

FSP OMA User's Group

October 29, 2024



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
QUALITY, OUTCOMES & TRAINING DIVISION



WELLNESS • RECOVERY • RESILIENCE



LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.

▶▶ Welcome to the FSP OMA User's Group

- **Welcome and Introductions**

▶▶ Objectives

- **Provide updates on any recent developments of the FSP applications**
- **Review FSP Reports**
 - FSP Baseline with no KEC – 1107
 - FSP Living Arrangement Exception Report - 1116
 - FSP Living Arrangement Report - 1236
 - High Outlier Residential Status by Program Name – 1233
 - Baseline Compliance Report

▶▶ FSP Baseline with no KEC – 1107

FSP Baseline with no KEC 1107 | Data updated 10/24/24 ▾



County of Los Angeles - Department of Mental Health
 Program Development and Outcomes Bureau
 FSP Baselines with no KEC Report

Provider Name

Search

FSP

FSP

FSP

Program Name

Search

Select all

Adult FSP

Housing FSP - MHSA

58
ClientID Count

Reset

| Current Provider Name | Program Name | PK BaselineID | Client ID | Name | AI Partnership Date |
|-----------------------|--------------------|---------------|-----------|------|---------------------|
| FSP OMA | Adult FSP | | | | 08/11/2021 |
| | | | | | 11/19/2021 |
| | | | | | 12/22/2021 |
| | | | | | 01/26/2024 |
| | | | | | 02/07/2024 |
| | | | | | 02/09/2024 |
| | | | | | 05/31/2024 |
| | | | | | 06/21/2024 |
| | | | | | 05/10/2024 |
| | | | | | 07/08/2024 |
| | | | | | 07/19/2024 |
| | | | | | 09/25/2024 |
| | | | | | 09/27/2024 |
| | Housing FSP - MHSA | | | | 11/14/2018 |
| | | | | | 07/23/2018 |
| | | | | | 10/18/2019 |
| | | | | | 11/11/2018 |

This confidential information is provided to you in accord with applicable Welfare and Institutions Code Section. Duplication of this Information for further disclosure is prohibited without the prior written consent of the patient/authorized representative to whom it pertains unless otherwise permitted by law. Destruction of this information is required after the stated purpose of the original request is fulfilled.

▶▶ FSP Living Arrangement Report - 1236

FSP_Living_Arrangement_Report_1236 | Data updated 10/24/24 ▾



Program Development and Outcomes Bureau
FSP Living Arrangement Report_1236

Billing Provider Name

Search

Select all

Current Program Name

Search

Select all

Adult FSP

Child and Young Adult FSP

Forensic FSP (F-FSP)

Homeless FSP

Housing FSP - Measure H

↶ Reset

| Client ID | fsp_PartnershipType | fsp_Baseline ID | Client Name Last | Client Name First | fsp_Residential Type Name | Date From | Date To | fsp_Numdays |
|-----------|---------------------|-----------------|------------------|-------------------|---|------------|------------|-------------|
| | Pre-Partnership | | | | Acute Psychiatric Hospital/Psychiatric Health Facility (PHF) | | | 7 |
| | Post-Partnership | | | | In an apartment or house alone/with spouse/partner/minor children/other dependents/roommate (must hold lease or share in rent/mortgage) | 06/15/2017 | 09/10/2017 | 87 |
| | Pre-Partnership | | | | In an apartment or house alone/with spouse/partner/minor children/other dependents/roommate (must hold lease or share in rent/mortgage) | | | 358 |
| | Post-Partnership | | | | With one or both biological/adoptive parents | 09/11/2017 | 11/03/2017 | 53 |
| | Post-Partnership | | | | In an apartment or house alone/with spouse/partner/minor children/other dependents/roommate (must hold lease or share in rent/mortgage) | 08/15/2017 | 05/21/2019 | 644 |
| | Pre-Partnership | | | | In an apartment or house alone/with spouse/partner/minor children/other dependents/roommate (must hold lease or share in rent/mortgage) | | | 365 |

▶▶ High Outlier Residential Status by Program Name – 1233

High Outlier Residential Status by Program... | Data updated 10/24/24



COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
PROGRAM DEVELOPMENT AND OUTCOMES DIVISION
FSP OMA High Outlier for Residential Status

BillingProviderName

Search

Select all

fsp_currentprogramName

Search

Select all

Adult FSP

Assisted Outpatient Treatment FSP (AOT-LA-FSP)

