July 2026

QRTips

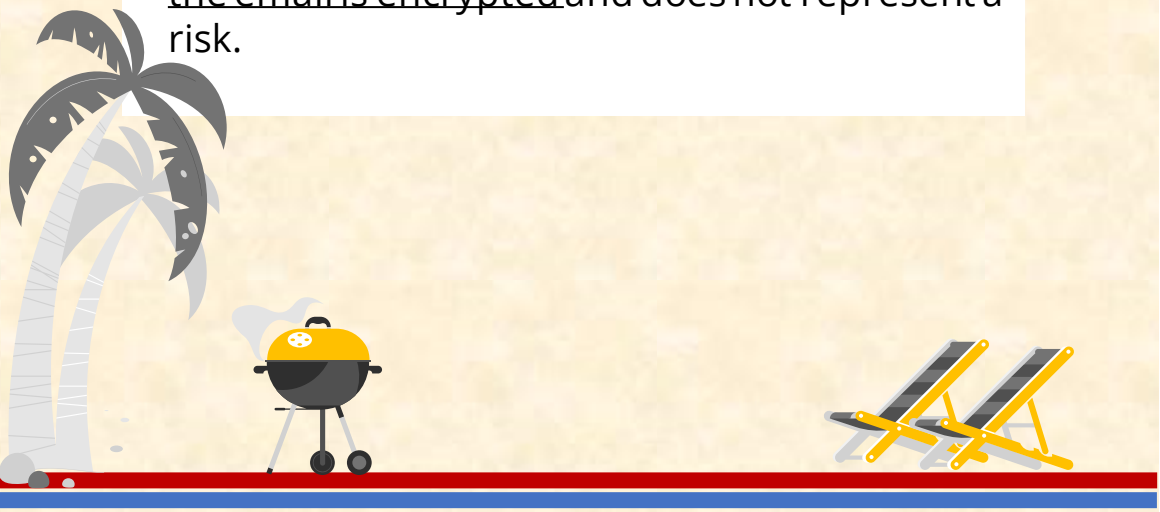
Behavioral Health Services
Quality Management Services

⚠ Reminder ⚠

Email subject lines are not encrypted. Clients' names, other personally identifiable information (PII) including client's initials, or other protected health information (PHI) should not be placed in the subject lines of emails.

If you receive an email with a client name in the subject line, please remove the client's name PRIOR to replying or forwarding the email to anyone else.

County: Although our email system is secure internally and the body of an email encrypts when it is sent outside of HCA/BHS, the subject line of the email does not encrypt. Client names or other identifying information in the body of the email is encrypted and does not represent a risk.



TRAININGS & MEETINGS

Online Training:
BHP Annual Provider Training

SMHS QA/QI Coordinators' Meeting

Teams Meeting
7/9/2026
10:00 AM – 12:00 PM

SMHS Documentation Office Hours

Teams Meeting
1st Thursday
at 10:00 AM – 10:50 AM
&
3rd Wednesday
at 3:00 PM – 3:50 PM
of every month

Email
SMHSClinicalRecords@ochca.com
for invitation

Helpful Links:

QMS Support Team
TATS Training Request Form
BHS EHR Blog Posts
Medi-Cal Certification

Justice Involved (JI) Warm Linkage Codes

(Does not apply to JI Initiative providers working in correctional facilities)

County and county-contracted behavioral health programs may bill Short-Doyle Medi-Cal for pre-release JI Behavioral Health Linkage services to JI clients who are incarcerated. These clients must be identified as JI clients with an activated JI aid code. Billing standard outpatient specialty mental health services (SMHS) to an incarcerated individual who has not been identified as a JI client is NOT billable.

