

May 2025

QRTips

Behavioral Health Services
Quality Management Services
Quality Assurance & Quality Improvement Division

NOW AVAILABLE:

Combined Informed & Telehealth Consent

QMS has combined the Informed Consent and Telehealth Consent forms to include the required verbiage into one consent form!!! This updated consent includes recent updates to telehealth services, including the right to have non-medical transportation services available to the member for accessing in-person services instead of telehealth. Since the new form only has one signature line for both informed consent and telehealth consent, it now includes a check box that allows the member to decline telehealth while still consenting to behavioral health services. This form is also translated into our threshold languages to meet the individualized needs of your client.

Contract Providers: Please review the updated verbiage, especially around telehealth requirements. Contract providers may combine the consent forms if the new required verbiage is included in your consent form, or you are welcome to keep the consent forms separate. Please click [here](#) to access the new *Informed Consent for Services and Telehealth Consent form*.

Reminder to Service Chiefs & Supervisors:

Please submit monthly program and provider updates / changes for the Provider Directory and send to:

BHPPProviderDirectory@ochca.com and BHSIRISLiaison@ochca.com.

Review QRTips in staff meetings and include in your meeting minutes.

Disclaimer: The Quality Management Services (QMS) Quality Assurance (QA) and Quality Improvement (QI) Division develops and distributes the monthly QRTips newsletter to all MHP providers as a tool to assist with various QA/QI regulatory requirements. It is NOT an all-encompassing document. Programs and providers are responsible for ensuring their understanding and adherence with all local, state, and federal regulatory requirements.

TRAININGS & MEETINGS

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AOA Online Trainings

AOABH Annual Provider Training

MHP AOA QI Coordinators' Meeting

Teams Meeting: TBD
10:30- 11:30am

CYS Online Trainings

CYPBH Integrated Annual Provider Training

MHP CYS QI Coordinators' Meeting

Teams Meeting: 5/8/2025
10:00-11:30am

More trainings on [CYS ST website](#)

HELPFUL LINKS

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[QMS AOA Support Team](#)

[QMS CYS Support Team](#)

[BHS Electronic Health Record](#)

[Medi-Cal Certification](#)

MCST OVERSIGHT

- EXPIRED LICENSES, WAIVERS, CERTIFICATIONS AND REGISTRATIONS
- NOTICE OF ADVERSE BENEFIT DETERMINATION (NOABDS)
- APPEAL/EXPEDITED APPEAL/STATE FAIR HEARINGS
- CHANGE OF PROVIDER/2ND OPINIONS (MHP/DMC-ODS)
- CAL-OPTIMA CREDENTIALING (AOA COUNTY CLINICS)
- SUPERVISION REPORTING FORMS & REQUIREMENTS
- GRIEVANCES & INVESTIGATIONS
- COUNTY CREDENTIALING
- ACCESS LOGS
- MHP & DMC-ODS PROVIDER DIRECTORY
- PAVE ENROLLMENT (MHP PROVIDERS ONLY)

