



Provider Services Department Message

Greetings and welcome to the Fall 2025 edition of the OPTUMIST Newsletter! In this edition we are highlighting several topics including revisions to the Fee-for-Service County of San Diego funded fee schedules, Outpatient Authorization Request (OAR) form reminders, updated reasons for recoupment, guidance on the use of the TJ modifier when billing for services rendered to children, instructions for applying to submit electronic claims, information on obtaining a Type 2 National Provider Identifier (NPI), and TERM updates including interpreter use in TERM treatment, updated treatment plan documentation resources, and authorization updates for TERM therapists.

We continue to welcome your questions and feedback on how we can make our Newsletter valuable to you.

Best wishes,

Provider Services Department

Contact Numbers

San Diego Access
and Crisis Line (888) 724-7240

Medi-Cal Provider
Line (800) 798-2254

TERM Provider
Line (877) 824-8376



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Information and Updates for FFS Medi-Cal Providers

Revised Optum Public Sector San Diego Billing Codes and Rates



Dear Psychiatrists, Psychiatric Nurse Practitioners, and Physician Assistants:

Optum Public Sector San Diego implemented updates to the County of San Diego Funded Fee-for-Service (FFS) fee schedules. The following revisions have been made:

- Coverage for Transcranial Magnetic Stimulation (TMS) treatment added for adolescents aged 15 and older

CPT Code	Modifiers	Description
90867	TJ	Therapeutic Repetitive Transcranial Magnetic Stimulation (TMS) Treatment; Initial, Including Cortical Mapping, Motor Threshold Determination, Delivery and Management. (1 unit = 31-60 minutes, max 1 unit/day) *Rate applies to adolescents aged 15 years and older
90868	TJ	Subsequent Delivery and Management of TMS, per session. (1 unit = 7-15 minutes, max 1 unit/day) *Rate applies to adolescents aged 15 years and older
90869	TJ	TMS Treatment Subsequent Motor Threshold Re-Determination with Delivery and Management. (1 unit = 23-45 minutes, max 1 unit/day) *Rate applies to adolescents aged 15 years and older

Revised fee schedules were sent out on 10/16/25, to all FFS Medi-Cal contracted Psychiatrists, Psychiatric Nurse Practitioners, and Physician Assistants.

Have Questions?

Contact the Provider Services Department

(800) 798-2254, Option 7

sdu_providerserviceshelp@optum.com

Information and Updates for FFS Medi-Cal Providers

Reminders from Utilization Management (UM)



To ensure timely and accurate processing of authorization requests, please adhere to the following when submitting Outpatient Authorization Request (OAR) Forms:

- **Primary Insurance Submission:** If a client has Medicare or other health coverage, authorization requests must be submitted to their primary insurance provider first.
- **San Diego Medi-Cal Eligibility:** Submit OARs to Optum only for clients who have San Diego Medi-Cal, or Out of County Medi-Cal with one of the following Aid Codes: AAP/KinGAP or Foster. For clients with Out of County Medi-Cal, a Foster Aid Code, and living in an STRTP, the County of Origin should be contacted for authorization requests.
- **Diagnosis Consistency:** Please verify that the ICD code listed on the OAR matches the diagnosis identified as the Primary Diagnosis.
- **Demographic Form:** A completed Demographic Form is required for all initial authorization requests.
- **Signature Requirements:** All forms must include a “wet” signature or a certified digital signature. Typed signatures are not accepted.
- **Correct Client Names:** Ensure the client's name on the OAR is the client's legal name and the name on their Medi-Cal card or the Medi-Cal eligibility site. Indicate aliases if necessary.
- **Requesting Services:** Ensure to include number of sessions requested and frequency for all services you are requesting. When requesting Targeted Case Management, be sure to include focus and explanation.
- **Form Completion:** Before submitting, ensure all required fields on the OAR form are accurately completed.

Have Questions?

Contact the Utilization Management Department

(800) 798-2254, Option 7

Information and Updates for FFS Medi-Cal Providers

Contact Us

The Provider Line is available for you from 8am – 5pm Monday through Friday.