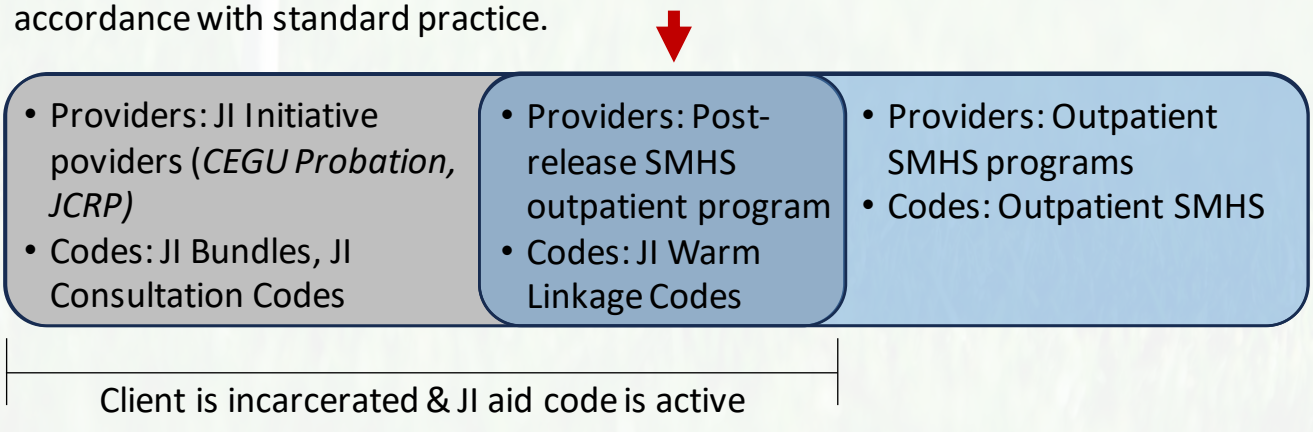
Behavioral Health Linkages aim to facilitate the initiation or continuation of behavioral health treatment once individuals are released to the community. These services include ensuring coordination, information sharing of care plans/transition plans, scheduling post-release appointments, and clinical consultations to facilitate professional-to-professional clinical handoffs.

Allowable services are indicated on the SMHS table with a "Yes" in the column labeled "JI Warm Linkage Code?" A list of allowable services has also been created and uploaded to the County's Payment Reform Resources page. If the Behavioral Health Linkage service was provided in person, please include modifier QJ.

Important Reminders

- Episode of care (EOC) must be opened by the post-release provider and consent for services must be obtained from the JI client prior to billing services.
- JI Warm Linkage codes are only billable when provided to a JI client.
- Document the Behavioral Health Linkage service, which JI Initiative provider you had contact with, and confirmation that the client was an identified JI client.
- Diagnosis codes are critical in understanding outcomes from the JI Reentry Initiative. Therefore, ICD-10-CM diagnosis codes are required to be billed on claims.

Upon the JI client's release, the post-release provider will assume the role of outpatient provider and deliver Specialty Mental Health Services (SMHS) in accordance with standard practice.



HEDIS FUH

FOOD FOR THOUGHT

DID YOU KNOW?

- Suicide is the second leading cause of death among individuals aged 10–34, making post-hospitalization follow-up critical for safety. (NCQA)
- Nearly 50% of patients hospitalized for mental illness do not receive timely follow-up care, increasing risk for relapse and readmission. (NCQA)
- Patients who receive a mental health follow-up within 7 days of discharge have significantly lower rates of readmission and better treatment adherence. (NCQA)

Follow-Up After Hospitalization for Mental Illness 2025-2026

For more information on HEDIS and outcome measures reach out to the HEDIS POM Team via email at QISystems@ochca.com

Scan QR Code for full
FUH Training Module
You will be prompted to register your email in Articulate the first time only.

https://art-661759-3944.reach360.com/share/course/6ac75dd1-a700-4e3a-a0f0-7423f6d845b1





CHIYO MATSUBAYASHI | VERONICA DEFERNANDEZ | DIANE MARTIN | CECE MARTINEZ | SUSIE CHOI

MANAGED CARE SUPPORT TEAM

MCST OVERSIGHT

- EXPIRED LICENSES, WAIVERS, CERTIFICATIONS AND REGISTRATIONS
- NOTICE OF ADVERSE BENEFIT DETERMINATION (NOABDS)
- INFORMING MATERIALS, GRIEVANCES & INVESTIGATIONS
- APPEAL/EXPEDITED APPEAL/STATE FAIR HEARINGS
- CAL-OPTIMA CREDENTIALING (AOA PTAN COUNTY PROVIDERS)
- SUPERVISION REPORTING FORMS & REQUIREMENTS
- PROFESSIONAL LICENSING WAIVERS
- COUNTY CREDENTIALING/RECREDENTIALING
- ACCESS LOGS
- CHANGE OF PROVIDER/2ND OPINIONS
- PROVIDER DIRECTORY
- PAVE ENROLLMENT (SMHS PROVIDERS ONLY)
- PROVIDER TRANSACTION ACCESS NUMBER (PTAN)

