with delusions due to known physiological condition	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-01	Current	
5	B27.0	Gammaherpesviral mononucleosis	56789 - Platonix, David A.	Admin/Supp Consultant	2022-07-05	Current	
6	Z59.2	Discord with neighbors, lodgers and landlord	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-07	Current	
7	Z59.00	Homelessness unspecified	10904 - Peterson, Camille E	Admin/Supp Information Systems Analyst	2022-07-08	Current	



# **Consumer/Client Life Plan – Treatment Plan**





## Starting the Client Plan

The **electronic treatment plan** in Clinician's Gateway is based on the principles of Wellness, Recovery and Resilience with family, client and consumer involvement while also addressing the need to establish medical necessity for treatment.

The Consumer/Client Life Plan consists of two plan types: the Medication Plan and the Universal Client Plan. Throughout these Plans, some items will be brought forward for reference, such as Risks and Needs to address, and Goals and Objectives to reference.

The GENERAL PROCEDURE is:

1. Write the Plan (using correct RU and End Dates to match SmartCare episode cycle. Include Client Participation information before submitting for approval.)
2. Submit for approvals by licensed, supervisor and medical staff as needed.
3. **Obtain approvals** in Clinician's Gateway.
4. Print for Client Signature. (After submitting for approval the Plan doesn't say "Pending")
5. Add the client signature date in CG.
6. Finalize the Plan.
7. Submit all the required Annual Documents with the Approved Treatment Plan signed by the client to supervisorial staff.
8. Support staff enters Plan approval into SmartCare and scans the entire plan.
9. "Edit" the Plan when objectives are achieved. Minor edits are allowed without re-approval.
10. **Revise:** modify current plan and obtain new signatures/approvals as needed during the plan year.
11. **Renew:** Renew the Plan, before the end date of the current plan, for the next year as needed.

### A special note from the BHCS QA Department:

*Once a Licensed, Waivered or Registered LPHA (including doc's) sign the Plan and then have the Client sign the Plan it is compliant for documentation requirements (if done by due date).*

*This can be accomplished by printing, have the client sign and routing to be scanned for data entry.*

*We have Clinic supervisors who are doing a great job of reviewing Plans by requiring the Plans to be forwarded to them for review. However, this does not need to hold up the finalization process for Licensed, Waivered and Registered LPHA's. Please note, if a revision is requested by the Supervisor—then the clinician will need to do so, re-sign with the new date, and again obtain the client signature. This too will be scanned into the client record (an auditor will see both Plans, but audit the most recent).*

*Please remember--It is crucial that anytime a printed CG document is modified by hand (such as a client signature) that it be scanned into the client record as this becomes part of the Medical Record. It MUST be uploaded—or we are not maintaining an accurate Medical Record. Regardless of the reason (such as the document says "pending", "draft", etc.) a document routed for uploading into Laserfiche by a clinicians—MUST always be uploaded.*

To **start writing a Plan**, Choose “Client Plan” from the Enter New Service menu on your Home page, enter the client # or name. Choose plan type and click “Start”.

**Enter New Service:**  
 Type of Service: Primary Clinician  
 Client Plan: [dropdown]  
 Client: test cindy  
 Plan Type: [dropdown: Universal, Universal, Medication]  
 Start Client Plan

Select the line with the correct client, you may get multiple clients. **\*Ignore the RU listed as the Lead Provider.**

**Start Client Plan for:**  
 Primary Clinician: [dropdown]  
 Client: test cindy  
 Search

**▼ Servicable Clients Matching "test cindy" 2 Results**

Clinician	Client #	Client Name	Status	Gender	Age	Services	Plan Type	Lead provider	
	75226968	TEST, CINDY	Active	Female	117	0	Universal	9999CG - CLINICIAN GATEWAY TEST MHS AD	Select Client
	75087772	TEST, CINDYTWO T	Active	Female	58	4	Universal	99995 - Short Term House	Select Client

The View Client Plans window will display Plans that already exist: Note the Plan # (1), the reporting unit (2), the start and end dates (3), and the status(4) of the plan (New, Authorizing, or Finalized)

**The following Client Plans already exist for this client. If possible RENEW or REVISE these plans before creating a new plan.**

**▼ The following Client Plans exist for TEST, CINDYTWO T (75087772) 7 Results**

Plan #	Plan Type	Provider	Start Date	End Date	Author	Rev	Status
4687	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	4/5/2018	2/28/2019		1	Finalized
4685	ALE_Meds_Svcs_Plan	99995 - Short Term House	2/1/2018	2/28/2018		1	Finalized
4652	Standard	99995 - Short Term House	2/5/2016	2/4/2017		1	Finalized
4651	Standard	9999CG - CLINICIAN GATEWAY T...	12/29/2015	11/30/2016		1	Finalized
4642	Standard	99991 - West County Mental Health...	1/8/2015	1/7/2016		1	Authorizing
4641	Standard	9999CG - CLINICIAN GATEWAY T...	10/3/2014	10/31/2014		1	Finalized
4630	Standard	99991 - West County Mental Health...	7/1/2014	12/31/2014		1	Finalized

**Only create new plans for a new Reporting Unit or if an existing plan CANNOT be RENEWED or REVISED.**

**Create A New Plan** (Note: only one plan may be active per provider for a given date range)

Clinician	Client	Plan Type	
	TEST, CINDYTWO T (75087772)	Universal	Start New Plan

**First, Try to Renew or Revise.**

Revise a plan in the same reporting unit that is still in effect.

Renew a plan in the same reporting unit that has ended within the last six months or will be ending soon.

This Plan can be RENEWED because its End Date is recent;

The following Client Plans already exist for this client. If possible RENEW or REVISE these plans before creating a new plan.

▼ The following Client Plans exist for TEST, CINDYTWO T (75087772) 7 Results

Plan #	Plan Type	Provider	Start Date	End Date	Author	Rev	Status
4687	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	4/5/2018	2/28/2019		1	Finalized
4685	ALE_Meds_Svcs_Plan	99995 - Short Term House	2/1/2018	2/28/2018		1	Finalized
4652	Standard	99995 - Short Term House	2/5/2016	2/4/2017		1	Finalized
4651	Standard	9999CG - CLINICIAN GATEWAY T...	12/29/2015	11/30/2016		1	Finalized
4642	Standard	99991 - West County Mental Health...	1/8/2015	1/7/2016		1	Authorizing
4641	Standard	9999CG - CLINICIAN GATEWAY T...	10/3/2014	10/31/2014		1	Finalized
4630	Standard	99991 - West County Mental Health...	7/1/2014	12/31/2014		1	Finalized

View: 10 ▾ << First < Prev 1 Next > Last >>

View Edit Renew Print

This Plan can be REVISED because it is still in effect:

The following Client Plans already exist for this client. If possible RENEW or REVISE these plans before creating a new plan.

▼ The following Client Plans exist for TEST, CINDYTWO T (75087772) 7 Results

Plan #	Plan Type	Provider	Start Date	End Date	Author	Rev	Status
4687	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	4/5/2018	2/28/2019		1	Finalized
4685	ALE_Meds_Svcs_Plan	99995 - Short Term House	2/1/2018	2/28/2018		1	Finalized
4652	Standard	99995 - Short Term House	2/5/2016	2/4/2017		1	Finalized
4651	Standard	9999CG - CLINICIAN GATEWAY T...	12/29/2015	11/30/2016		1	Finalized
4642	Standard	99991 - West County Mental Health...	1/8/2015	1/7/2016		1	Authorizing
4641	Standard	9999CG - CLINICIAN GATEWAY T...	10/3/2014	10/31/2014		1	Finalized
4630	Standard	99991 - West County Mental Health...	7/1/2014	12/31/2014		1	Finalized

View: 10 ▾ << First < Prev 1 Next > Last >>

View Edit Revise Print

**\*SUD Will only use New and Revise**

**Only Use Start New Plan for a new reporting unit or if a previous plan can't be Revised or Renewed!**

**Only create new plans for a new Reporting Unit or if an existing plan CANNOT be RENEWED or REVISED.**

Create A New Plan (Note: only one plan may be active per provider for a given date range)

Clinician	Client	Plan Type
	TEST, CINDYTWO T (75087772)	Universal ▾

Start New Plan

This will bring up the Client Plan entry screen.

The screenshot shows the 'Client Plan MHS' entry form. It includes fields for Plan # (New), Status (New), Revision (1), Episode Opening Date (3/7/2007), Client (TEST, CINDYTWO T (75087772)), Effective Start (03/01/2018), Client DOB (2/2/1960), Effective End (02/28/2019), Provider (9999CG - CLINICIAN GAT), Plan type (Initial/Update), and a checkbox for 'Consumer/Client is a long term ACBHCS beneficiary (> 3 months)'. Red boxes with numbers 1-7 highlight these specific fields.

1. The Plan # is “New” before it is submitted for authorization. When submitted, it will be given a unique identifying number. Each time the plan is revised, the plan # will change.
2. The “Revision” number will tell you if it is revision #1, 2, 3, etc.
3. The Status will be “New” before submitting for authorization, “Authorizing” if submitted, or “Finalized” after approved by approvers and finalized by the clinician.
4. The Effective Start and Effective End automatically default to cover the one year starting with the first day of the episode opening month. End dates can be changed if your program uses shorter time frames. **\*Verify the dates are correct (SUD will be 90 day plans)**
5. **Choose the Correct Reporting Unit** for the client.
6. Mark Initial if it is the first plan for the client in this Reporting Unit. Mark Update if it is an annual update or a revision of the current plan during the effective period.
7. If the Client is not a long term beneficiary of Alameda County BHCS (receiving services less than 3 months), then uncheck the box.