REMINDERS, ANNOUNCEMENTS & UPDATES

JUST ARRIVED



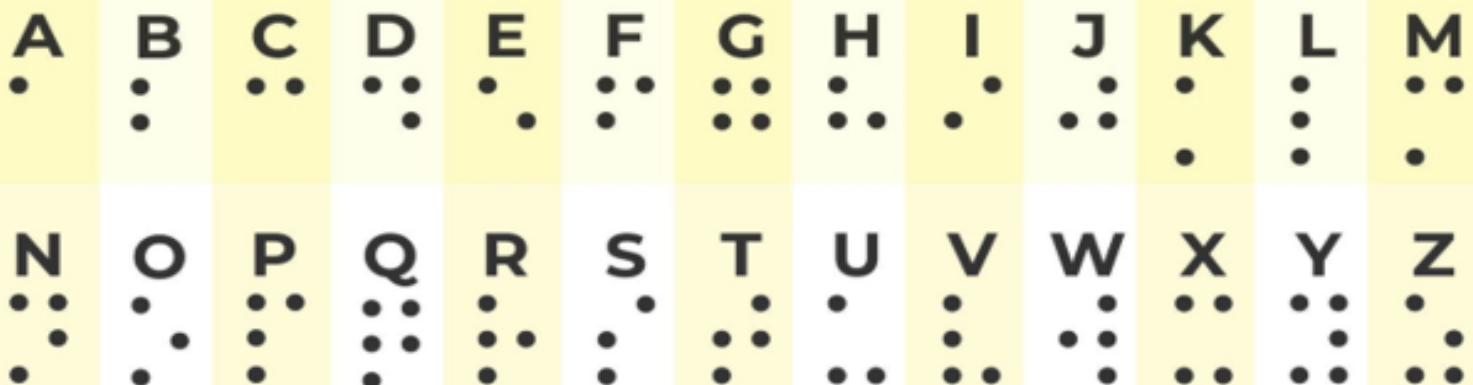
BRILLE MATERIALS HAS FINALLY ARRIVED!!!

The Department of Health Care Services (DHCS) requires the Behavioral Health Plan (BHP) to accommodate the communication needs of all members and be prepared to facilitate alternative format request for Braille, audio format, large print, accessible electronic format, and other auxiliary aids and services that may be appropriate.

The County has received the Braille grievance informing materials to meet the requirement for the:

- Grievance & Appeal Form
- Grievance & Appeal Poster (MHP)
- Grievance & Appeal Poster (DMC-ODS)

More information will be communicated to County and Contracted Programs via e-mail from BHPPProviderDirectory@ochca.com with further instructions on disseminating the materials.



REMINDERS, ANNOUNCEMENTS & UPDATES (CONTINUED)

SUPERVISION REPORTING FORMS

There are four types of supervision reporting forms the MCST oversees. Below is a grid listing all the provider types that must submit one of the required supervision reporting forms below:

- ✓ Clinician Supervision Reporting Form
- ✓ Counselor Supervision Reporting Form
- ✓ Medical Supervision Reporting Form
- ✓ Qualified Provider Supervision Form

SUPERVISION REPORTING FORMS



LIST OF PROVIDERS REQUIRED TO SUBMIT A SUPERVISION REPORTING FORM

CLINICIANS	COUNSELORS	MEDICAL PROVIDERS	QUALIFIED PROVIDERS
<ul style="list-style-type: none"> Registered ASW Registered MFT Registered PCC Registered/Walvered Psychologist Psychologist Clinical Trainee Clinical Social Worker Clinical Trainee Marriage & Family Therapist Clinical Trainee Professional Counselor Clinical Trainee Associate Applicant – BBS 90 Day Rule 	<ul style="list-style-type: none"> Registered Counselors 	<ul style="list-style-type: none"> Nurse Practitioner Nurse Specialist Trainee Registered Nurse Trainee Vocational Nurse Trainee Psychiatric Technician Trainee Occupational Therapist Trainee Occupational Therapist Assistant Pharmacist Trainee Physician Assistant Trainee Physician Assistant Medical Assistant Licensed Vocational Nurse Licensed Practical Nurse Licensed Psychiatric Technician Certified Nurse Assistant 	<ul style="list-style-type: none"> Mental Health Rehabilitation Specialist Other Qualified Provider I Other Qualified Provider II Certified Peer Support Specialist

REMINDER

- All required providers must submit the supervision form to the MCST upon commencement (e.g., new hire).
- Any status change requires an updated form to be submitted to the MCST (e.g., separation, change in supervisor, etc.).
- Supervision must be provided regularly.
- Provider's that require supervision are **prohibited** from delivering any Medi-Cal covered services if they have **NOT** submitted their supervision reporting form.

REMINDERS, ANNOUNCEMENTS & UPDATES (CONTINUED)



MCST GENERAL E-MAIL BOXES

QMS has renamed all the general e-mail addresses and created new ones to enhance the communication and efficiency with serving our providers and members. Please begin using the e-mail addresses listed below for questions and documents to be sent to the appropriate mailboxes. The old e-mail addresses will automatically be forwarded to the new ones for a short period of time. Please update our contact information, as soon as possible.