REMINDERS, ANNOUNCEMENTS & UPDATES

PROVIDER DIRECTORY 274 USER INTERFACE

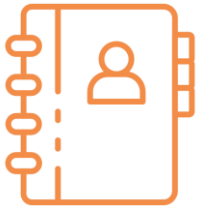
Monthly submissions for the Behavioral Health Plan Provider Directory have transitioned to the 274 User Interface (274 UI) for all providers, effective 11/1/25. This platform aligns with key data elements required by the Department of Health Care Services (DHCS) Network Adequacy Certification Tool (NACT), supporting improved data consistency and streamlined reporting for both the NACT and the Provider Directory.

With this transition, providers and program administrators from county and county-contracted programs are responsible for entering and updating provider data in the 274 UI monthly. Providers will receive automated email notifications on the 1st of each month, prompting them to submit updates. If a submission is not completed by the 15th, another reminder notification will be sent.

Program administrators are to review each provider listed under their assigned site(s) each month for accuracy. If there are no changes, select the "NO CHANGE" button for each provider's profile to confirm your review. This step allows the MCST to verify compliance and ensure administrators are confirming monthly reviews for all assigned providers.

IMPORTANT: If there are no activity of submission for two consecutive months, a Notice of Deficiency may be issued for non-compliance with DHCS BHIN-25-026 requirements.

ALL programs and providers should have access to the 274 UI.
If you still do **NOT** have access to the 274 UI portal, you are to contact BHPNetworkAdequacy@ochca.com immediately!



REMINDERS, ANNOUNCEMENTS & UPDATES (CONTINUED)

MCST TRAININGS WILL BE TRANSITIONING TO ONLINE MODULES FOR:

County Credentialing
NOABDs
Grievances, Appeals & State Fair Hearings
2nd Opinion/Change of Provider,
Supervision Reporting Forms
Access Logs

These trainings will soon be available on the QMS website for all new and existing providers. This transition is part of MCST's effort to streamline processes, increase efficiency, and ensure that essential training resources are easily accessible at any time—both for onboarding and for refresher purposes.

As part of MCST's role in tracking, monitoring and maintaining compliance with DHCS requirements the centralizing trainings in an online format allows MCST to verify participation, assess ongoing compliance, and ensure that all providers receive uniform guidance aligned with DHCS standards.

Each module is expected to take approximately 30–60 minutes to complete, depending on the trainee's pace and level of engagement with the interactive components designed to reinforce the understanding of DHCS mandates.

FOR NOW, THE MONTHLY MCST TRAININGS VIA TEAMS IS STILL AVAILABLE

MCST will continue to offer monthly live training sessions for both new and existing providers until the new online modules are released. These 3-hour sessions will cover NOABDs, Grievances, Appeals, State Fair Hearings, 2nd Opinion/Change of Provider, Supervision Reporting Forms and Access Logs.

To register, please e-mail BHPGrievanceNOABD@ochca.com with Subject Line: MCST Training for SMHS or DMC-ODS. An MCST representative will send you a Microsoft Teams invitation to attend the training session.

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

REMINDERS, ANNOUNCEMENTS & UPDATES (CONTINUED)

CREDENTIALING: CULTURAL COMPTENCY TRAINING CERTIFICATE REQUIREMENT

Cultural Competency Training is a mandatory training required for ALL county and contracted providers.

- ✓ **County** providers are offered two (2) approved courses identified in Eureka, under the Relias platform for staff to choose from:
  - Cultural Humility and Implicit Bias in Behavioral Health OR
  - A Multicultural Approach to Recovery-Oriented Practice
- ✓ **Contracted** providers may complete any recognized Cultural Competency Training to meet this requirement. However, the training must not be specific to only a targeted population (e.g., immigrants, youth, etc.). The training would need to encompass a diversity of cultural competency that serves the Orange County behavioral health population. A strong Cultural Competency Training contains the three (3) components below:
  - Introduces cultural and linguistic competency and highlights the role culture plays in behavioral health.
  - Providers should learn key concepts such as culture, cultural identity, and intersectionality, while building self-awareness about how their own backgrounds influence their work.
  - Helps providers better understand clients' cultural backgrounds and use meaningful strategies to strengthen therapeutic relationships across diverse communities.
- ✓ For more information about Cultural Competency Training and requirements, refer to the hyperlink below for guidance:

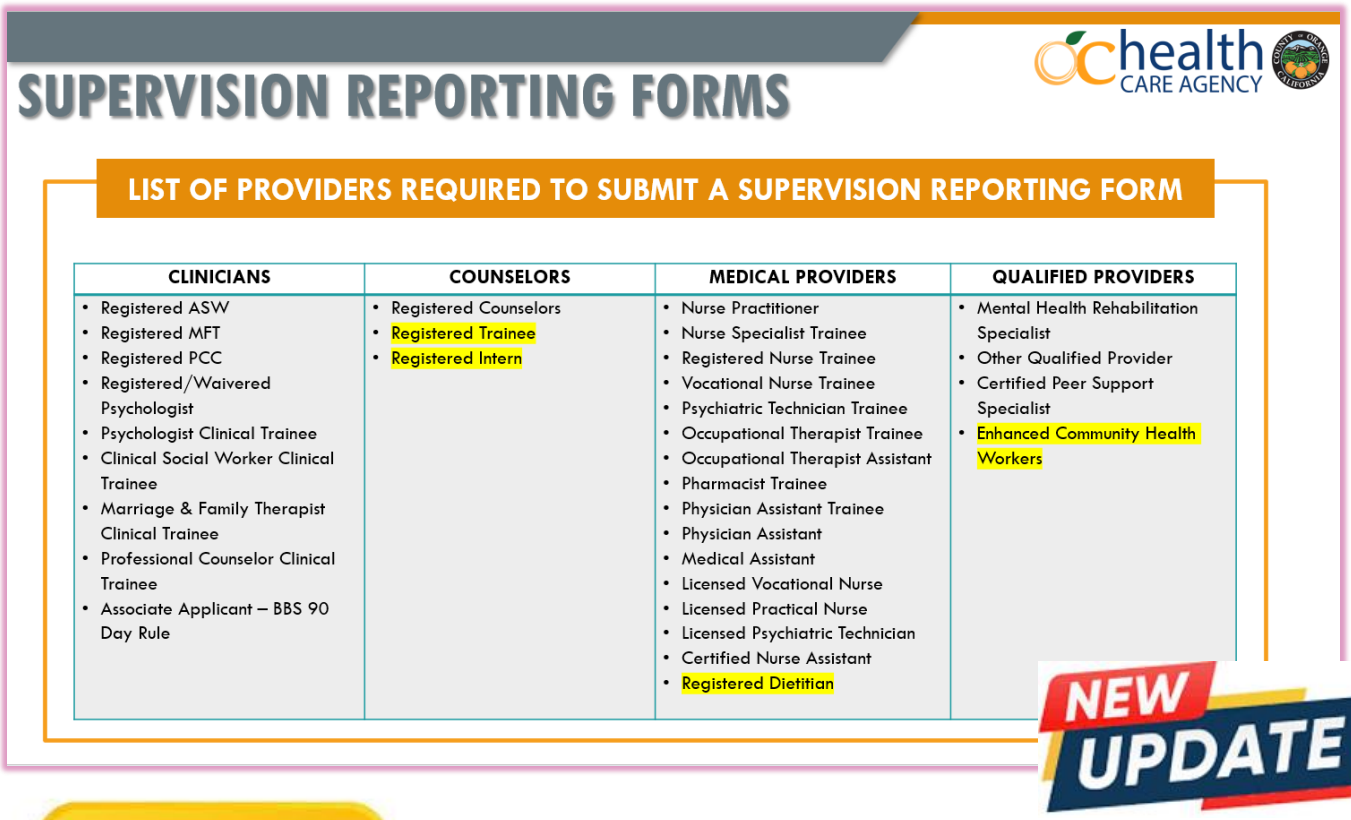
Cultural Competency Training | Orange County California - Health Care Agency

REMINDERS, ANNOUNCEMENTS & UPDATES (CONTINUED)

SUPERVISION REPORTING FORM REQUIREMENT

There are four types of supervision reporting forms the MCST oversees. We recently added some provider types on the forms and published it on the QMS website. 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 - **REVISED**
- ✓ Medical Supervision Reporting Form - **REVISED**
- ✓ Qualified Provider Supervision Form - **REVISED**