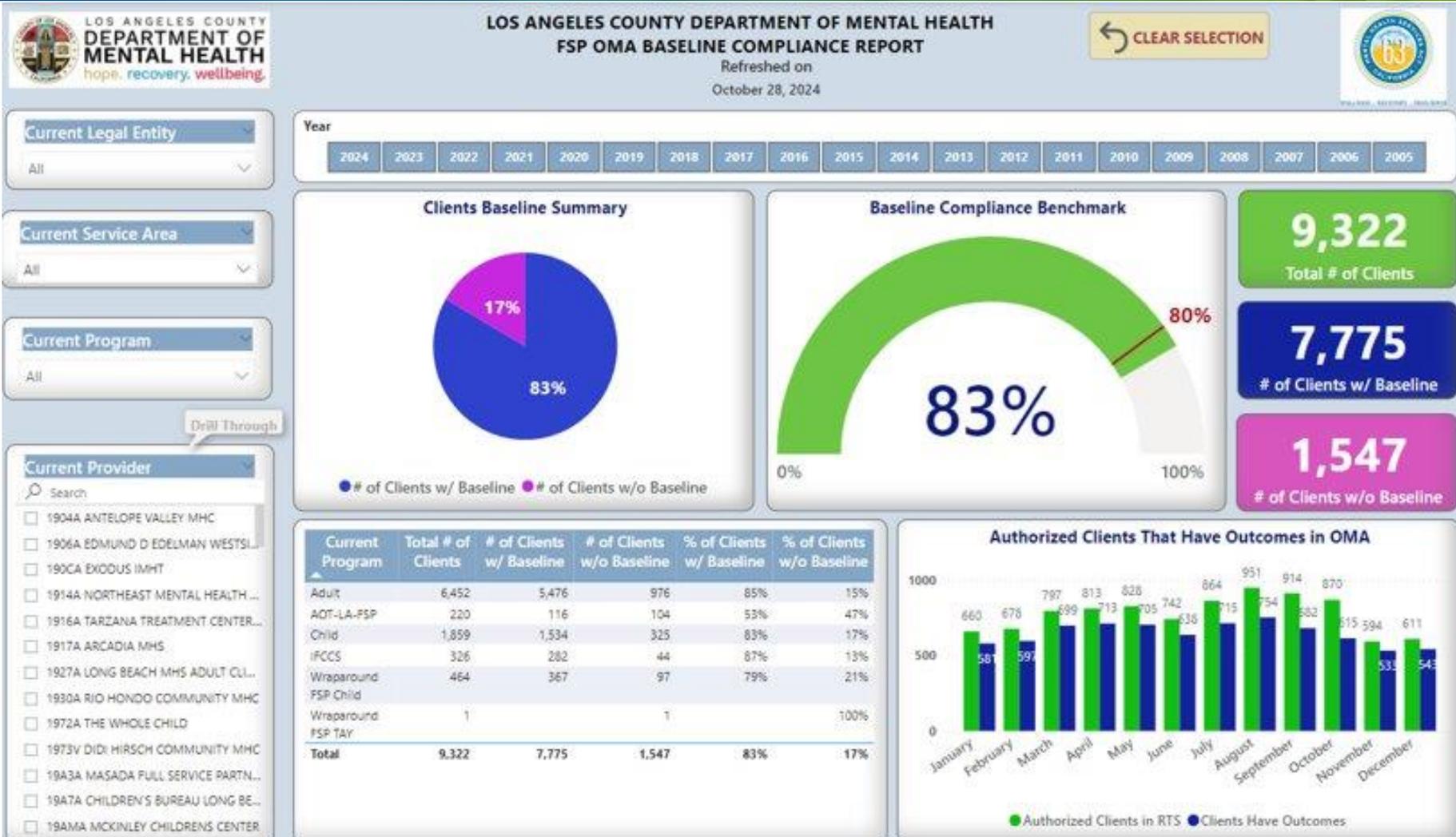
Child and Young Adult FSP



| EnrollmentStatus | BillingProviderName | fsp_clientId | ClientName | fsp_partnership date | fsp_PartnershipType | fsp_residentialtypename | DateFrom | DateTo | fsp_numdays |
|--------------------|--|-------------------|------------|----------------------|---------------------|-------------------------|------------|------------|-------------|
| Currently Enrolled | [Redacted] | [Redacted] | [Redacted] | [Redacted] | Post-Partnership | Jail | 01/31/2023 | 08/21/2023 | 202 |
| | | | | | | | 05/23/2024 | 10/20/2024 | 150 |
| | | | | | | | 10/18/2019 | 11/02/2019 | 15 |
| | | | | | | | 11/03/2019 | 05/31/2020 | 210 |
| | | | | | | | 07/06/2020 | 08/18/2020 | 43 |
| | | | | | | | 08/19/2020 | 09/10/2020 | 22 |
| | | | | | | | 10/09/2020 | 10/29/2020 | 20 |
| | | | | | | | 02/01/2021 | 04/25/2024 | 1179 |
| | | | | | | | 10/09/2020 | 11/02/2020 | 24 |
| | | | | | | | 05/11/2022 | 03/14/2023 | 307 |
| | | | | | | | 03/15/2023 | 10/20/2024 | 585 |
| | | | | | | | 04/24/2024 | 08/14/2024 | 112 |
| Post-Partnership | Homeless (includes people living in their cars) | Emergency Shelter | 06/05/2019 | 09/06/2020 | 459 | | | | |
| | | | 06/22/2021 | 10/20/2024 | 1216 | | | | |
| Post-Partnership | Acute Psychiatric Hospital/Psychiatric Health Facility (PHF) | 04/01/2024 | 07/31/2024 | 121 | | | | | |
| | | 08/01/2024 | 08/21/2024 | 20 | | | | | |
| Post-Partnership | Acute Psychiatric Hospital/Psychiatric Health Facility (PHF) | 08/25/2020 | 11/30/2021 | 462 | | | | | |
| | | 12/01/2021 | 02/01/2022 | 62 | | | | | |



▶▶ FSP OMA Baseline Compliance Report



▶▶ FSP OMA Baseline Compliance Report

Current LE ▼

Search

Current Provider ▼

Search

Current Age Group ▼

Adult

IS_No

All

Current SA ▼

2

Has OMA Baseline ▼

No

Yes

3

Total # of Clients

OMA Baseline Entry

Passed 30 Days

↶ RESET