MCST MAILBOXES	OVERSEES
BHPGrievanceNOABD@ochca.com	Grievances & Investigations; Appeals/Expedited Appeals; State Fair Hearings; NOABDs; MCST Training Requests
BHPManagedCare@ochca.com	Access Logs, Access Log Entry Errors & Corrections; Change of Provider/2 nd Opinion; County Credentialing; Cal-Optima Credentialing (AOA County Clinics); Expired Licenses, Waivers, Registrations & Certifications; PAVE (MHP Only); Personnel Action Notification (PAN)
new BHPProviderDirectory@ochca.com	Provider Directory Notifications; Provider Directory submission for SMHS and DMC-ODS programs by the 15 th of every month.
new BHPSupervisionForms@ochca.com	Submission of the Supervision Reporting Forms for Clinicians, Counselor, Medical Professionals and Qualified Providers; Submission of updated Supervision Forms for Change of Supervisor, Separation, License/Registration Change, etc.

CAL-OPTIMA CREDENTIALING FOR AOA COUNTY CLINIC PROVIDERS ONLY

- OneCare and OneCare Connect are CalOptima's two Medicare health plans under the Certified Medicare Advantage Plans (CMAP), and the BHP has many members who have OneCare or OneCare Connect, with secondary Medi-Cal. OneCare and OneCare Connect are the only private insurances that are identified as "in network" in the BHP.
- In 2024, the legislation allowed LPCCs and LMFTs to bill Medicare directly for mental health diagnosis and treatment services. The MCST will be reaching out to the AOA county providers and Service Chiefs to begin the CalOptima credentialing process for the existing and new LMFT and LPCC providers.

REMINDERS, ANNOUNCEMENTS & UPDATES (CONTINUED)

MCST TRAININGS ARE AVAILABLE UPON REQUEST

- **NEW** programs are required to schedule a full training to comply with the MCST oversight and DHCS requirements. It is recommended to have the Directors, Managers, Supervisors and Clinical Staff participate in the training to ensure those requirements are met and implemented. Contact the MCST to schedule the training at least a month prior to delivering Medi-Cal covered services.
- If you and your staff would like a refresher on a specific topic or a full training about MCST's oversight please e-mail the Health Services Administrator, Annette Tran at anntran@ochca.com and the Service Chief II, Catherine Shreenan at cshreenan@ochca.com.



AVAILABLE
NOW

MONTHLY MCST TRAININGS – NOW AVAILABLE

MCST is offering open training sessions for new and existing providers. The 3-hour training is on NOABDs, Grievances, Appeals, State Fair Hearings, 2nd Opinion/Change of Provider, Supervision Reporting Forms and Access Logs.

Please e-mail BHPGrievanceNOABD@ochca.com with Subject Line: MCST Training for MHP or DMC-ODS and a MCST representative will send you an e-mail invitation to attend the training via Microsoft Teams.

2nd Tuesdays of the Month @ 1 p.m. MCST Training (MHP)
4th Tuesdays of the Month @ 1 p.m. MCST Training (DMC-ODS)

GRIEVANCES, APPEALS, STATE FAIR HEARINGS, NOABDS, 2ND OPINION AND CHANGE OF PROVIDER

Leads: Esmi Carroll, LCSW & Jennifer Fernandez, LCSW

SUPERVISION REPORTING FORMS

Lead: Esmi Carroll, LCSW

ACCESS LOGS

Lead: Jennifer Fernandez, LCSW

PAVE ENROLLMENT FOR MHP

Leads: Araceli Cueva & Elizabeth "Liz" Fraga (Staff Specialists)

CREDENTIALING AND PROVIDER DIRECTORY

Credentialing Lead: Elaine Estrada, LCSW & Ashley Cortez, LCSW
Cal Optima Credentialing Lead: Araceli Cueva & Elizabeth "Liz" Fraga
Provider Directory Leads: Esther Chung & Joanne Pham (Office Specialists)