**Fill in Goals, Strengths, Challenges\*, Objectives, Modalities, and Specific Services.**

The screenshot shows two sections of the form: 'MY GOALS FOR THE FUTURE' and 'MY STRENGTHS'. Each section has a header bar and a text area for input. The 'MY GOALS FOR THE FUTURE' section has a sub-header 'INDIVIDUAL/FAMILY DESIRED RESULTS FROM MH INTERVENTIONS (Client quote if possible)'. The 'MY STRENGTHS' section has a sub-header 'INDIVIDUAL/FAMILY STRENGTHS TOWARD OVERCOMING BARRIERS AND ACHIEVING DESIRED MH RELATED RESULTS'.

**\*Challenges section is specific to Universal Plan**

**CHALLENGES**

**Area of Challenges:** Community Life, Family Life, Safety School/Education, Vocational, Independent Living, ADLs, Health, Housing, Legal, SUD, Food/Clothing/Shelter, etc.

(Select) [ ] (Select) [ ]

**Level of Challenges:** Moderate, Severe

**Specific Challenges or Functional Impairments related to MH Diagnosis's Signs & Symptoms:** [For Case Mgt, must indicate need for C/M service, i.e. ct. is homeless. Also, must indicate (1) which severe Symptoms/Impairments/Barriers resulting from MH Diagnosis that prevents client from accessing/maintaining needed services, or (2) for child that the lack of such services (caretaker not providing) exacerbates child's MH symptoms/impairments.]

[ ]

[Add Another Challenge](#)

**Use 'Add Another Challenge' button to add more challenges as needed.**

**OBJECTIVES**

**Obj#** Short-Term Mental Health Objectives: Specific, quantifiable or observable outcomes of target symptoms, behaviors, or impairments in functioning. (Note: these are ALWAYS MENTAL HEALTH Objectives - even when providing Case Management Services.)

1 [ ]

**Target Date:** (12 months unless specified) 12 Months [ ]

**At Reassessment: (Optional)** When appropriate indicate level of improvement, date and initial.

Not Improved  
 Somewhat Improved  
 Very Much Improved

Date: [ ] Initials: [ ]

Met [ ] [ ]

[Add Another Objective](#)

**Use 'Add Another Objective' button to add more objectives as needed.**

The Objectives will be displayed on the progress notes for reference.

Revisions can be made during the Effective Period to add or change Objectives, or mark the level of improvement, or accomplishment of the Objective.

**Service Modality and Specific Services for each modality**

1. Select the correct Service Modalities as needed.
2. For each Modality selected, there will be a section to annotate the specific services for that modality

**The Modality and Services sections vary based on Plan type**

Modality and Services sections specific to the **Medication Plan**:

SERVICE MODALITIES		
MODALITY	FREQUENCY	DURATION
<input checked="" type="checkbox"/> Medication Mgmt	Every Month and As Needed	12 Months
<input checked="" type="checkbox"/> Other Testing	Every Week and As Needed	12 Months
<input type="checkbox"/> Other	Every Week and As Needed	12 Months

SPECIFIC SERVICES FOR EACH MODALITY	
MODALITY	Detailed Intervention(s)
Medication Mgmt	<p>Detailed Interventions provided to client and/or significant support may include but are not limited to:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Evaluation of clinical effects of medication.</li> <li><input checked="" type="checkbox"/> Medication regimen adjustment.</li> <li><input checked="" type="checkbox"/> Obtaining informed consent for medication (inform of risks and benefits, discuss alternative treatments and obtain signed informed consent).</li> <li><input checked="" type="checkbox"/> Medication education (re proper use, benefits, risks and side effect management of medications).</li> <li><input checked="" type="checkbox"/> Medication prescribing, administration or dispensing.</li> <li><input checked="" type="checkbox"/> Medication related consultation with providers.</li> <li><input checked="" type="checkbox"/> Phone calls to client and/or significant support persons about medications.</li> <li><input checked="" type="checkbox"/> Phone calls to pharmacy and transmitting medication orders (re communicate with pharmacy, prepare prescription orders for transmission, authorize prescription refills, and resolve issues related to client's prescriptions).</li> <li><input checked="" type="checkbox"/> Counseling (Supportive Psychotherapy) and Coordination of Care (Referrals).</li> </ul> <p>Additional Comments:</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Testing	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>

Modality and Services sections specific to the Universal Plan:

SERVICE MODALITIES		
MODALITY	FREQUENCY	DURATION
<input checked="" type="checkbox"/> Collateral	Every Week and As Needed	12 Months
<input checked="" type="checkbox"/> Case Mgmt	Every Week and As Needed	3 - 12 Months
<input type="checkbox"/> Indiv Rehab	Every Week and As Needed	12 Months
<input type="checkbox"/> Group Rehab	Every Week and As Needed	12 Months
<input type="checkbox"/> Indiv Therapy	Every Week and As Needed	12 Months
<input checked="" type="checkbox"/> Group Therapy	Every Week and As Needed	12 Months
<input type="checkbox"/> Family Therapy	Every Week and As Needed	12 Months
<input type="checkbox"/> Multi Family Grp Therapy	Every Week and As Needed	12 Months
<input type="checkbox"/> Medication Mgmt	Every Month and As Needed	12 Months
<input type="checkbox"/> Collateral Family Grp	Every Week and As Needed	12 Months
<input type="checkbox"/> TBS	Every Week and As Needed	3 - 12 Months
<input type="checkbox"/> Katie A. (ICC)	Every Week and As Needed	3 - 12 Months
<input type="checkbox"/> Katie A. (IHBS)	Every Week and As Needed	3 - 12 Months
<input type="checkbox"/> Day Rehab	Every Day and As Needed	6 - 12 Months
<input type="checkbox"/> Crisis Residential	Every Week and As Needed	3 - 12 Months
<input type="checkbox"/> Adult Residential	Every Week and As Needed	6 - 12 Months
<input type="checkbox"/> Crisis Stabilization	Every Week and As Needed	3 - 12 Months
<input checked="" type="checkbox"/> Other Testing	Every Week and As Needed	12 Months
<input type="checkbox"/> Other	Every Week and As Needed	12 Months

SPECIFIC SERVICES FOR EACH MODALITY	
MODALITY	Detailed Intervention(s)(For Case Management indicate as relevant: linkage to and monitoring of community support services for _____ (i.e. homeless, joblessness, medical illness, or substance abuse) will result in client achieving their Mental Health Objectives # and # listed above)
Collateral	
Group Therapy	
Case Mgmt	
Testing	

# Discharge Plan, Authorizing, and Client Participation

Finish by entering the Discharge Plan, Additional Comments, Authorizations, and Participation sections.

**DISCHARGE PLAN**

DISCHARGE PLAN (Readiness/Time Frame/Expected Referrals, Etc.)

Additional Comments (Client, Provider, Family, etc.)

If authorization is needed before printing for client signature, add authorizers here. Plan will be sent to them to authorize

**AUTHORIZATION SIGNATURES**

This plan is to be forwarded to the following for authorization:

- Psychiatric NP/PA
- Psychiatrist
- Program Supervisor
- Other

Select Clinician

Select Clinician

Select Clinician

Select Clinician

Client is being treated by a non-BHCS psychiatrist.

This plan also sent to:

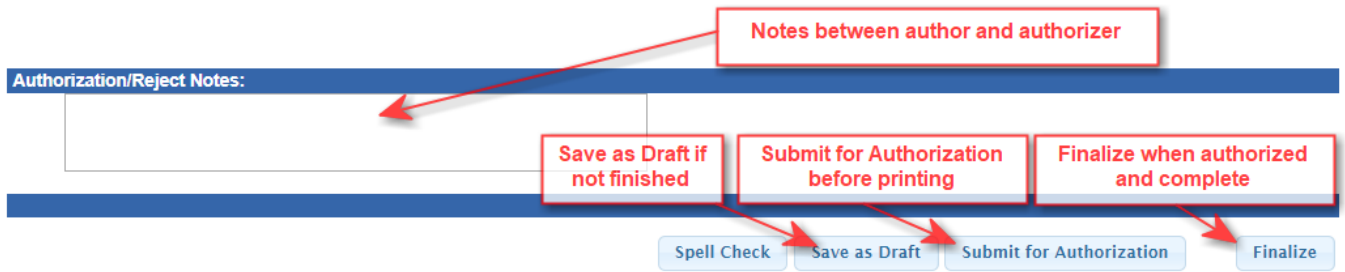
**INDIVIDUAL/FAMILY PARTICIPATION**

- Plan was discussed in primary language
- Individual/Family was offered a copy of this Plan in English
- Individual/Family participated in the development of, and agreed to, this Plan.
- Provider attests that Individual signed plan.
- Provider attests that legal representative (Parent, Legal Guardian, Conservator, etc.) signed or verbally accepted this Plan on this date due to Individual inability to sign.
- Individual/Family verbally accepts this plan but not able to sign on this date (explain below).
- Individual/Family declines to sign (explain below).
- See progress note dated [ ] for discussion of plan with Individual/Family.

Check the box for the correct type of participation. Type and date of Participation and progress note date are required before Finalizing.



After completing the plan, “Submit for Authorization”. (At this point you could bring up the plan and “Print for Signature”. This procedure is described later after authorizations are described.)



When the Plan is “Saved” or “Submitted”, it will appear on the Home page of the author and the authorizers. Notice the yellow dot near Authorizing, this means it has been submitted but not authorized by one of the selected Authorizers.