| First Name | Last Name | IS No | Authorized Enrollment date | Dispo Provider | Dispo Program | Dispo SA | Current LE | Current Provider | Current Program | Current SA | Has OMA Baseline | OMA Current Provider | OMA Current Program | OMA Partnership date | # of Days in FSP | Baseline Entry |
|------------|-----------|-------|----------------------------|----------------|---------------|----------|------------|------------------|-----------------|------------|------------------|----------------------|---------------------|----------------------|------------------|----------------|
| | | | 5/30/2024 | | Adult | 2 | | | Adult | 2 | No | | | | 53 | Passed 30 Days |
| | | | 4/19/2024 | | Adult | 2 | | | Adult | 2 | No | | | | 94 | Passed 30 Days |
| | | | 5/17/2024 | | Adult | 2 | | | Adult | 2 | No | | | | 66 | Passed 30 Days |

▶▶ How to Filter for the OMA Form Status (LE)


Provider Application Portal

Full Service Partnership
3M | DCDR | **Assessments List** | Client Search | Help ▾

Home >
Assessments List

Form Type

Form Status

Provider

▼

▼

▼

☰ My Team Assessments ▾

| Assessment ID | Client ID | Client Name | Form Type | Program | Form Status | Partnership Date | Assessment Date ↓ | Provider | Modified On |
|---------------|-----------|-------------|-----------|---------|-------------|------------------|-------------------|----------|--------------------|
| | | | 3M | | Submitted | 4/27/2023 | 7/19/2024 | | 7/19/2024 10:58 AM |
| | | | 3M | | Submitted | 10/26/2023 | 7/19/2024 | | 7/19/2024 11:00 AM |
| | | | 3M | | Submitted | 4/26/2024 | 7/19/2024 | | 7/19/2024 11:03 AM |
| | | | 3M | | Submitted | 1/31/2020 | 7/19/2024 | | 7/19/2024 11:05 AM |
| | | | 3M | | Submitted | 4/27/2020 | 7/19/2024 | | 7/19/2024 11:07 AM |
| | | | 3M | | Submitted | 1/26/2023 | 7/19/2024 | | 7/19/2024 1:52 PM |
| | | | 3M | | Submitted | 1/24/2023 | 7/19/2024 | | 7/19/2024 11:48 AM |
| | | | 3M | | Submitted | 1/26/2024 | 7/19/2024 | | 7/19/2024 11:50 AM |
| | | | 3M | | Submitted | 1/30/2020 | 7/19/2024 | | 7/19/2024 11:51 AM |

