

## The DMC Outpatient Timeliness Record/The DMC Opioid Timeliness Record

### **Purpose:**

Information collected is used for tracking purposes to ensure the DMC-ODS programs are responding to beneficiary SUD service needs in a timely manner.

The data collected is also used to help inform decisions about timely access to services, resource allocation, and reporting. This includes reports to the annual External Quality Review Organization (EQRO), TADT (Timely Access Data Tool) Requirements which is part of the Network Adequacy Standards.

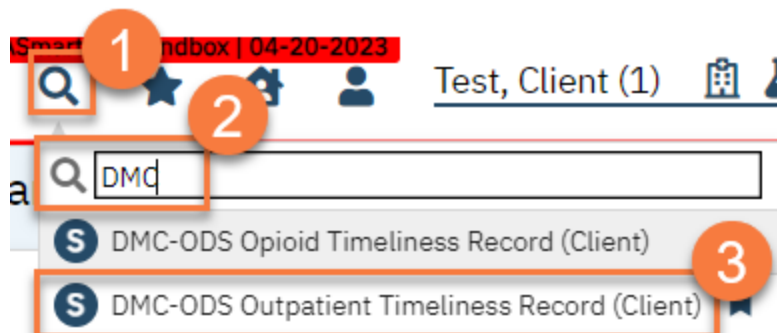
### **How to determine if The DMC Outpatient Timeliness Record/The DMC Opioid Timeliness Record**

You complete a Timeliness Record when a request for SUD services is made **AND**

1. When an individual requests services in a program and does not have an open CalOMS admission in that program.
2. Every urgent request for service.

How to complete:

1. **With the client open, click on the Search icon.**
2. **Type in “DMC-ODS Outpatient Timeliness” in the search bar.**
3. **Select “DMC-ODS Outpatient Timeliness Record (Client)” from the search results.**



4. A CDAG window will pop up. **Select the program** you're tying this record to.
5. **Click OK.**

Select Program Enrollment

SUD Outpatient-07/06/2023

OK Cancel

6. This takes you to the DMC-ODS Outpatient Timeliness Record. **Complete the record.** You can save information as you go and come back to it later, if you do not have all the data required.
  - a. **Enter the Referral Source.** This should be the person who referred the client to services. If the client requested services themselves, select “self”.
  - b. **Enter the Date of First Contact and time.** This is the date when the initial request for services was made. The “Time” field is only required if Urgent is selected.
  - c. **Enter the Appointment Type:** This is the requested level of care. **This is only for the DMC-ODS Outpatient Timeliness Record.**
  - d. **Mark Urgent** if a situation experienced by a person served who is pregnant or has an intravenous substance use disorder (substance use)
  - e. **Mark Prior Authorization Required.** At this time, Fresno DBH does not require prior authorization for any Medi-Cal Services.
  - f. **Enter the First Service Appointment Offered Date and time.** This is the first available appointment that was offered to the client, regardless of whether they accepted that appointment or not. For example, if you have an appointment available on Tuesday 1/10/24 at 9am, but the client says they’re unavailable on Tuesdays, you will still enter that you *offered* an appointment on 1/10/24 at 9am. The “Time” field is only required if Urgent is selected.
  - g. **If the offered appointment is outside of the timeliness range, enter the Reason for Delay.** This may be due to the client requesting a specific service, or a specific provider. If you select “other”, enter a description of the reason in the text field indicated.
  - h. **Enter the First Service Appointment Rendered Date and time.** This is the date the client actually had their first appointment. If a client accepts an appointment but doesn’t show to that appointment, then a service has not yet been rendered

and that date should not be entered here. If the client never actually starts services, leave this field blank and follow the instructions listed below in 7. The “Time” field is only required if Urgent is selected.