Pending Client Plans											1 Result
Plan #	Type	Client #	Client name	Provider	Date	Rev	Author	Status	Role	Supercedes #	
4690	ALE_Client_Plan_MHS	75087772	TEST, CINDYTWO T	9999CG - CLINICIAN GA...	3/1/2018	1		Authorizing	Author		

View: 10    << First    < Prev    1    Next >    Last >>

The role column displays if you are the author or one of the authorizers.

Pending Client Plans											1 Result
Plan #	Type	Client #	Client name	Provider	Date	Rev	Author	Status	Role	Supercedes #	
4690	ALE_Client_Plan_MHS	75087772	TEST, CINDYTWO T	9999CG - CLINICIAN GA...	3/1/2018	1		Authorizing	Iphacosign		

View: 10    << First    < Prev    1    Next >    Last >>

Obtain Authorizations. After “Submit for Authorization”, the plan appears on the Pending Client Plans list on the authorizer’s Home page. The authorizer should click the plan ID # or its blue button to open the plan for approval.

\*\*\*If the author of the plan doesn’t need any approvers, they may Finalize the plan after the client or representative signature date has been added to the Participation section.

Pending Client Plans											1 Result
Plan #	Type	Client #	Client name	Provider	Date	Rev	Author	Status	Role	Supercedes #	
4690	ALE_Client_Plan_MHS	75087772	TEST, CINDYTWO T	9999CG - CLINICIAN GA...	3/1/2018	1		Authorizing	Iphacosign		

View: 10    << First    < Prev    1    Next >    Last >>

The authorizer brings up the plan to review it. Using the Action Button they either Authorize, Reject, or possibly Finalize the Plan. (Only Finalize if all authorizers have approved the plan, and you are the last one.)

The Green dot tells me my plan was authorized. All it needs is the individual or family signature.

Plan #	Type	Client #	Client name	Provider	Date	Rev	Author	Status	Role	Supercedes #
4690	ALE_Client_Plan_MHS	75087772	TEST, CINDYTWO T	9999CG - CLINICIAN GA...	3/1/2018	1		Authorizing	Author	

\*\*\*If the author of the plan doesn't need any approvers, they may Finalize the plan after the client or representative signature date has been added to the Participation section.

Authorizers and their signature dates are shown in the Authorization Signature section near the end of the plan. After Authorization then bring up the plan and "Print for Signature" of the client or representative. (After "Submit", the "Pending" banner disappears and you can print it for the signature without "Pending" splashed across it.)

After the Client/Family Signs, bring up the plan and enter the client participation. From the Action bar choose “Edit”. This is a “Mini-Edit” which will not require you to submit for authorization again.

**INDIVIDUAL/FAMILY PARTICIPATION**

Plan was discussed in primary language  
 Individual/Family was offered a copy of this Plan  
 Individual/Family participated in the development of, and agreed to, this Plan.

English ▾  
English ▾

Provider attests that Individual signed plan.  
 Provider attests that legal representative (Parent, Legal Guardian, Conservator, etc.) signed or verbally accepted this Plan on this date due to Individual inability to sign.  
 Individual/Family verbally accepts this plan but not able to sign on this date (explain below).  
 Individual/Family declines to sign (explain below).

See progress note dated 03/27/2018 for discussion of plan with Individual/Family.

03/27/2018

Once the plan is Authorized and signed by the Client and/or Family you may Finalize this plan

**Actions:**

Action	User Name	Date	Note
Submit	Sales, Cameren	3/27/2018 1:48:41 PM	
Authorize	Chavez, Aaron J	3/27/2018 2:16:15 PM	

Save Finalize

After the plan is authorized and signed by the individual and/or family, you can click ‘Finalize’.

**\*\*\*\*\* FINALIZE IT. \*\*\*\*\***

CONGRATULATIONS!

# Print for Client Signature

**BEFORE PRINTING, SUBMIT THE PLAN AND GET APPROVALS.** (When the Plan has not yet been submitted for approval the Plan will have "Pending" splashed across it)

**AFTER APPROVED, VIEW IT TO ACCESS THE "PRINT FOR SIGNATURE" BUTTON.** To view the Plan, click on its Plan Number or the blue button.

Status is green, meaning the plan has been authorized. Click either the Plan # or the blue button to view plan

Pending Client Plans										1 Result
Plan #	Type	Client #	Client name	Provider	Date	Rev	Author	Status	Role	Supercedes #
4690	ALE_Client_Plan_MHS	75087772	TEST, CINDYTWO T	9999CG - CLINICIAN GA...	3/1/2018	1		Authorizing	Author	

View: 10 | << First | < Prev | 1 | Next > | Last >>

The Plan appears on your screen. From the Action Bar, Click "PRINT FOR SIGNATURE".

### AUTHORIZATION SIGNATURES

This plan is to be forwarded to the following for authorization:

N/A

Licensed LPHA Co-Sign:	3/27/2018
------------------------	-----------

Electronic Signature Date of Co-signer/Authorizer

### INDIVIDUAL/FAMILY PARTICIPATION

By signing, I agree that I have: 1) participated in the development of, and agreed to, this Plan; and 2) have been offered a copy of this Plan.

\_\_\_\_\_ Individual \_\_\_\_\_ Date

\_\_\_\_\_ and/or Family/Representative \_\_\_\_\_ Date

### Actions:

Action	User Name	Date	Note
Submit		3/27/2018 1:48:41 PM	
Authorize		3/27/2018 2:16:15 PM	

### Authorization/Reject Notes:

Print for Signature

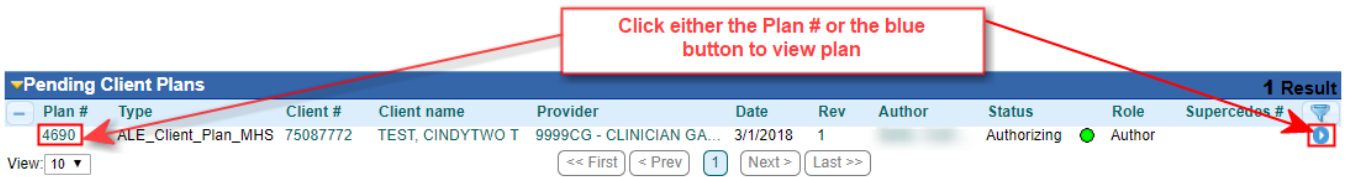
- Edit
- Print
- Reject
- Finalize
- Delete

Action ▾

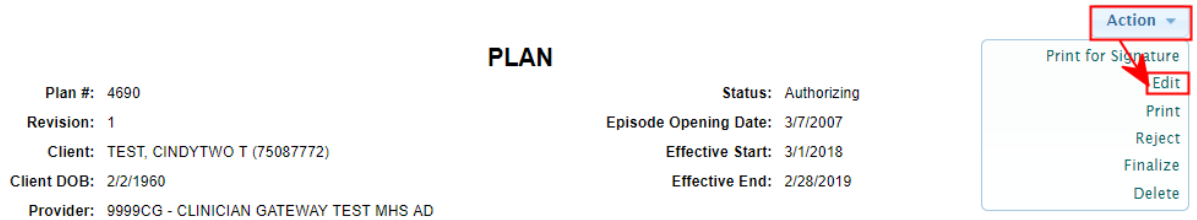
(You can Print, Edit, Reject, Finalize or Delete from this screen via the Action bar. "Edit" will allow you to Submit for Authorization. Editing also requires you to resubmit the Plan for authorization.)

**RETURN TO THE PLAN TO ADD THE CLIENT SIGNATURE DATE AFTER IT IS OBTAINED.**

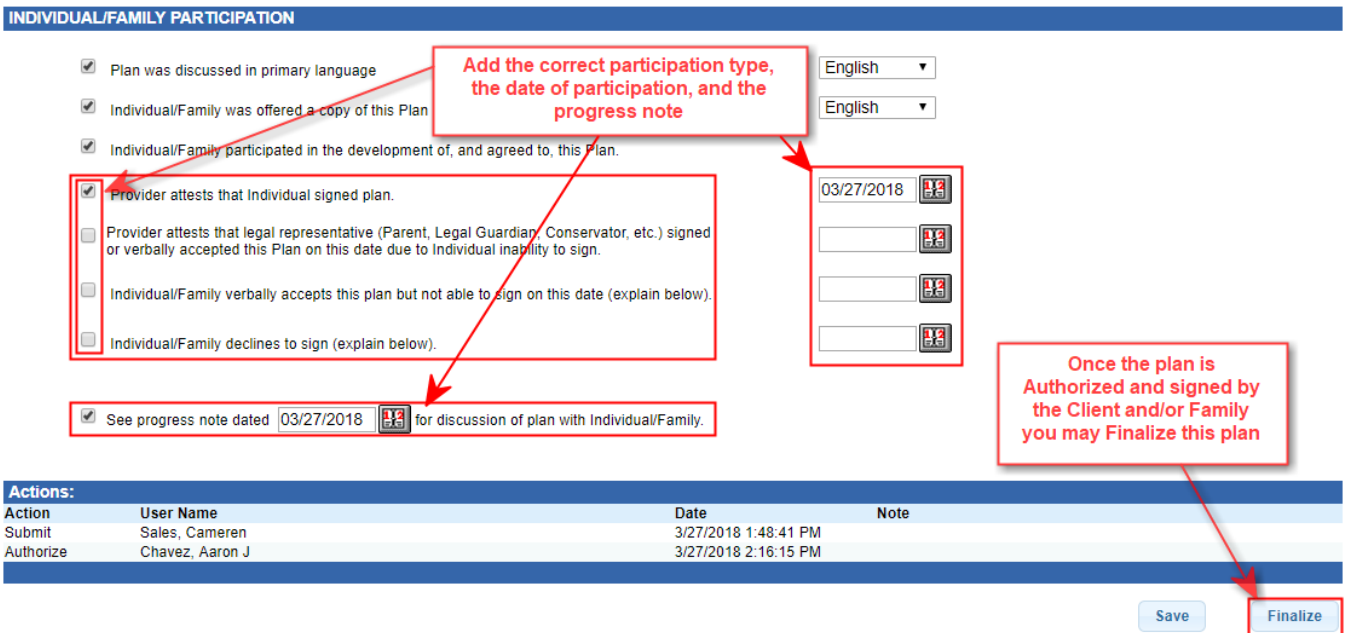
This edit will not trigger another round of authorizing. First, View the Plan by clicking on the Plan Number.