(800) 798-2254

Press 2 for Claims/Billing Questions

Press 3, then 3 again for Clinical Questions

Press 3, then 4 for Authorization Questions

Press 7 for Provider Services



This information is also available to you on our website: optumsandiego.com



QI Corner

Revised Reasons for Recoupment

Effective for all billable Medi-Cal documentation starting: July 1, 2025

In alignment with the **California Department of Health Care Services (DHCS)** and the **CalAIM Medi-Cal Transformation initiatives**, the County of San Diego has revised its **Reasons for Recoupment** criteria. These updates reflect a stronger focus on identifying **overpayments** and documentation patterns that may indicate **fraud, waste, or abuse**.



Fraud and abuse are defined in The Code of Federal Regulations (CFR), Title 42, section 455.2. W&I, section 14107.11; subdivision (d) also addresses fraud. Definitions for fraud, waste, and abuse, as those terms are understood in the Medicare context, can also be found in the Medicare Managed Care Manual.

Missing Documentation	The claim lacks required documentation. Specifically, no progress note was found to support the billed service.
Provider Mismatch	The individual who delivered the service is not the same as the provider listed on the claim.
Service Not Billable Under Title 9	Certain activities are not reimbursable under California Code of Regulations Title 9. Examples include, but are not limited to: <ul style="list-style-type: none">• Administrative-only tasks• Leaving a voicemail• Scheduling appointments
Evidence of Fraud, Waste, or Abuse	Indicators suggest potential fraud, waste, or abuse. Examples include, but are not limited to: <ul style="list-style-type: none">• Billing for services that were not provided• Submitting claims for services known not to have occurred• Excessive duplication of services across multiple claims

Need Support? If you have questions or need help reviewing your documentation practices please reach out to the QI team at: SDQI@optum.com



[Click here for the Revised Reasons for Recoupment Document](#)

Information and Updates for FFS Medi-Cal & TERM Providers

REMINDER: Modifier TJ Required When Billing for Services Rendered to Children



In September 2024 Optum Public Sector San Diego implemented the following changes to all fee schedules effective 09/01/24:

- **Providers must bill with the modifier TJ to receive the applicable rates for services rendered to children**

*Modifiers below are required to ensure accurate claims payments for services rendered by telephone, telehealth or to children

93 = Telephone 95 = Telehealth SC = Telephone (T1017) **TJ = Services rendered to children**

Example Fee Schedule:

CPT Code	Modifiers	Description	Minutes
90832	93, 95, TJ	Psychotherapy, 30 minutes with patient	30
90834	93, 95, TJ	Psychotherapy, 45 minutes with patient	45
90837	93, 95, TJ	Psychotherapy, 60 minutes with patient	60
90847	93, 95, TJ	Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes	50
90853	93, 95, TJ	Group psychotherapy (other than of a multiple-family group) – rate is per patient	60

Please refer to your current fee schedules effective 07/01/25, for guidance on the services to which the TJ modifier applies.

Apply Today to Submit Electronic Claims



Streamline Your Claims Process!

Are you ready to simplify your billing process, reduce paperwork, and get paid faster? Join our network of providers who are already benefiting from submitting electronic claims.

Why submit electronic claims?

- ✓ Faster processing and reimbursement
- ✓ Fewer errors and rejections
- ✓ Secure and HIPAA-compliant
- ✓ Environmentally friendly – go paperless!

Ready to Apply or Have Questions?

Contact the Claims Department at
(800) 798-2254, Option 2

Note: Healthcare organizations and businesses that bill using the organization's name and Employer Identification Number (EIN) must obtain a Type 2 National Provider Identifier (NPI). To apply for a Type 2 NPI **at no cost**, visit the [NPPES website](#), create an account if you do not already have one, and follow the prompts to apply for an organizational NPI Type 2.

Information and Updates for TERM Providers

Optum TERM At a Glance – Updates

Utilizing Interpreters in TERM Treatment

- Best practices and other considerations for utilizing interpreter services in TERM treatment are shared in this edition of the newsletter.