The screenshot shows the 'DMC-ODS Outpatient Timeliness Record' form. At the top, there is a header with the title and a toolbar with icons for navigation and actions like 'Save'. Below the header, there is a metadata bar showing 'Effective' date (09/11/2024), 'Status' (New), 'Author' (Rosel-Bucio, Mayra), and another date (02/08/2024). The main form area is titled 'DMC-ODS Outpatient Timeliness Record' and includes a note: 'This is only required for Medi-Cal beneficiaries who are making an initial request for outpatient substance use disorder treatment services.' The form is divided into sections: 'Initial Request and Appointment' and 'Follow-Up'. The 'Initial Request and Appointment' section contains several fields: 'Referral Source' (dropdown, callout a), 'Date of First Contact to Request Services' (date and time, callout b), 'Appointment Type' (dropdown, callout c), 'Urgent (if selected, time fields are required)' (checkbox, callout d), 'Prior Authorization Required' (checkbox, callout e), 'First Service Appointment Offered Date' (date and time, callout f), and 'First Service Appointment Rendered Date' (date and time, callout h). Below these is a 'Reason for Delay' dropdown (callout g) and a text area for 'If other, explain:'. There are also radio buttons for 'Referred to an out-of-network provider' (Yes/No) and a 'Details' text area. The 'Follow-Up' section has a checkbox for 'Follow Up Appointment NOT Offered' and two date/time fields for 'First Follow Up Appointment Offered Date' and 'First Follow Up Appointment Rendered Date'. At the bottom, there is a footer with copyright information and a version number.

- i. **If a follow-up appointment was not offered for any reason, click on the Follow-Up Appointment NOT Offered checkbox.** This will grey out the rest of the Follow-Up section.
- j. **If a follow-up appointment is offered, enter the First Follow Up Appointment Offered Date.** This is the first available appointment that was offered to the client after their first rendered service appointment. Much like in step c above, enter the offered date, even if the client did not accept that offered appointment.

k.

- l. **If the follow-up offered appointment is outside of the timeliness range (10 business days, which starts from the first service rendered date),** the “Documentation of clinical appropriateness” field will become available. **Document the clinical appropriateness of delaying follow-up care,** or indicate where in the client’s record this is documented. For example, if it’s documented in a progress note, you can simply write “see progress note dated 1/10/24”.
- m. **If the follow-up offered appointment is outside of the timeliness range (10 business days, which starts from the first service rendered date), indicate whether or not the client was referred to an out-of-network provider.**
- n. **Enter the First Follow Up Appointment Rendered Date.** This is the date the client actually had their first follow-up appointment. If a client accepts an appointment but doesn’t show to that appointment, then a service was not rendered and that date should not be entered here. If the client never attends a first follow-up, leave this field blank and follow the instructions listed below in 7.
- o. A record is considered complete when a client has had a first follow-up appointment rendered. At this point **click Sign** to complete the record. You may now close the screen.

SmartCare | CalMHSA Smartcare Sandbox | 04-20-2023 | Test, Client (1) | Charla Rowe

### DMC-ODS Outpatient Timeliness Record

Effective: 12/26/2023 | Status: New | Author: Rowe, Charla | Sign

First Service Appointment Offered Date: [ ] | First Service Appointment Rendered Date: [ ]

Reason for Delay: [ ]

If other, explain: [ ]

#### Follow-Up

Follow Up Appointment NOT Offered

First Follow Up Appointment Offered Date: [ ] | First Follow Up Appointment Rendered Date: [ ]

Documentation of clinical appropriateness of wait time extension: (If documented in a progress note, indicate the date of this progress note "see progress note dated XX/XX/XXXX")

Referred to an out-of-network provider:  Yes  No

Details: [ ]

#### Closure

Closure Date: [ ] | Closure Reason: [ ]

If other, explain: [ ]

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7. Sometimes a client does not complete the admission process. **If a client starts the process** (e.g. makes a request for services) **but doesn't complete it** (doesn't attend a follow-up appointment), then you will **close the record without it being complete**.
  - a. In the Closure section, **enter the Closure Date**. This is the date you've determined the client will not complete the admission process.
  - b. **Enter the Closure Reason**. These reasons generally indicate which step in the process the client exited. If you select "other", enter a description of the reason in the text field indicated.
  - c. Once you've completed the closure section, **click Sign** to finalize the record. You may now close the screen.