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)

COUNTY CREDENTIALING REQUIREMENTS

All **new providers** must submit their initial County credentialing packet within 5-10 business days of being hired to the MCST. The newly hired provider must **NOT** deliver any Medi-Cal covered services under their license, waiver, registration and/or certification until they have received an e-mail from VERGE/RLDatix indicating that they have successfully completed their application and attested. It is the responsibility of the designated administrator to review and submit all the required documents for the new hire credentialing packet including the supervision reporting form for the applicable providers to the MCST, timely. Once the provider attest, the credentialing process is automatically expedited and approved within an average of 3-5 business days.

CREDENTIALING

PROVIDERS REQUIRED TO BE CREDENTIALED:

NOTE: Any provider who works in a job classification that requires a license, waiver, certification and/or registration and delivers Medi-Cal covered services must be credentialed by the County. This list is not exhaustive, please inquire with the MCST for further guidance.

- ✓ Licensed Vocational Nurse
- ✓ Licensed Psychiatric Technician
- ✓ Certified Nurse Assistant
- ✓ Certified Medical Assistant
- ✓ Certified/Registered AOD Counselor
- ✓ BBS Licensed (LMFT, LPCC, LCSW)
- ✓ BBS Associate (AMFT, APCC, ACSW)
- ✓ BOP Registered Associate with DHCS Waiver
- ✓ Physician Assistant
- ✓ Psychiatrist
- ✓ Physician
- ✓ Nurse Practitioner
- ✓ Registered Nurse
- ✓ Occupational Therapist
- ✓ Psychologist
- ✓ Pharmacist
- ✓ Certified Peer Support Specialist

CREDENTIALING

SUBMISSION CHECKLIST

A complete packet should contain the following documents listed below and be labeled Last Name, First Name. The document names can be abbreviated. For example, New Applicant Request Form (NARF), Annual Provider Training (APT), Cultural Competency (CC), etc. The e-mail subject line must be titled Credentialing – Program Name.

SMHS CHECKLIST

- ✓ Doe, John NARF
- ✓ Doe, John Resume/County Application
- ✓ Doe, John APT
- ✓ Doe, John CC
- ✓ Provider Insurance Verification Form
- ✓ Supervision Reporting Form (if applicable)
- ✓ DHCS Waiver for Registered Psychological Associates

NOTE: The APT and CC Training must be the most current training that was completed in the last year.

DMC-ODS CHECKLIST

- ✓ Doe, John NARF
- ✓ Doe, John Resume/County Application
- ✓ Doe, John APT
- ✓ Doe, John CC
- ✓ Doe, John ASAM A
- ✓ Doe, John ASAM B
- ✓ 5 CEU/CME in Drug Addiction/Recovery (**ONLY** for MD, LCSW, LMFT, LPCC, Psychologist)
- ✓ Provider Insurance Verification Form
- ✓ Supervision Reporting Form (if applicable)

MANAGED CARE SUPPORT TEAM

ochealth CARE AGENCY

OUR TEAM

Annette Tran, LCSW
Health Services Administrator

Catherine Shreenan, LMFT
Service Chief II

Araceli Cueva
Staff Specialist

Boris Nieto
Staff Assistant

Jennifer Fernandez, LCSW
Behavioral Health
Clinician II

Ashley Cortez, LCSW
Behavioral Health
Clinician II

Liz Fraga
Staff Specialist

Vanessa Estrada
Office Specialist

Tanya Carbajal
Office Specialist

Joanne Pham
Office Specialist

Esmi Carroll, LCSW
Behavioral Health
Clinician II

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 SMHS
Leads: Araceli Cueva & Elizabeth "Liz" Fraga

CREDENTIALING AND PROVIDER DIRECTORY
Credentialing Lead: Ashley Cortez, LCSW
Cal Optima Credentialing Lead: Araceli Cueva & Elizabeth "Liz" Fraga
Provider Directory Leads: Joanne Pham

PROVIDER TRANSACTION ACCESS NUMBER (PTAN)
Lead: Boris Nieto

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) 480-0755

E-MAIL ADDRESSES

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

MCST ADMINISTRATORS

Annette Tran, LCSW
Health Services Administrator

Catherine Shreenan, LMFT
Service Chief II

QMS MAILBOXES

Please email questions to the group mailboxes to ensure emails arrive to the correct team rather than an individual team member who may be out on vacation, unexpectedly away from work, or otherwise unavailable.