Updated Treatment Plan Documentation

Resources

- Updated TERM Treatment Plan Documentation Resources are available to help guide documentation on the new CFWB forms. They are summarized in this newsletter and can be accessed on the Optum website at [TERM Treatment Plan Documentation Resources \(Aug2025\)](#).

Authorization Updates for TERM Therapists

- In-home services no longer require pre-authorization for CFWB funded therapy.
- Medi-Cal funded therapy authorizations will now include care coordination/case management.



UPCOMING TRAINING OPPORTUNITIES

- **November 14:** [DBT Crash Course for Clinicians: 15 Core Techniques to Improve Emotional Regulation, Manage Distress and More](#) (6.25 CEUs available). Live Webinar.
- **December 4:** [Risk Assessment](#) (4 CEUs available). Live Training via Zoom.
- **January 24-29:** [41st Annual San Diego International Conference on Child and Family Maltreatment](#) (CEUs available)
- **January 30:** Please save the date! TERM partners are planning a training from 8am-12pm on Understanding CFWB and the Juvenile Dependency Process. CEUs will be available. More information coming soon!

Listed trainings are for informational purposes only. While topics may be relevant to TERM providers, they are not 'TERM approved/recommended' offerings



QUICK LINKS

- [TERM Provider Handbook](#)
- [TERM Group Report Facesheet](#)
- [TERM Treatment Plan Documentation Resources \(Aug2025\)](#)
- [IPV-V Group Treatment Standards](#)
- [CSA-NPP Treatment Standards](#)
- [Format & Required Elements of a CFWB Psychological Evaluation](#)
- [TERM Therapy Provider FAQ](#)
- [FAQ For CFWB Evaluations](#)
- [Claims Resources for TERM Providers](#)
- [TERM Therapy Provider Telehealth Best Practices](#)
- [Request for Additional CFT Meeting Units](#)
- [Temporary Change of Authorization](#)



TERM Advisory Board Provider Representatives

The TERM Advisory Board meets quarterly to provide professional input regarding the performance of the system and its policies, procedures, and protocols.

Representation on the Board includes San Diego County HHS Behavioral Health Services, Child Welfare Services, Probation Department, Juvenile Court, Public Defender Juvenile Delinquency Branch, District Attorney, County Counsel, Dependency Legal Services, Children's Legal Services, Optum, TERM Provider Panel, Youth and Parent Partners.

Current TERM Provider Representatives on the Board:

Michael Anderson, Psy.D.: drmike6666@gmail.com

Denise VonRotz, LMFT: dvonrotz@msn.com

Please feel free to contact your provider representatives for updates from the Advisory Board meetings, process improvement ideas, or to provide professional or client feedback.

Information and Updates for TERM Providers



Utilizing Interpreters in TERM Treatment

Child and Family Well-Being Department (CFWB) serves clients from diverse cultural and linguistic backgrounds. While TERM aims to connect clients with therapy services in their primary language whenever possible, due to limitations in local resources this may not always be feasible. When a clinician fluent in the client's native language is unavailable, CFWB is responsible for coordinating and funding interpreter services to support treatment with a TERM provider. TERM providers may utilize these interpreter services, whether needed for a single phone call to coordinate care, or for ongoing therapy sessions. While the use of interpreters in therapy can introduce additional challenges, thoughtful planning and adherence to clinical best practices can help ensure that interpreters serve to enhance client engagement and support meaningful therapeutic outcomes.



Including an interpreter in mental health treatment transforms the therapeutic dyad between clinician and client into a therapeutic triad involving the clinician, client, and interpreter. The clinician and interpreter need to work in partnership, as both roles are essential for effective treatment. Clinicians bring the knowledge and expertise in clinical interventions, while interpreters ensure accurate, culturally sensitive understanding between the clinician and client. Informed consent should acknowledge this triadic relationship and outline the potential risks and benefits associated with this dynamic.