Click "Edit" on the Action bar.



Add Individual/Family Participation and date the signatures. Then you can click 'Finalize'.



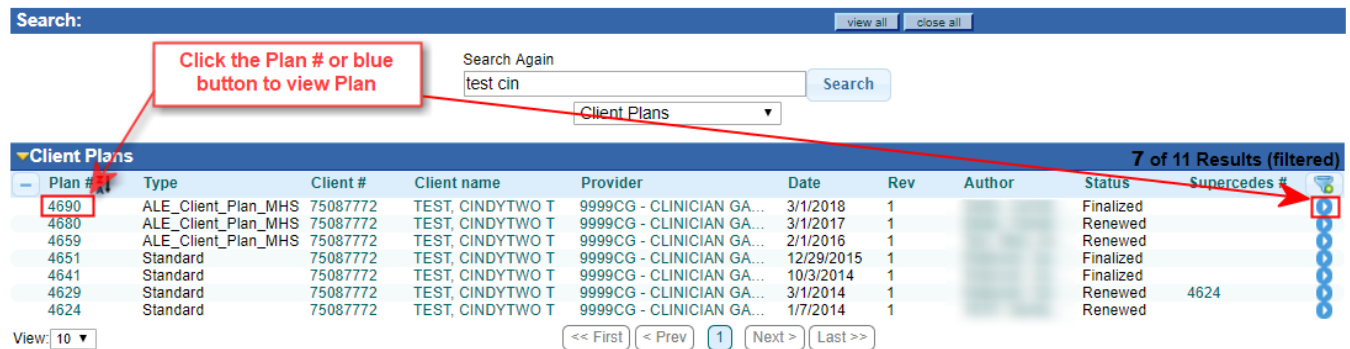
The Plan is removed from the Pending Client Plan list on the Home page after it is finalized.

# Viewing, Editing, and Revising a Finalized Plan

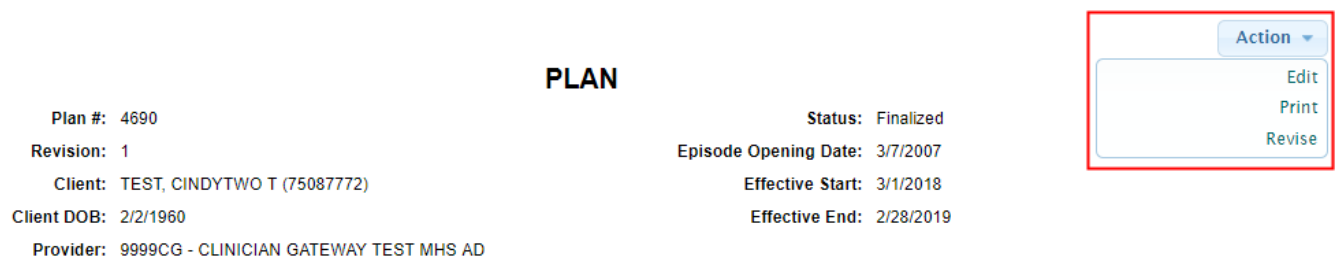
Use the Global Search function to Search for a Plan. Choose “Client Plans” from the drop down menu. Enter the Client’s name and click “Search”.



Search Results are displayed. Click on the Plan number or its blue button to view it. Note that this Plan’s Status is now “Finalized”.



If the plan is in the middle of the Effective Period, then the Finalized Plan may be Printed, Edited or Revised. (can’t renew it yet)



**Edit:** A Finalized Plan may be edited in minor ways only.

- Objectives may be marked as achieved,
- Plans sent to an additional person may be noted,
- Addenda for future planning may be written.
- Client signatures may be added.

## OBJECTIVES

Obj# Short-Term Mental Health Objectives: Specific, quantifiable or observable outcomes of target symptoms, behaviors, or impairments in functioning. (Note: these are ALWAYS MENTAL HEALTH Objectives.)

Target Date: (12 months unless specified)

At Reassessment: (Optional) When appropriate indicate level of improvement, date and initial.

1 we can enter objective #1 12 Months

Remove Objective

2 And then there is objective # 2 12 Months

Remove Objective

Unable to edit text but can update improvements

Not Improved  
 Somewhat Improved  
 Very Much Improved  
 Date:      Initials:  
 Met

## INDIVIDUAL/FAMILY PARTICIPATION

Plan was discussed in primary language English

Individual/Family was offered a copy of this Plan in English

Individual/Family participated in the development of, and agreed to, this Plan.

Provider attests that Individual signed plan. 02/14/2018

Provider attests that legal representative (Parent, Legal Guardian, Conservator, etc.) signed or verbally accepted this Plan on this date due to Individual inability to sign.

Individual/Family verbally accepts this plan but not able to sign on this date (explain below).

Individual/Family declines to sign (explain below).

See progress note dated for discussion of plan with Individual/Family.

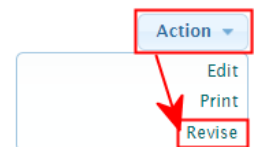
**Revise: Any substantial change is a Revision** and

- Revisions must be re-authorized and re-signed by the client.
- Revisions are given a new Plan #.
- New Revisions of Plans supersede earlier versions.

From the Action Bar, click on Revise.

**PLAN**

Plan #: 4690	Status: Finalized
Revision: 1	Episode Opening Date: 3/7/2007
Client: TEST, CINDYTWO T (75087772)	Effective Start: 3/1/2018
Client DOB: 2/2/1960	Effective End: 2/28/2019
Provider: 9999CG - CLINICIAN GATEWAY TEST MHS AD	



- Change **any** of the fields in the plan.
- Send for Authorization
- Obtain authorizer's signatures.
- Print for Signature.
- Add Client signature information to Plan.
- Finalize Plan.



# Renewing Client Plan

During the 30 days preceding and following a plan's expiration date, an additional button will appear. A "Renew Plan" button will be available.

- From the Action Bar, click the Renew button.

The screenshot displays a client plan interface. On the left, plan details are listed: Plan #: 4685, Revision: 1, Client: TEST, CINDYTWO T (75087772), Client DOB: 2/2/1960, and Provider: 99995 - Short Term House. In the center, the word "PLAN" is prominently displayed. To the right, plan status and dates are shown: Status: Finalized, Episode Opening Date: 2/1/2007, Effective Start: 2/1/2018, and Effective End: 2/28/2018. Below these details is a link for "Plan Instructions" with a PDF icon. On the far right, an "Action" dropdown menu is open, showing options for "Edit", "Print", and "Renew". Red boxes highlight the "Action" dropdown and the "Renew" option, with a red arrow pointing from the dropdown to the "Renew" button.

- All of the entries from the previous plan will be brought forward into the new plan.
- After you make revisions, obtain the signatures and approvals just the same as when you make a new plan or revise a plan.

## **CHANGING THE AUTHOR OF THE PLAN**

1. Once a note is Finalized, it may be viewed and revised by any clinician. If the clinician revises the Plan, they are the new author of the Plan.
2. The Information Systems Help Desk can change the author of the Plan on request.

# Concurrent Treatment Plans

Plans may now be active in more than one reporting unit concurrently.

## Start writing the plan as usual

**Enter New Service:**

Type of Service: Client Plan Primary Clinician: [Dropdown] Client: test cindy Plan Type: Universal Start Client Plan

Edit Primary Clinician List

## A grid of existing plans will be presented from which to choose.

- **First try to renew or revise an existing plan in your reporting unit.**

The following Client Plans already exist for this client. If possible RENEW or REVISE these plans before creating a new plan.

▼ The following Client Plans exist for TEST, CINDYTWO T (75087772) 7 Results

Plan #	Plan Type	Provider	Start Date	End Date	Author	Rev	Status	
4690	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	3/1/2018	2/28/2019	Sales, C...	1	Finalized	[Action Menu]
4685	ALE_Meds_Svcs_Plan	99995 - Short Term House	2/1/2018	2/28/2018	Peterson...	1	Finalized	[Action Menu]
4652	Standard	99995 - Short Term House			Chavez, ...	1	Finalized	[Action Menu]
4651	Standard	9999CG - CLINICIAN GATEWAY T...			Peterson...	1	Finalized	[Action Menu]
4642	Standard	99991 - West County Mental H...			Plattonix...	1	Authorizing	[Action Menu]
4641	Standard	9999CG - CLINICIAN GATEWAY T...	10/3/2014	10/31/2014	Peterson...	1	Finalized	[Action Menu]
4630	Standard	99991 - West County Mental Health...	7/1/2014	12/31/2014	Plattonix...	1	Finalized	[Action Menu]

View: 10 << First < Prev 1 Next > Last >>

Only create new plans for a new Reporting Unit or if an existing plan CANNOT be RENEWED or REVISED.

Create A New Plan (Note: only one plan may be active per provider for a given date range)

Clinician: 19072 - Sales, Cameren, MD Client: TEST, CINDYTWO T (75087772) Plan Type: Universal Start New Plan

- **The Action Menu will tell you if you can Renew or Revise the plan**

The following Client Plans already exist for this client. If possible RENEW or REVISE these plans before creating a new plan.