SmartCare | CalMHSA Smartcare Sandbox | 04-20-2023 | Test, Client (1) | Charla Rowe

### DMC-ODS Outpatient Timeliness Record

Effective: 12/26/2023 | Status: New | Author: Rowe, Charla | Sign

First Service Appointment Offered Date: [ ] | First Service Appointment Rendered Date: [ ]

Reason for Delay: [ ]

If other, explain: [ ]

#### Follow-Up

Follow Up Appointment NOT Offered

First Follow Up Appointment Offered Date: [ ] | First Follow Up Appointment Rendered Date: [ ]

Documentation of clinical appropriateness of wait time extension: (If documented in a progress note, indicate the date of this progress note "see progress note dated XX/XX/XXXX")

[ ]

Referred to an out-of-network provider:  Yes  No

Details: [ ]

#### Closure

Closure Date: [ ] | Closure Reason: [ ]

If other, explain: [ ]

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## FAQ

#	Question	Answer
1	Do I need to complete the form every time a client comes in to treatment?	<ul style="list-style-type: none"> <li>• When an individual requests services in a program and does not have an open CalOMS admission in that program.</li> <li>• Every urgent request for service.</li> </ul>

		<ul style="list-style-type: none"> <li>• The person is requesting MAT services in addition to any other SUD service at any LOC</li> <li>• The person served is transitioning to a higher or lower level of care</li> </ul>
2	What do I do if a person returns to request services/treatment within 30 days for any LOC and 8 days for NTP programs from the original request date and form completion?	<ul style="list-style-type: none"> <li>• If a person returns within the initial 30 days, another form is only needed if the person served has been CalOMS discharged.</li> </ul>
3	Would the first service offered appointment date be considered the “intake day”?	<ul style="list-style-type: none"> <li>• The first service offered appointment date is any billable first service rendered to person served.</li> </ul>
4	Do you complete this form if clients are referred from probation?	<ul style="list-style-type: none"> <li>• You will complete a form when you have contact with the person served that has been referred either from probation or any third party. The request date will be the day the person served either accepts or declines services.</li> </ul>
5	Who will enter the form?	<ul style="list-style-type: none"> <li>• This depends on your workflow. We highly suggest that you refer back to your program and process. Currently, the form allows the author to go back and make edits if saved or signed. It also allows for another person to add/edit information if necessary. The end user adding/editing information should change the “author” name to themselves and sign it when complete.</li> </ul>
6	What should staff do with SUD Timeliness form that are still “In Progress” or incomplete?	Pending further direction.
7	What is consider a follow-up appointment?	<ul style="list-style-type: none"> <li>• The follow-up appointment applies to <b>any service</b> that takes place after the <i>First Service Appointment Rendered Date</i>. Assessment and treatment language no longer</li> </ul>

		<p>applies to the DMC-ODS Outpatient Timeliness Record/DMC-ODS Opioid Timeliness Record.</p> <ul style="list-style-type: none"> <li>The <i>First Follow Up Appointment Offered Date</i> is the first available appointment for <b>any visit with a non-physician after the first service</b>. A follow-up appointment may be the same day as the first service, but these should be <b>separate visits</b> for the client. If client <b>does not accept any appointment</b> date or is <b>unable to be contacted</b>, leave this blank and proceed to <b>Closure</b>.</li> </ul>
8	For 'Referred to Out of Network Provider' checkbox	Select 'No' at this time. Pending further direction.
9	What Closure Reason should staff select, if PS attended their initial appointment but did not attend their follow-up appointment (no show/cancel)?	Select 'Beneficiary attended initial appointment but did not complete assessment process'.
10	What is the timeliness standard for follow-up appointment?	Starting July 1, 2022, the timeliness standard for follow-up appointments is 10 business days from the prior appointment. It starts from the <i>First Service Appointment Rendered Date</i> .
11	For screening programs (UCWC and YWC), would staff complete the Follow-Up section when linking the person served to a SUD provider?	<ul style="list-style-type: none"> <li>No. Complete fields only listed under the <b>Initial Request and Appointment</b> section.</li> <li>Staff will mark the <i>Follow Up Appointment NOT Offered</i> box</li> <li>Close out the form with <i>Closure Reason "Other"</i> and type "Screening Program"</li> </ul>
12	Do SUD Residential programs need to complete this form?	<ul style="list-style-type: none"> <li>Yes, SUD Residential Programs will use the DMC-ODS Outpatient Timeliness Record form</li> </ul>