PROVIDER TRANSACTION ACCESS NUMBER (PTAN)

Lead: Boris Nieto, Staff Assistant

COMPLIANCE INVESTIGATIONS

Lead: Catherine Shreenan, LMFT & Annette Tran, LCSW



CONTACT INFORMATION

400 W. Civic Center Drive., 4th floor
Santa Ana, CA 92701
(714) 834-5601 FAX: (714) 480-0775

E-MAIL ADDRESSES

BHPGrievanceNOABD@ochca.com
BHPManagedCare@ochca.com
BHPProviderDirectory@ochca.com
BHPSupervisionForms@ochca.com

MCST ADMINISTRATORS

Annette Tran, LCSW
Health Services Administrator

Catherine Shreenan, LMFT
Service Chief II

QMS MAILBOXES

Please email the group mailboxes below to ensure your questions arrive to the correct team rather than to an individual team member who may be on vacation, unexpectedly out of the office or otherwise unavailable.

Group Mail Box	Oversees
BHPGrievanceNOABD@ochca.com	Grievances & Investigations • Appeals / Expedited Appeals • State Fair Hearings • NOABDs • MCST Training Requests
BHPManagedCare@ochca.com	Access Logs • Access Log Errors & Corrections • Change of Provider / 2nd Opinion • County Credentialing • Cal-Optima Credentialing (AOA County Clinics) • Expired Licenses, Waivers, Registrations & Certifications • PAVE (MHP Only)
BHPSupervisionForms@ochca.com	Submission of Supervision Reporting Forms for Clinicians, Counselor, Medical Professionals & Qualified Providers • Submission of Updated Supervision Forms for Change of Supervisor, Separation, License/Registration Change, etc.
BHPProviderDirectory@ochca.com	Provider Directory submission for SMHS & DMC-ODS programs by the 15 th of every month.
BHSHIM@ochca.com	County-Operated MHP & DMC-ODS Programs Use Related: Centralized Retention of Abuse Reports & Related Documents • Centralized Processing of Client Record Requests and Clinical Document Review & Redaction • Release of Information, ATDs, Restrictions & Revocations • IRIS Scan Types, Scan Cover Sheets & Scan Types Crosswalks • Record Quality Assurance & Correction Activity
BHSIRISLiaison@ochca.com	EHR Support, Design & Maintenance • Add/Delete/Modify Program Organizations • Add/Delete/Maintain All County & Contract Rendering Provider Profiles in IRIS • Register Eligible Clinicians & Doctors with CMS • Assist in Maintaining PTAN Status of Eligible Clinicians & Doctors
BHPNetworkAdequacy@ochca.com	Manage MHP and DMC-ODS 274 Data & Requirements • Support of MHP County & Contract User Interface for 274 Submissions
BHPPTAN@ochca.com	
BHPAOASupport@ochca.com	AOA Documentation Support • CANS / PSC-35 • Medication Monitoring • MHP Chart Reviews • QRTips • Provider Support Program (AOAST only)
BHPCYSSUPPORT@ochca.com	CYS Documentation Support • CANS / PSC-35 • Medication Monitoring • MHP Chart Reviews • QRTips
BHPSUDSupport@ochca.com	SUD Documentation Support • CalOMS (clinical questions) & DATAR • DMC-ODS Reviews • MPF Updates • PAVE (County SUD Clinics)
CalAIMSupport@ochca.com	
BHPBillingSupport@ochca.com	IRIS Billing • Office Support
BHPIDSS@ochca.com	General Questions regarding Certification & Designation
BHPDesignation@ochca.com	Inpatient Involuntary Hold Designation • LPS Facility Designation • Outpatient Involuntary Hold Designation
BHPCertifications@ochca.com	MHP Medi-Cal Certification
BHSInpatient@ochca.com	Inpatient TARs • Hospital Communications • ASO / Carelon Communication
BHPUMCCC@ochca.com	Utilization management of Out of Network (and in network) complex care coordination. Typically for ECT, TMS, Eating disorders