Best practices recommend that clinicians establish a collaborative partnership with interpreters prior to beginning treatment (Miller et al., 2019). At minimum, a preliminary framework should be discussed to guide the therapeutic process and clarify each person's role. This framework should reflect that clinicians should speak directly to the client—not to the interpreter—and maintain eye contact to reinforce the therapeutic connection. Interpreters, in turn, should use first-person language when relaying the client's words, rather than third-person phrasing. Holding brief preparatory or debriefing meetings between the two parties before and/or after sessions can clarify roles, address unresolved questions, and strengthen the working partnership. While therapeutic outcomes may improve when clients are supported by the same clinician-interpreter dyad throughout treatment (Miller et al., 2019), consistent interpreters in TERM treatment is subject to case-specific needs and the availability of resources within CFWB's contracted agencies. If a consistent interpreter is not available, clinicians can still request a prep or debrief session with the interpreter prior to meeting with the client to discuss a framework for session management.

Some studies have shown evidence that while many clinicians express concern that the presence of an interpreter may hinder the formation of a positive therapeutic alliance, research suggests that having a good partnership and clarity of roles between the therapist and the interpreter can serve to enhance the client's therapeutic alliance (Hanft-Robert et al., 2023).

Information and Updates for TERM Providers

Utilizing Interpreters in TERM Treatment – *continued*

Agencies which provide interpreter services are tasked with ensuring their staff receive training in providing interpretation in a mental health setting, ensuring language can be adapted appropriately to a client's developmental stage, and providing support for potential secondary or vicarious trauma experienced by interpreters. TERM providers are encouraged to elevate any concerns that come up regarding the interpreter services provided by a CFWB contracted agency to CFWB staff or reach out to the TERM team for support.

TERM clinicians should be prepared to address additional logistical considerations, such as those related to paperwork and telehealth. Clinicians should establish a clear plan for how the client will complete initial intake paperwork. Such as if intake forms and documents will be translated into the client's language, or whether the interpreter will assist the client in completing the documents during the session. If treatment is provided via telehealth, clinicians should consider how to structure sessions to best support the therapeutic triad. This may include exploring whether the interpreter can be physically present with the client, depending on the client's preferences and clinical needs.

Upon receiving the referral, the TERM clinician should promptly contact the assigned PSW to request interpreter support for the initial intake session and are encouraged to communicate any specific requests related to client needs. CFWB maintains contracts with multiple interpreter agencies and selects the appropriate provider based on the client's specific language and service needs.

It is important to recognize that therapy involving an interpreter may require additional time for planning and implementing. TERM clinicians are preauthorized for 12 Targeted Case Management Units (TCM) under CPT code T1017 which can be used to obtain reimbursement for some of these additional tasks. Optum acknowledges the additional effort and coordination needed for cases requiring interpreter support and is grateful to our TERM providers who are willing to serve this need. For additional guidance, The National Child Traumatic Stress Network (NCTSN) offers a free, on demand, web-based training (includes free CEUs) that highlights relevant considerations for mental health clinicians working with interpreters. Please visit the NCTSN website by click [here](#).

References

- Hanft-Robert, Saskia, et al. "A Balancing Act: How Interpreters Affect the Therapeutic Alliance in Psychotherapy with Trauma-Affected Refugees—A Qualitative Study with Therapists." *Frontiers in Psychology*, 16 May 2023, <https://doi.org/10.3389/fpsyg.2023.1175597>
- Chang, Doris F., et al. "Rethinking Interpreter Functions in Mental Health Services." *Psychiatric Services*, vol. 72, no. 3, 2021, pp. 314–321. <https://doi.org/10.1176/appi.ps.202000085>
- Gartner, Kim, et al. "Barriers to Use of Interpreters in Outpatient Mental Health Care: Exploring the Attitudes of Psychotherapists." *Transcultural Psychiatry*, vol. 61, no. 2, 2024, pp. 285–297. <https://journals.sagepub.com/doi/10.1177/13634615241227337>
- Miller, A. B., et al. (2019). A socio-culturally, linguistically-responsive, and trauma-informed approach to mental health interpretation. National Center for Child Traumatic Stress. <https://www.nctsn.org/resources/a-socio-culturally-linguistically-responsive-and-trauma-informed-approach-to-mental-health-interpretation>

