**Better Health for All** 

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	COUNTY OF SANTA CLARA
<b>VV</b>	Health System

DATE:	February 23, 2022	
TO:	Honorable Members of the Board of Supervisors	
	Jeffrey V. Smith, M.D., J.D., County Executive	
FROM:	René G. Santiago, Deputy County Executive/Director, Health System $\int_{K_{S}}^{DS}$	
	Sherri Terao, Director of Behavioral Health Services $\int_{S^{\uparrow}}^{S^{\bullet}}$	
SUBJECT:	Bed Tracking Comparison	

During the Finance and Government Operations Committee Meeting on January 14, 2022 (Item No. 5), Supervisor Lee requested that the Behavioral Health Services Department (BHSD) provide an off-agenda memo comparing the functionality of the Santa Clara County's Netsmart and Los Angeles County's Mental Health Resource Locator and Navigator (MHRLN) bed tracking systems, including data collected, search capabilities and functions, levels of system access, security, capabilities to collect information on unlicensed care facilities, capabilities of public-facing portal, and a summary of the advantages and disadvantages between the two systems.

## Definitions

myAvatar – The Netsmart platform that provides two core functions for BHSD:

- 1. Electronic Health Record (EHR) for County Operated programming.
- 2. Claims system for County Contracted Providers (CCPs) once the implementation plan is fully completed for all 44 CCPs in late 2022.

<u>Key Performance Indicators (KPI) Dashboards</u> – The internal dashboarding system within myAvatar that aggregates and displays metrics based on information in the system, as it is updated each evening. Current dashboards are accessible only with a Netsmart login.

## **Comparison Summary**

Netsmart myAvatar and MHRLN are two fundamentally different platforms designed for different uses. While myAvatar can be used to track point in time beds and capacity for BHSD operations and contracted facilities, it is primarily structured as an EHR and claim processing platform for BHSD operations. MHRLN, on the other hand, was developed specifically as a bed registry for Adult Residential Facilities (ARF) and Residential Facilities for the Elderly (RCFE) to meet the need for real-time bed tracking in Los Angeles County (LAC).

It is important to note Netsmart myAvatar has been the EHR and claim processing platform for LAC mental health and substance use services since 2012 and 2017 respectively. Despite a systemwide deployment of myAvatar, LAC decided to create a separate system, MHRLN, to meet the needs of a real-time bed registry. MHRLN utilizes Dynamics 365 as the base

platform. It also interfaces with ReddiNet, an established third-party system that LAC uses throughout various systems (e.g., Emergency Medical Services [EMS], Emergency Medical Technicians [EMT], law enforcement, and hospitals) for information exchange among hospitals, EMS, EMT, paramedics, law enforcement, and other healthcare system professionals. The development of MHRLN required contracted work, a separate budget, and 6 to 8 months to complete.

Functionality	myAvatar	MHRLN
Comprehensive bed registry solution	No	Yes
Track beds for county providers	Yes	Yes
Track beds for contracted providers	Partial (only at admission and discharge level)	Yes
Track beds for unlicensed or non-contracted providers	No	Yes
EHR	Yes (county providers only)	No
Claims processing	Yes	No
KPI Dashboards	Yes (county EHR only)	No
Data population in dashboards using other tools	Yes	Yes
Data population in public facing dashboards	No	Yes
Interactive mapping	No	Yes
Mobile capability/friendly	No	Yes
Support acute psychiatric services	No	Yes

The following table compares functionalities of Netsmart myAvatar and MHRLN:

The following table breakdown the features of Netsmart myAvatar and MHRLN:

Feature	myAvatar	MHRLN
Data collected	BHSD operated programs: - Bed utilizations - Unit assignments	Participating RCFs: - Bed registry - Waitlist
	<ul> <li>Room assignments</li> <li>Bed assignments</li> <li>Gender</li> <li>Age</li> </ul>	<ul> <li>Case management</li> <li>Placement</li> <li>Discharges</li> <li>Possibly more depending on configuration</li> </ul>
	<u>CCPs:</u> - Admissions - Discharges - Current census	configuration

Collection Method	BHSD operated programs:         - Direct entry from BHSD staff         Contracted BHSD Providers:         - Data entry either with direct API (application programming interface) with the EHR or manual	<ul> <li><u>Participating RCFs</u>:</li> <li>Manually input on average 1-2 times a day (voluntarily reported) by staff at RCF or as needed by LAC Department of Mental Health (DMH) staff</li> <li>Unlicensed facilities do not participate and update their capacity in MHRLN</li> </ul>
Search capabilities and functions	<ul> <li>entry using the web portal</li> <li>Name/Client ID</li> <li>Alias</li> <li>Claim Number</li> <li>Social Security Number</li> <li>Date of Birth</li> <li>Facility Chart Number</li> </ul>	<ul> <li>Bed types</li> <li>Distance</li> <li>Level of care</li> <li>Gender</li> <li>Bed availability</li> <li>Language services</li> <li>Types of insurance</li> <li>Etc. (configurable)</li> </ul>
Levels of system access	<ul> <li><u>County Staff Access</u></li> <li>Direct access for EHR management and service provision (various roles)</li> <li><u>BHSD Contracted Provider</u> <u>Access</u></li> <li>Web portal access for EHR clinical forms and claims (limited roles)</li> <li><u>Approved Other Roles</u></li> <li>Read-Only access for coordination of care permitted for some relevant business needs</li> <li>*Licenses purchased for access in bulk from Netsmart</li> </ul>	<ul> <li><u>Portal access</u></li> <li>RCF staff access to provide facility updates</li> <li><u>LAC DMH staff access levels</u></li> <li>Read-Only: read only access used by mobile response teams</li> <li>Gatekeeper: basic access to update bed</li> <li>Case Manager role: access is limited to tracking the flow of clients from intake to discharge.</li> <li>Service Approver: access is limited to receiving and creating service requests and emergency placement</li> <li><u>MHRLN admin</u></li> <li>System administrator access that is limited to approximately three users with the capabilities of configuring the system</li> </ul>

Security	Complies with Health	Two factor authentication,
-	Insurance Portability and	Complies with HIPAA, PHI,
	Accountability Act (HIPAA),	and personally identifiable
	42 Code of Federal	information (PII) standards
	Regulations (CFR), Protected	
	Health Information (PHI)	
	standards, User Roles and	
	User Definition controls	
	maintained by BHSD	
Capabilities of	myAvatar was not designed to	MHRLN was created with
public-facing	have an automatic public	public-facing portal uses in
portal	facing aspect because the	mind and so it has interfaces on
	system contains a great deal of	public facing webpages as part
	PHI, and it is designed as an	of the design
	EHR and claiming system.	
	However, data from myAvatar	
	can be exported to be used on	
	a third-party public facing	
	capable dashboarding tool,	
	such as PowerBI and Tableau.	

Currently, BHSD and TSS are allocating a significant amount of technical and staffing resources to implement the myAvatar platform for claims processing. The development of a separate bed registry solution would require strategic planning independent of the myAvatar implementation to maximize the potential benefits.

cc: Miguel Marquez, Chief Operating Officer James R. Williams, County Counsel Tiffany Lennear, Clerk of the Board Chief Board Aides Bianca Jones, OBA Agenda Review Administrator