▼ The following Client Plans exist for TEST, CINDYTWO T (75087772) 7 Results

Plan #	Plan Type	Provider	Start Date	End Date	Author	Rev	Status	
4690	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	3/1/2018	2/28/2019	Sales, C...	1	Finalized	[Action Menu]
4685	ALE_Meds_Svcs_Plan	99995 - Short Term House	2/1/2018	2/28/2018	Peterson...	1	Finalized	[Action Menu]
4652	Standard	99995 - Short Term House	2/5/2016	2/4/2017	Chavez, ...	1	Finalized	[Action Menu]
4651	Standard	9999CG - CLINICIAN GATEWAY T...	12/29/2015	11/30/2016	Peterson...	1	Finalized	[Action Menu]
4642	Standard	99991 - West County Mental Health...	1/8/2015	1/7/2016	Plattonix...	1	Authorizing	[Action Menu]
4641	Standard	9999CG - CLINICIAN GATEWAY T...	10/3/2014	10/31/2014	Peterson...	1	Finalized	[Action Menu]
4630	Standard	99991 - West County Mental Health...	7/1/2014	12/31/2014	Plattonix...	1	Finalized	[Action Menu]

View: 10 << First < Prev 1 Next > Last >>

[Action Menu]: View, Edit, Revise, Print

(Continued on next page)

**Use “Start New Plan” only if you need a new RU or the existing plan is too old.**

Only create new plans for a new Reporting Unit or if an existing plan CANNOT be RENEWED or REVISED.

Create A New Plan (Note: only one plan may be active per provider for a given date range)

Clinician	Client	Plan Type	Start New Plan
	TEST, CINDYTWO T (75087772)	Universal	

You will be warned if the “New Plan” cannot be finalized due to a pre-existing plan

Cannot save form until the following issues are resolved:

\* Warning! Another plan (# 4690) can be renewed or revised. This plan will not be able to be finalized.

▼ The following Client Plans exist for TEST, CINDYTWO T (75087772) 8 Results

Plan #	Plan Type	Provider	Start Date	End Date	Author	Rev	Status
4691	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	5/1/2018	2/28/2019		1	Authorizing
4690	ALE_Client_Plan_MHS	9999CG - CLINICIAN GATEWAY T...	3/1/2018	2/28/2019		1	Finalized

**If you work on a plan that cannot be finalized, you will not be able to finalize it.**

**Your work will be lost!**

# Troubleshooting

## **Client Plan End Dates:**

Normally clinician's will have to set the end date to the end month 12 months from the Start Date, but sometimes this data is entered incorrectly.

If the plan has been finalized, the user must send a Treatment Plan Change Request to the BHCS Help Desk at 510-817-0076 or [HCSASupport@acgov.org](mailto:HCSASupport@acgov.org).

## **Client Plan Start Dates:**

These can usually be changed by doing a Revision or Renewal. Revision allows a new start date to be entered during the plan year. A Renewal starts after the end of the existing plan. Start Dates cannot be back dated.

If the Start Date needs to be earlier, then we must have a Change Request along with a signed paper Plan faxed or emailed to the Helpdesk indicating an earlier client signature. We can then do a QA override to attest to the Start Date change.

## **Incorrect Reporting Unit:**

If the Plan has not been finalized, reject the Plan, Edit it, and change the RU. If the Plan has been finalized, either do a new revision to change the RU, or submit a Treatment Plan Change Request form to the Help Desk.

**Revision being used when a Renewal was intended:** (Revisions keep the same end date while Renewals start after the current plan's end date)

Delete the Revision, go to the previous plan and click Renew.

If the dates don't match up we can adjust the end Date of the previous plan to cover the period for auditing purposes only.

**Plan Submitted for Authorization not appearing on Supervisor's Home page:**

Verify the Reporting Unit is set correctly. If not Staff must Reject the plan and update to the correct Reporting Unit and Submit for Authorization again.

Verify that the Checkboxes are checked next to the authorizer's names in the "Authorization Signatures" section. Click "Submit for Authorization" button.

**Client Signature details are incorrect:**

Edit the plan. Go to the Consumer/Client Life Plan

Go down to Consumer/Client Participation and fill out the appropriate responses.

**Authorizer Signatures not showing:**

Verify that the Checkboxes are checked next to the authorizer's names in the "Authorization Signatures" section. Then click "Submit for Authorization".

# Changing your Password



## Changing your password

- Click on security from the bottom of the home page.

PERSONAL INFO SECURITY (PASSWORD) GUIDES/HELP

- Choose the “Change Password” tab

Clinicians Gateway Security & Personalization

Welcome

Home Menu Log out

Profile Preferences **Change Password** Security Questions Electronic Signature Agreement

Profile Preferences **Change Password** Security Questions Electronic Signature Agreement

1 Enter your Old Password:

2 Enter your New Password:

3 Confirm Password:

4 Update Password

[click here if you forgot your password](#)

1. Enter your current password in the first field.
2. Enter your new password in the second field. (Your password must contain at least one uppercase alpha, one lowercase alpha, and one numeric character. It also must be at least eight characters in length).
3. Re-enter your new password in the third field to confirm the change.
4. Click on “Update password”





# Errored Notes

# The Flow for Errored Notes Processing

When transferring notes into SmartCare (the billing system), the system may block the transfer if the note is missing required information. If this happens, the note with errors will be returned to Clinicians Gateway for corrections.

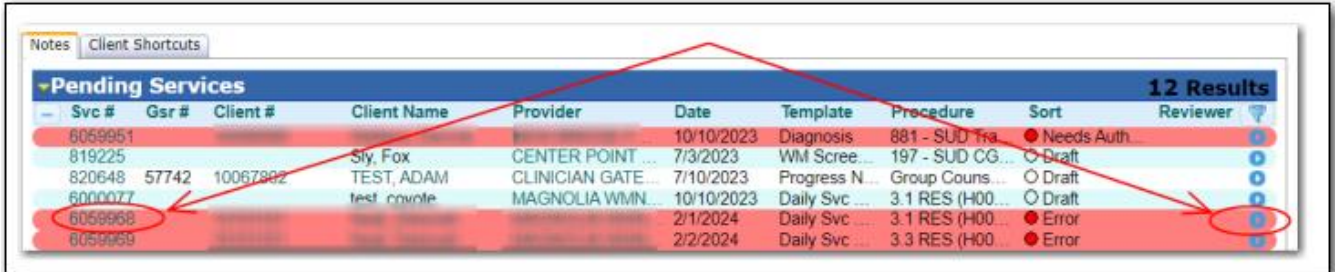
1. CG User finalizes the service
2. Finalized CG services are processed nightly for export to SmartCare
3. Services are added to a staging table and checked for errors
4. Services passing the validation checks are transferred to SmartCare.
5. Services with errors are tagged with their error message.
6. Services with errors are reverted to Draft Status in CG and returned to the Pending Services list in CG with an Error icon attached. Departed Staff notes are also sent to the assigned supervisor.
7. When viewing the note the error message is displayed.

Example of what an Errored note will look like when is returned back to Clinicians Gateway.

Pending Services										12 Results
Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer	
6059951					10/10/2023	Diagnosis	881 - SUD Tra	Needs Auth		
819225			Sly, Fox	CENTER POINT	7/3/2023	WM Scree	197 - SUD CG	Draft		
820648	57742	10067802	TEST, ADAM	CLINICIAN GATE	7/10/2023	Progress N...	Group Couns	Draft		
6000077			test counte		10/10/2023	Daily Svc	3.1 RES (H00	Draft		
6059968					2/1/2024	Daily Svc	3.1 RES (H00	Error		
6059969					2/2/2024	Daily Svc	3.3 RES (H00	Error		
6059970					2/3/2024	Daily Svc	3.5 RES (H00	Error		
6059971					2/3/2024	Daily Svc	3.5 RES (H00	Error		
6058794					2/15/2024	Progress N...	OS (H0049) S...	Draft		
6059994					3/1/2024	Indirect	OS (673) Scre	Error		
6059952		10087955	TEST, GANDALF		4/4/2024	Walk-Ins o...		Review	Peterso...	
6059955					4/12/2024	Progress N...	797 - CaWork...	Draft		

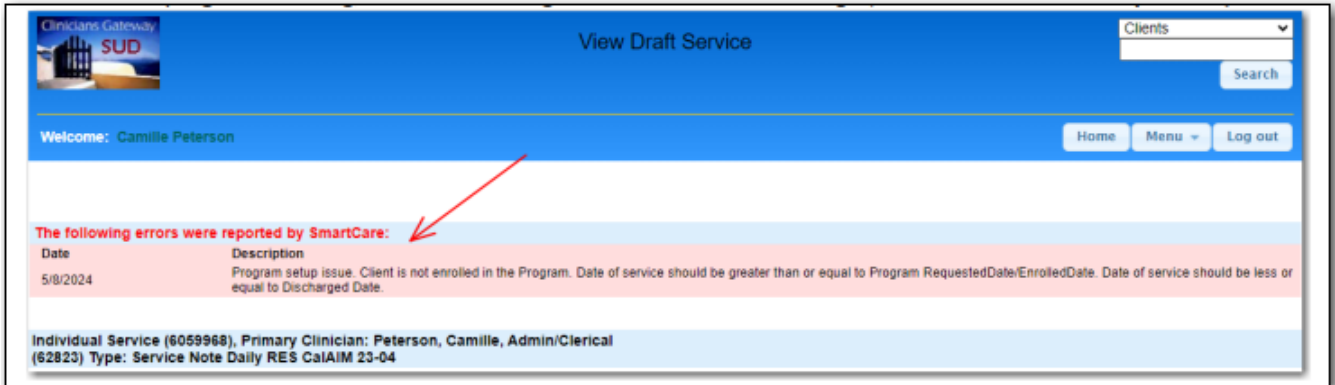
# Fixing Errored Notes

1. To see the error message and work on the note, click on the Service # or blue button.



Pending Services										12 Results
Svc #	Gsr #	Client #	Client Name	Provider	Date	Template	Procedure	Sort	Reviewer	
8059951					10/10/2023	Diagnosis	881 - SUD Tra	Needs Auth		
819225			Sly, Fox	CENTER POINT ...	7/3/2023	WM Scree...	197 - SUD CG...	Draft		
820648	57742	10067892	TEST, ADAM	CLINICIAN GATE ...	7/10/2023	Progress N...	Group Couns ...	Draft		
6000077			test couole	MAGNOLIA WMN...	10/10/2023	Daily Svc ...	3.1 RES (H00...	Draft		
6059968					2/1/2024	Daily Svc ...	3.1 RES (H00...	Error		
6059969					2/2/2024	Daily Svc ...	3.3 RES (H00...	Error		