Information and Updates for TERM Providers

Updated TERM Treatment Plan Documentation Resources Available

As a follow up to the updated CFWB Treatment Plan forms that were implemented 08/01/25, we are pleased to share that updated TERM Treatment Plan Documentation Resources are available to help guide documentation on the new forms. The Resources include:

- **Treatment Plan Quality Assurance Checklist:** A checklist for providers to use to ensure that treatment plans follow TERM guidelines and contain all the basic elements.
- **Treatment Plan Samples:** Sample treatment plans for a parent, a child, and a conjoint therapy case. The treatment plan samples are a mixture of hypothetical examples and are not intended to be a template for treatment plans; they include examples of documentation intended to assist with understanding how to document in each section of the form for various modalities/areas of treatment focus.
- **Clinical Risk Documentation and Safety Plan Guidelines:** Outlines guidelines for documentation of clinical risk assessment and safety planning.

The TERM Treatment Plan Documentation Resources can be found on the Optum website in the TERM Providers section under both the Manuals and CFWB Treatment tabs at [TERM Treatment Plan Documentation Resources \(Aug2025\)](#). The resources are for informational purposes only and do not constitute treatment advice. We hope that these resources will help you to work more efficiently to meet the needs of your clients.

Thank you for your ongoing collaboration in serving CFWB-referred clients.



If you have any questions regarding the new forms or documentation requirements, please contact the TERM Department at (877) 824-8376, Option 1.

Information and Updates for TERM Providers



Authorization Updates for TERM Therapists

We are pleased to share that the following updates to TERM authorization processes have been made to reduce paperwork and make it easier for providers to bill for care coordination and in-home therapy services.

Care Coordination for Medi-Cal Funded TERM Cases:

As of 09/15/25, TERM providers are now automatically authorized for Team Conference (99366 and 99368) and Targeted Case Management (T1017) for all outpatient authorizations after the Initial Treatment Plan is submitted. The authorization frequency aligns with CFWB funded authorizations for TERM cases:

- Team Conference: 12 units at 2 per month
- Targeted Case Management: 12 units at 2 per month

TERM providers should see this reflected on their authorization letters and will no longer need to specify requests for Team Conference and Targeted Case Management on the fax cover sheet if this amount and frequency covers their needs. If additional units are needed, they can continue to be requested by documenting the request on the fax coversheet when treatment plans are submitted or by calling the Optum Utilization Management Department at 800-798-2254, option 3.

Pre-Authorization No Longer Required for In-Home Services through CFWB Funding:

As of 09/15/25, CFWB no longer requires pre-approval for the use of the below CPT codes for CFWB funded in-home therapy services when a provider is authorized for Individual Therapy or Conjoint Therapy services. If in-home services are clinically indicated, TERM therapists will have the flexibility to bill for the following CPT codes under the therapy authorization as needed:

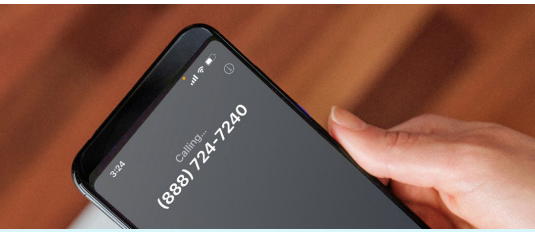
- 99342
- 99342 TU
- 99342 TJ
- 99342 TU TJ

TU = Language modifier

TJ = Child modifier

For Medi-Cal funded therapy, there are no changes; providers can continue to bill for these services under their therapy authorization and ensure to include the correct place of service on their claims forms.

San Diego Access and Crisis Line



We are here for you

The San Diego Access and Crisis Line (ACL) is an outstretched hand to individuals of all ages or people they know, who are overwhelmed, depressed or searching for answers.

A phone call will connect you with a compassionate professional who is always standing by to provide hope and encouragement.