BHPBillingSupport@ochca.com	IRIS Billing ● Office Support
BHPCertifications@ochca.com	SMHS Medi-Cal Certifications ● PAVE (SUD and JI) ● MPF/OOCR Updates
BHPDesignation@ochca.com	Inpatient Involuntary Hold Designation ● LPS Facility Designation ● Outpatient Involuntary Hold Designation
BHPGrievanceNOABD@ochca.com	Grievances & Investigations ● Appeals/Expedited Appeals ● State Fair Hearings ● NOABDs ● MCST Training Requests
BHPIDSS@ochca.com	General Questions Regarding Designation
BHPIRISFrontOfficeSupport@ochca.com	County Front Office Operational Support – Guidance on Front Office Procedures and Non-Technical EHR Workflow Inquiries
BHPManagedCare@ochca.com	Access Logs ● Access Log Entry Errors & Corrections ● Change of Provider/2nd Opinion ● County Credentialing ● Cal-Optima Credentialing (AOA County Clinics) ● Expired Licenses, Waivers, Registrations & Certifications ● PAVE (SMHS Only) ● Personnel Action Notification (PAN)
BHPNetworkAdequacy@ochca.com	Manage SMHS & DMC-ODS 274 Data ● Support of MHP County & Contract User Interface for 274 Submissions
BHPProviderDirectory@ochca.com	Provider Directory Notifications ● Provider Directory Submission for SMHS & DMC-ODS Programs
BHPPTAN@ochca.com	Assist in Maintaining PTAN Status of Eligible Clinicians & Doctors
BHPSUDSupport@ochca.com	DMC-ODS Clinical Chart Reviews ● Corrective Action Plan (CAP) Assistance ● Documentation & Coding Support ● Use of Downtime Forms ● Scope of Practice Guidance ● SUDsies Newsletter ● DMC-ODS Documentation Training Requests
BHPSupervisionForms@ochca.com	Submission of Supervision Reporting Forms for Clinicians, Counselors, Medical Professionals & Other Qualified Providers ● Submission of Updated Supervision Forms for Change of Supervisor, Separation, License/Registration Change ● Mental Health Professional Licensing Waivers
BHPUMCCC@ochca.com	Utilization Management of Out-of-Network (and In-Network) Complex Care Coordination Typically for ECT, TMS, Eating Disorders
BHSHIM@ochca.com	County-Operated SMHS & DMC-ODS Programs Use Related: Centralized Retention of Abuse Reports & Related Documents ● Centralized Processing of Client Record Requests and Clinical Documentation Review & Redaction ● Release of Information, ATDs, Restrictions & Revocations ● IRIS Scan Types, Scan Cover Sheets & Scan Types Crosswalks ● Record Quality Assurance & Correction Activity
BHSInpatient@ochca.com	Inpatient TARs ● Hospital Communications ● ASO/Carelon Communication
BHSIRISLiaison@ochca.com	EHR Support, Design & Maintenance ● Add/Delete/Modify Program Organizations ● Add/Delete/Maintain All County & Contract Rendering Provider and Front Office Staff Profiles in IRIS ● Manage SMHS & DMC-ODS 274 Requirements
BHSPandP@ochca.com	New BHS P&P needs ● BHS P&P updates
CalAIMSupport@ochca.com	Enhanced Care Management (ECM) ● Transitional Rent
QISystems@ochca.com	Quality Standards and Clinical Practice Team (QSCP) – EBPs, QAPI, BHA ● HEDIS/POM – CalOMS, CANS/PSC-35 ● BHP QI Support – QI Related Questions for SMHS and DMC-ODS Programs (Including DATAR, Medication Monitoring); QA/QI Meeting Invite Requests
QMSSpecialProjects@ochca.com	BHP Provider Manual ● Member Handbook ● Intake/Advisement Checklist ● Justice Involved SME
SMHSClinicalRecords@ochca.com	SMHS Clinical Chart reviews ● Corrective Action Plan (CAP) Assistance ● Documentation & Coding Support ● Use of Downtime Forms ● Scope of Practice Guidance ● QRTips Newsletter ● SMHS Documentation Training Requests