2. The errors are displayed at the top of the note on the View Draft Service Screen. In this example, the client is not enrolled in the program on the note, on the date of the service on the note. In this example, you would research whether the program is wrong, the service date is wrong or the enrollment is wrong. (CG or SmartCare errors possible)



View Draft Service

Welcome: Camille Peterson

The following errors were reported by SmartCare:

Date	Description
5/8/2024	Program setup issue. Client is not enrolled in the Program. Date of service should be greater than or equal to Program RequestedDate/EnrolledDate. Date of service should be less or equal to Discharged Date.

Individual Service (6059968), Primary Clinician: Peterson, Camille, Admin/Clerical (62823) Type: Service Note Daily RES CalAIM 23-04

3. To work on the note, click the Edit Service Button at the bottom of the Page.



Cancel Default Summary Custom Summary Print Spell Check Delete Service

Edit Service Archive Approve Addendum

**The following errors were reported by SmartCare:**

Date	Description
5/8/2024	Program setup issue. Client is not enrolled in the Program. Date of service should be greater than or equal to Program RequestedDate/EnrolledDate. Date of service should be less or equal to Discharged Date

Service #: 6059868 Title: Service Note Daily RES CalAIM 23-04 Potential Harm: (Select One)

Service date: 02/01/2024

Client opened: 4/4/2023

UBI review date:

Plan due date:

Client: [Number] [Last Name] [First Name] [X] [...]

Procedures: 3.1 RES (H0019) Residential Day

Service Location: Residential Substance Abuse Facility

Mode of Delivery: Face-to-face

Med. Compliant: Yes Side Effects: No

Emergency?  Pregnant/Post-Partum?

Principal Diagnosis: F10.20 Alcohol dependence, uncomplicated

**Billing time**

Primary Clinician:

Provider: MAGNOLIA WMNS REC RES ADLT OAK

**Check the Provider, the service date and the Client Opened date**

For this particular example, check the Provider (Program) and make sure the client is enrolled in the program in SmartCare.

Login to SmartCare, lookup the client, go to Programs for this client and make sure the client is enrolled in the program: in this example Magnolia WMNS Rec RES ADLT OAK and service date of 4/4/23 in Clinicians Gateway is after the enrollment date for this program. You can see Enrollment date in Smartcare 09/22/2023

County of Alameda | 06/21/2023

SmartCare

Programs (9)

All Programs All S Other Apply Filter

Program Name	Status	Enrolled	Discharged	Assigned Staff	Primary	Last DOS	Next DOS
SECOND CHANCE TRI ...	Enrolled	07/18/2024			No		
SECOND CHANCE TRI ...	Discharged	03/29/2024	07/17/2024		No	03/29/2024 12:00 AM	
DRUG COURT OAKLAN...	Enrolled	10/13/2023			Yes		
MAGNOLIA WMNS REC...	Enrolled	09/22/2023			No	03/20/2024 12:00 AM	
MAGNOLIA WM REC O...	Enrolled	09/22/2023			Yes	03/19/2024 12:00 AM	
CENTER POINT KEARN...	Enrolled	09/14/2023			Yes	10/31/2023 12:00 AM	
CENTER POINT FREM...	Discharged	09/14/2023	09/14/2023		No		
CENTER POINT CJCM ...	Discharged	05/12/2023	06/12/2023		Yes		
ADULT FORENSIC BEH...	Discharged	05/11/2023	05/24/2023		No		

Client enrolled in 9 programs and the enrollment date. Make sure date of Service in CG is within this enrollment date.

When corrections have been made, Finalize the note again via the Finalize button or Daily Approval (Staff Log).

Possible Validation errors and courses of action:

Validation Error messages - User Friendly	Possible Courses of Action
Duration cannot be negative.	Add time for primary procedure code duration
Duration cannot be zero.	Add time for primary procedure code duration
Duplicate Service Exists.	Check for duplicate service, verify date and procedure on note
Duration DateTimeIn should not be greater than DateTimeOut.	Do not publish - should never happen
ClientId is Inactive/Deleted/Merged	Check SmartCare current client ID #, update note
Program setup issue. Client not enrolled in program on date of service.	Check enrollment dates and programs in SmartCare
ProgramId is Inactive/Deleted.	Check program on note for currently active program or contact IS Support to escalate to BBS Data Integrity Unit
Client is not enrolled in the Program.	Check enrollment dates and programs in SmartCare

Clinician not authorized in the Program	Contact IS Support to research if program is assigned to the staff
Procedure Code not authorized in the Program	Contact IS Support to report to BBS Data Integrity Unit
Date of service should be greater than or equal to Program Enrolled Date.	Check enrollment dates and programs in SmartCare, update note or enrollments as needed
Date of service should be less or equal to Discharged Date.	Check enrollment dates and programs in SmartCare, update note or enrollments as needed
Procedure Code not allowed for this Program on this date.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Procedure Code setup issue.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
ProcedureCodeId is Inactive/Deleted.	Refer to the ACBHD QA list of allowed procedure codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Procedure Code not authorized in the Program	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Procedure Code not allowed for this Program on this date.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit

Procedure Code not allowed for this Staff Licensure.	Refer to the ACBHD QA list of allowed procedure codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Duration should be in between Procedure Codes Min and Max Values.	Refer to the ACBHD QA list of allowed procedure codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit

Diagnosis Code is Missing	Add Diagnosis Code to service note
---------------------------	------------------------------------

**Validation Error Messages**

**Possible Courses of Action**

Location not allowed for this Procedure.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
LocationId is Inactive/Deleted.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Please notify IS Helpdesk to correct mapping for Place of Service for this Location.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Location not allowed for this Program.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Clinician is Inactive/Deleted.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Contact IS Helpdesk to research Clinician setup	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
ICD10Code is missing.	Add ICD-10 Dx code to note
DSMV Code is not setup for this ICD-10 Code.	Contact IS Support to research and possibly escalate to System Applications Unit
DSMV Code is not available with Billable Flag setup for this ICD-10 Code. Please contact the IS Helpdesk.	Contact IS Support to research and possibly escalate to System Applications Unit
ICD-10 Code is not allowed for the Fiscal Year of Service.	Refer to the ACBHD QA list of allowed diagnosis codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Invalid ICD10Code/DSMVCodeId.	Refer to the ACBHD QA list of allowed diagnosis codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Invalid DSMVCodeId.	Refer to the ACBHD QA list of allowed diagnosis codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
ICD10Code2 is missing.	Add second diagnosis code for test results to Recovery Incentives note
DSMV Code is not setup for the additional ICD-10 Code.	Recovery Incentives 2nd Dx code message. Contact IS Support to research and possibly escalate to System Applications Unit
DSMV Code is not available with Billable Flag setup for the additional ICD-10 Code. Please contact IS Helpdesk	Recovery Incentives 2nd Dx code message. Contact IS Support to research and possibly escalate to System Applications Unit
Additional ICD-10 Code is not allowed for the Fiscal Year of Service.	Recovery Incentives 2nd Dx code message. Refer to the ACBHD QA list of allowed diagnosis codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Invalid ICD10Code2/DSMVCodeId2.	Recovery Incentives 2nd Dx code message. Refer to the ACBHD QA list of allowed diagnosis codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Invalid DSMVCodeId2.	Recovery Incentives 2nd Dx code message. Refer to the ACBHD QA list of allowed diagnosis codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
Additional ICD-10 Code exists, but primary ICD-10 is missing.	Recovery Incentives Dx code message. Add primary Dx code to note. If needed, contact IS Support to research and possibly escalate to System Applications Unit



**Validation Error Messages****Possible Courses of Action**

Add-On Procedure Code 1 is not allowed with the Primary Procedure Code.	Contact IS Support to research and possibly escalate to BBS Data Integrity Unit
AddOnProcedureCodeStartTime1 is missing.	This is defaulted as the same time as the primary. Should not happen
Add-On Procedure Code duration or unit is missing.	Add duration to Add-on code
AddOnProcedureCodeUnitType1 is missing.	This should not happen. CG defaults the unit type
Add-On Procedure Code 2 is not allowed with the Primary Procedure Code.	Refer to the ACBHD QA list of allowed procedure codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
AddOnProcedureCodeStartTime2 is missing.	This is defaulted as the same time as the primary. Should not happen
Add-On Procedure Code duration or unit is missing.	Add duration to Add-on code
AddOnProcedureCodeUnitType2 is missing.	This should not happen. CG defaults the unit type
Add-On Procedure Code 3 is not allowed with the Primary Procedure Code.	Refer to the ACBHD QA list of allowed procedure codes and update note as needed. If needed, contact IS Support to research and possibly escalate to BBS Data Integrity Unit
AddOnProcedureCodeStartTime3 is missing.	This is defaulted as the same time as the primary. Should not happen
Add-On Procedure Code duration or unit is missing.	Add duration to Add-on code
AddOnProcedureCodeUnitType3 is missing.	This should not happen. CG defaults the unit type