We can help when:

- You need to talk to a professional who cares
- You do not feel you can cope with life
- You are looking for community resources
- You are concerned someone you know might hurt themselves
- You feel you might be in danger of hurting yourself or others



optumsandiego.com



San Diego Access and Crisis Line

Free assistance 7 days a week, 24 hours a day
Available in all languages

888-724-7240
TDD/TTY 711

optumsandiego.com



If you or someone you know is in crisis, help is available nationwide. Call or text **988**, or chat at 988lifeline.org.



*Funding for services is provided by
County of San Diego Health & Human Services
Agency*

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San Diego Access and Crisis Line

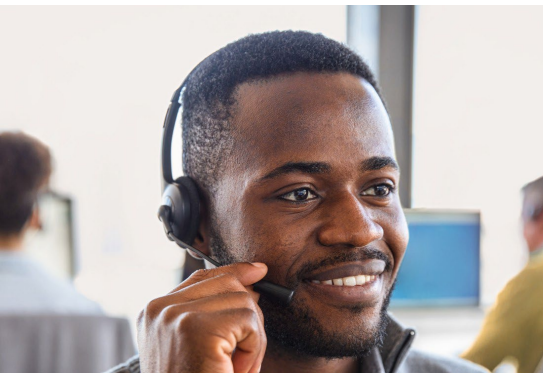
Free assistance 7 days a week, 24 hours a day



We are here for you

888-724-7240
TDD/TTY 711

San Diego Access and Crisis Line



About us

The San Diego Access and Crisis Line (ACL) is operated by Optum and has offered San Diego County residents free, confidential, brief support and community resources since 1997.

Our staff are trained mental health professionals who provide compassionate and knowledgeable support to those we serve.

About our services

- Free, confidential support for all ages
- Crisis intervention
- Suicide prevention, intervention, and postvention
- Referrals for mental health, alcohol and/or drug needs
- Referrals to other related resources
- Mobile Crisis Response screening

Who we can help

- Individuals of all ages who are struggling with mental health or substance use related concerns
- Family members or friends who are concerned about someone
- People who are thinking about harming themselves or others
- Professionals seeking resources for their clients

Wellness plan

“If I need help, what can I do?”
Reach Out!

Access and Crisis Line: **888-724-7240**

Family/friend: _____

Therapist: _____

Doctor: _____

Clergy: _____

Other support: _____

Call 911 if this is a life-threatening emergency.



888-724-7240

Free, confidential support in all languages

- 24 hours a day
- 7 days a week



Online Chat Services are available

- Monday through Friday
- 4 p.m. to 10 p.m.



San Diego Access and Crisis Line

Free assistance 7 days a week, 24 hours a day

We are here for you
888-724-7240
TDD/TTY 711



We Are Recruiting!

Contracting for Two Networks:



Fee-for-Service (FFS) Medi-Cal Provider Network

Specialty Mental Health Services:

- Advanced Outpatient Services
- Psychiatric Consultations
- Medication Management
- Psychological Testing



Treatment & Evaluation Resource Management (TERM) Provider Network

Child and Family Well-Being & Juvenile Probation Systems Services:

- Specialized Therapy
- Forensic Evaluations

Growing our richly diverse provider networks

Seeking:

- Master’s Level Clinicians
- Psychologists
- Psychiatrists
- Psychiatric Nurse Practitioners
- Psychiatric Physician Assistants

Gain Supportive Solutions:

As a Contracted Provider, Optum is with you every step of the way.

We are here for you through personalized:

- Collaboration
- Courtesy Reviews
- Referrals
- Claims Processing & Payments
- And more!

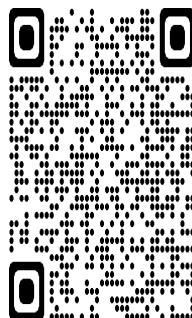
What providers are saying:

“Optum was positive and collaborative.”

“I never have to wait on hold for long periods of time which is appreciated.”

“Provider Services staff is always friendly, responds quickly and offers help with all situations/questions. Thank you.”

Are You Ready to Be Part of the Solution? Learn More Today!



Tina Garcia, Provider Recruiter
(619) 641-5308

tina.garcia@optum.com

optumsandiego.com



Optum serves as the Administrative Service Organization for the County of San Diego Behavioral Health Services.