# Administration Tools



# Administration Home Page

The screenshot shows the Administration Home Page with the following elements:

- Header:** "Clinicians Gateway" logo, "Home" text, and a "Clients" dropdown menu with a search button.
- Navigation:** "Welcome:" followed by a blurred name, and buttons for "Home", "Menu", and "Log out".
- Enter New Service:** A section with a "Type of Service" dropdown and a "Select ----" dropdown. Below it are tabs for "Notes", "Client Shortcuts", and "Lab Results (0)".
- Client Shortcuts:** A blue bar with a right-pointing arrow and the text "Client Shortcuts".
- Advanced Search:** A section with dropdowns for "For:" (Clients), "Type" (Any), "Status" (Any), and "Date" (Anytime). It also has a "at provider:" dropdown (Everywhere) and a "Search" button.
- Services Search:** A section with dropdowns for "All", "Service" (Anywhere), and "Rendered for" (Enter client id or name), with a "Search" button.
- Search Services by Date:** A section with the text "Click day to see services performed on that day" and a calendar grid for January, February, and March 2018.
- Clinical Administrator Access:** A blue bar with the text "Search Staff".
- Bottom Search:** A search bar with the text "81163 MOBILE CRISIS RESP PGM MHS AD", a "Anytime" dropdown, and a "Search" button.

- This is your home page
- Either search for client services via the Search functions in the center of the page or through the Global Search in the upper right hand corner (choose Services and enter the client name).
- Search for a report on Clinical Staff by Reporting Unit through Search Staff notes (Finalized, Pending and Draft) at the bottom of the page
- Search for an individual staff person's Staff View page through the Global Search in the upper right corner (choose Staff and enter the staff name)

The screenshot shows the Global Search interface with the following elements:

- Header:** "Home" text and a "Staff" dropdown menu with a search button.
- Navigation:** Buttons for "Home", "Menu", and "Log out".



# Supervisor Tools

## Staff Reports

A **Staff Report by RU** can be generated using provider and time parameters:

Clinical Administrator Access  
Search Staff

Enter Reporting Unit and Time parameter then click Search

9999CG CLINICIAN GATEWAY TEST MHS AD Between 02/01/2018 and 02/28/2018 Search

Administrator Access  
Tools

Anytime  
On  
Between  
After  
Before

Tallies of services by staff are generated:

Staff #	Name	# Services Finalized	Average Interval Finalized	Time Finalized	# Services Pending	Average Interval Pending	Time Pending	# Services Draft
109		0		155:35	0	0	00:00	0
108		7		264:05	0	0	00:00	0
107		1		129:45	0	0	00:00	0
84		0		52:40	0	0	00:00	0
78		0		149:25	0	0	00:00	0
76		1		86:20	0	0	00:00	0
42		0		27:49	0	0	00:00	0
37		3		155:00	0	0	00:00	0
31		1		153:30	0	0	00:00	0

This information can be **pasted into an Excel spreadsheet**.

Clicking on a staff person's name will bring up their **staff view page** that displays their **service notes and statistics**. (Example of staff view page shown in next section)

**Staff Search** can also be done **by the individual staff person** via Global Search to see their notes or statistics by defined times.

Home

Staff

Search

Home Menu Log out

Click on the staff name to bring up the Staff View Page

Search: view all close all

Search Again   Staff

Click the correct Staff Name to view their Staff Page

Staff #	Staff Name	Role	Open Cases	Closed Cases
		User	339	1649
		User	0	0
		User	0	0
		User	9	100
		User	0	74
		User	0	0
		User	0	0
		User	0	0
		User	0	0
		User	0	0
		User	0	0

View: 10 << First < Prev 1 Next > Last >>

## Staff View:

Staff Information for: [Name]

SSN:		License #:		Start date:	
Gender:		License Renew:		End date:	
BirthDate:		License State:		Last Changed On:	
Ethnicity:		Taxonomy:		Record Created On:	
Medicaid PIN:		National Provider Id:			
Medicare PIN:					
DEA Number:					
UPIN:					
CG Code:					
Staff Type:	Unlicensed Worker				
Languages:	English				

▶ **Statistics** Service Dates: 02/28/2018 thru 03/28/2018 All Search

▶ **Daily Approval** Service Date: 03/28/2018 Search

▶ **Procedures** 39 Results

▶ **Providers** 3 Results

▶ **Clients** 0 Result

▶ **Groups** 1 Result

▶ **Draft Service Records** 2 Results

▶ **Pending Service Records** 0 Result

▼ **Finalized Service Records** 12 Results

Service #	Client #	Client Name	Provider	Date	Status	Template	Procedure	Type
1410793	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	3/7/2018	Finalized	Clinician Pro...	581 Plan Development	Individual
1410801	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	3/7/2018	Finalized	Interim Asses...	323 90791 Psychiatric D...	Individual
1410812	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	3/7/2018	Finalized	Clinician Pro...	381 Individual Rehabilita...	Individual
1410765			9999CG - CLINICIAN GAT...	11/27/2017	Finalized	Indirect	680 General Administrati...	Indirect
1410768	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	11/27/2017	Finalized	AIMS	197 CG INFORMATION...	Individual
1410761	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	11/9/2017	Finalized	Adult Assess...	197 CG INFORMATION...	Individual
1410786	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	2/6/2017	Finalized	Clinician Pro...	391 Group Rehabilitation	Group
1410787	75135386	TESTCASE, DAVE	9999CG - CLINICIAN GAT...	2/6/2017	Finalized	Clinician Pro...	391 Group Rehabilitation	Group
1410788	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	2/6/2017	Finalized	Adult Assess...	323 90791 Psychiatric D...	Individual
1410789	75087772	TEST, CINDYTWO	9999CG - CLINICIAN GAT...	2/6/2017	Finalized	Clinician Pro...	324 96151 Behavioral Eval	Individual

View: 10 << First < Prev 1 2 Next > Last >>

Click on the Service # to examine any individual note.

The **Staff View** page has **statistics** that can be calculated according to the date and Provider parameters that you define. It also lists all of the **services** generated by that individual.

▼ Statistics						Service Dates: 03/01/2018 thru 03/07/2018 All		Search
Type of Service	Clinician Role	Number of Services	Average Interval	Time	Time Reporting			
					Enter Estimated Time			
					00:00		Calculate	
					Est. %			
Individual	Primary Clinician	3	-10	05:30				
	Co-Clinician	0	0	00:00				
Group	Primary Clinician	0	0	00:00				
	Co-Clinician	0	0	00:00				
Indirect	Primary Clinician	0	0	00:00				
	<b>Totals:</b>	<b>3</b>	<b>-10</b>	<b>05:30</b>				

**Search and Tag** can be used to assemble sets of notes based on multiple parameters, including Primary Therapist, Types of Notes, Time parameters, etc. Please review [Search and Tag Section](#) on page 33.

Define up to five parameters to narrow your search criteria.

Search for:  Service Records  Prescriptions

Include deleted records in search results

[Select search item] ▼	
[Select search item]	
Client	
Medical Compliance	
Note Status	
Note Text	
Primary therapist	
Procedure	
Record Type	
Reporting Unit	
Service Date	
Service duration	
Side Effects	
Treatment Location	



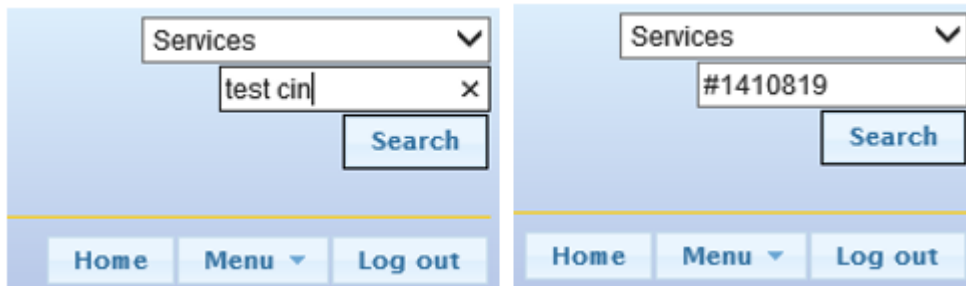


# Change Reviewer Procedure

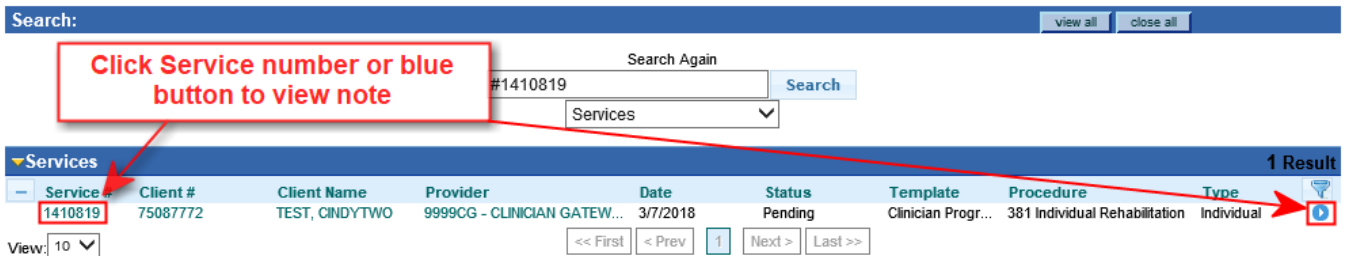
The designated reviewer on a service can be changed by a staff person who has been given the 'Can Review' role in Clinician's Gateway.

The Clinic Manager must first inform System Support which individuals will be given this role. After the role is assigned to that staff person, they may change the reviewer to any available reviewer in the Reporting Unit.

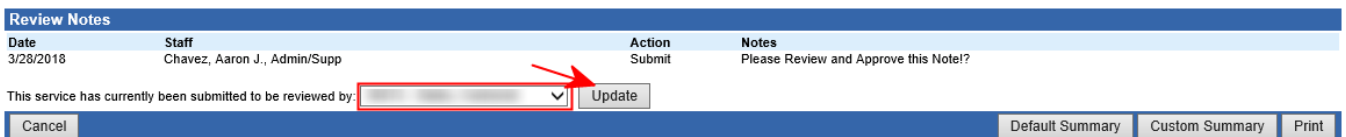
1. Locate the service. You can search for the client's services by client name or service # (#xxxxxxx) if known, or search for the Staff person's Pending services.



2. View the note by clicking the Service number or the blue 'Action button'.



3. At the bottom of the Service Note, choose a new reviewer from the list. Click Update.



The service will be transferred from the original reviewer's Home Page Pending to the replacement reviewer's Home Page Pending list.

# Managing Reports

# Individual Staff Log

## Report Description


This shows all services entered into Clinician's Gateway for the clinician, for the day that is requested.

## How to Get the Report

Each Clinician using Clinician's Gateway will generate their own report as they Finalize Services

## How to Use the Report

Review and compare this log to SmartCare services list for accuracy.

										
<a href="#">Home</a>   <a href="#">Help</a>   <a href="#">Log Out</a>										
<h2>Individual Staff Log</h2>										
<b>Service Date:</b> 3/7/2018										
Svc #	Type	RU	Client #	Client Name	Procedure	Time H:M	Grp Ct	Loc	Rec.	Flags
3265360	Group	9999CG CLINICIAN GATEWAY TEST MHS AD	75087772	TEST CINDYTWO	391 Group Rehabilitation	00:38	2	Office		
3265359	Group	9999CG CLINICIAN GATEWAY TEST MHS AD	75226968	TEST CINDY	391 Group Rehabilitation	00:38	2	Office		
3265354	Indiv.	9999CG CLINICIAN GATEWAY TEST MHS AD	75087772	TEST CINDYTWO	323 90791 Psychiatric Diag Eval	03:00	1	Office		
3265349	Indiv.	9999CG CLINICIAN GATEWAY TEST MHS AD	75087772	TEST CINDYTWO	324 96151 Behavioral Eval	00:45	1	Office		
3265343	Indirect	9999CG CLINICIAN GATEWAY TEST MHS AD			680 General Administration	02:15	1	Office	05	
<b>5 service records on 3/7/2018 for a total time of</b>						<b>07:15</b>				
I hereby certify, under penalty of perjury, that the information contained in this document is accurate and free from fraudulent claiming.										
3/7/2018										

# SmartCare Services List

## Report Description

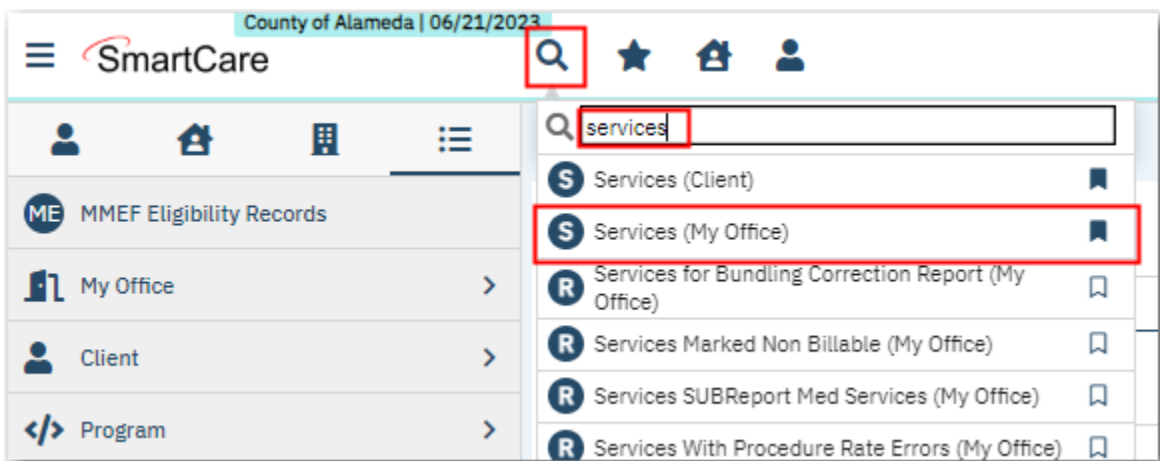
Lists services that have either transferred from CG to SmartCare or (if applicable) were entered directly into SmartCare.

## How to Get the Report

In SmartCare, click on the magnifying glass icon and search for “Services (My Office)”. Set any filters as necessary (service date(s), clinician, program, client, etc) and click “Apply Filter”.

## How to Use the Report

Review the list for accuracy. The list is intended as a data entry management tool to assist in making sure all services performed in a clinic are being entered on a timely basis. If service entry is abnormally low, an audit of the data collection and service entry process may be needed. If there is incorrect information, episode, and service updating may be required. Compare this list to the daily Individual Staff Logs from Clinicians Gateway. All services on the daily Individual Staff Log should appear on the list. If services are missing in SmartCare, confer with the clinician to determine if the note was rejected by SmartCare and returned to CG.



Services (197)

Include Services created from Cl...  Only show Non-Billable Services  Show Only Active Clients

In this example I've set filters for a specific program and a range of service dates (DOS)

Select: All, All on Page, None

Client Name	DOS	Units	Charge (Rate Id)	Procedure	Status	Clinician	Program	Location
<input type="checkbox"/>	09/19/2023 5:35 PM	1.00	110.63 (7...	T1017 Targeted Case...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 5:20 PM	6.00	663.78 (7...	T1017 ICC (KATIE A)...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 4:00 PM	1.00	442.54 (6...	90837 Psychotherap...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/19/2023 4:00 PM	1.00	110.63 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/19/2023 4:00 PM	1.00	110.63 (9...	90791 Psychiatric Di...	Complete		A BETTER W...	Telehealth (P...
<input type="checkbox"/>	09/19/2023 4:00 PM	3.00	331.89 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Telehealth (P...
<input type="checkbox"/>	09/19/2023 1:25 PM	2.00	221.26 (6...	H2017 Psychosocial ...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 1:05 PM	5.00	416.20 (6...	H2017 Psychosocial ...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/19/2023 1:05 PM	1.00	442.54 (6...	90837 Psychotherap...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/19/2023 1:05 PM	1.00	110.63 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/19/2023 1:00 PM	2.00	221.26 (6...	H2017 Psychosocial ...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 11:40 AM	2.00	221.26 (9...	H0032 Plan Develop...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 11:00 AM	4.00	442.52 (9...	H0032 Plan Develop...	Complete		A BETTER W...	Telehealth (P...
<input type="checkbox"/>	09/19/2023 10:05 AM	1.00	110.63 (9...	90791 Psychiatric Di...	Complete		A BETTER W...	Other Comm...
<input type="checkbox"/>	09/19/2023 10:05 AM	5.00	553.15 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Other Comm...
<input type="checkbox"/>	09/19/2023 10:00 AM	2.00	221.26 (6...	H2017 Psychosocial ...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 9:00 AM	1.00	110.63 (9...	H0032 Plan Develop...	Complete		A BETTER W...	Office (Prima...
<input type="checkbox"/>	09/19/2023 9:00 AM	1.00	110.63 (9...	90791 Psychiatric Di...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 9:00 AM	1.00	110.63 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/19/2023 9:00 AM	7.00	774.41 (7...	T1017 Targeted Case...	Complete		A BETTER W...	Phone (Patie...
<input type="checkbox"/>	09/18/2023 6:05 PM	1.00	110.63 (9...	H0032 Plan Develop...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/18/2023 5:00 PM	1.00	368.78 (7...	90847 Family PsychT...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/18/2023 5:00 PM	1.00	110.63 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Patient's Ho...
<input type="checkbox"/>	09/18/2023 4:45 PM	1.00	368.78 (7...	90847 Family PsychT...	Complete		A BETTER W...	Telehealth (P...
<input type="checkbox"/>	09/18/2023 4:45 PM	3.00	331.89 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Telehealth (P...
<input type="checkbox"/>	09/18/2023 4:40 PM	1.00	110.63 (9...	90791 Psychiatric Di...	Complete		A BETTER W...	Office (Prima...
<input type="checkbox"/>	09/18/2023 4:40 PM	5.00	553.15 (6...	G2212 Prolonged E/...	Complete		A BETTER W...	Office (Prima...

If you have any questions or problems operating the Clinician’s Gateway program, please do not hesitate to call our Help Desk, which is available from 8:30 AM until 5:00 PM Monday through Friday.

<b>Help Desk Telephone:</b>	<b>510-817-0076</b>
<b>E-mail: (7:30AM-4PM)</b>	<b>HCSASupport@acgov.org</b>
<b>Fax Number:</b>	<b>(510) 567-8161</b>
<b>County Tie Line Fax:</b>	<b>38161</b>