▶▶ How to Filter for the OMA Form Status

Form Type Form Status Provider

▼ Baseline ▼ ▼ Saved ▼ ▼ ▼

Apply

My Team Assessments

| Assessment ID | Client ID | Client Name | Form Type | Program | Form Status | Partnership Date | Assessment Date ↓ | Provider | Modified On |
|---------------|-----------|-------------|-----------|---------|-------------|------------------|-------------------|----------|-------------------|
| | | | Baseline | | Saved | 7/16/2024 | 7/16/2024 | | 7/17/2024 5:26 PM |
| | | | Baseline | | Saved | 5/24/2024 | 5/24/2024 | | 6/10/2024 4:08 PM |
| | | | Baseline | | Saved | 11/29/2022 | 11/29/2022 | | 9/1/2023 2:43 PM |
| | | | Baseline | | Saved | 5/19/2022 | 5/19/2022 | | 9/19/2022 1:40 PM |
| | | | Baseline | | Saved | 12/9/2021 | 12/9/2021 | | 5/1/2024 3:13 AM |
| | | | Baseline | | Saved | 4/16/2021 | 4/20/2021 | | 9/2/2022 9:40 PM |
| | | | Baseline | | Saved | 4/7/2021 | 4/18/2021 | | 9/2/2022 8:38 PM |
| | | | Baseline | | Saved | 1/19/2021 | 3/8/2021 | | 9/2/2022 1:33 PM |
| | | | Baseline | | Saved | 2/9/2021 | 2/26/2021 | | 9/2/2022 7:00 PM |
| | | | Baseline | | Saved | 12/17/2020 | 12/19/2020 | | 9/2/2022 1:52 PM |

▶▶ How to Filter for the OMA Form Status

Form Type: Form Status: Provider:

| Assessment ID | Client ID | Client Name | Form Type | Program | Form Status | Partnership Date | Assessment Date ↓ | Provider | Modified On |
|---------------|-----------|-------------|-----------|---------|-------------|------------------|-------------------|----------|--------------------|
| | | | KEC | | Saved | 6/30/2022 | 2/5/2024 | | 4/10/2024 11:44 AM |
| | | | KEC | | Saved | 3/22/2023 | 1/29/2024 | | 2/22/2024 10:40 AM |
| | | | KEC | | Saved | 10/28/2021 | 12/8/2023 | | 2/22/2024 11:56 AM |
| | | | KEC | | Saved | 3/1/2023 | 9/27/2023 | | 10/20/2023 3:10 PM |
| | | | KEC | | Saved | 6/12/2023 | 6/15/2023 | | 6/20/2023 2:09 PM |

▶▶ How to Filter for the OMA Form Status

Form Type

Form Status

Provider

Apply

My Team Assessments



| Assessment ID | Client ID | Client Name | Form Type | Program | Form Status | Partnership Date | Assessment Date ↓ | Provider | Modified On |
|---------------|-----------|-------------|-----------|---------|-------------|------------------|-------------------|----------|--------------------|
| | | | 3M | | Saved | 1/5/2018 | 4/5/2022 | | 8/15/2022 6:27 PM |
| | | | 3M | | Saved | 3/26/2020 | 9/26/2021 | | 8/15/2022 10:00 PM |
| | | | 3M | | Saved | 9/26/2019 | 9/26/2021 | | 8/15/2022 10:00 PM |
| | | | 3M | | Saved | 9/19/2019 | 9/19/2021 | | 8/15/2022 10:12 PM |
| | | | 3M | | Saved | 4/10/2020 | 7/10/2021 | | 8/15/2022 10:16 PM |
| | | | 3M | | Saved | 10/5/2020 | 4/4/2021 | | 8/16/2022 8:07 AM |

▶▶ How to Filter for the OMA Form Status (DO)

Dynamics 365 | **Active Assessments** Edit columns Edit filters

| <input type="checkbox"/> | Assesm... ↓ | Client Name ↓ | Client ID ↓ | Baseline ↓ | Form Type ↓ | Age Group ↓ | Partnership... ↓ | Assesm... ↓ | Provider ↓ | Program ↓ | Form Status ↓ | Created By ↓ | Portal User ↓ |
|--------------------------|-------------|---------------|-------------|------------|-------------|-------------|------------------|-------------|------------|--------------|----------------------|--------------|---------------|
| <input type="checkbox"/> | | | | 0592022 | KEC | OA | 5/14/2020 | 3/30/3021 | | Homeless FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0569788 | KEC | Adult | 12/6/2023 | 7/25/2024 | | Adult FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0595260 | 3M | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0595260 | KEC | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0595260 | KEC | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0595260 | KEC | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0595260 | KEC | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | Submitted | | |
| <input type="checkbox"/> | | | | 0595260 | KEC | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | Submitted | | |

Navigation Menu:

- Home
- Recent
- Pinned
- Full Service Partnership
 - Clients
 - Assessments**
 - 3M Notifications
 - DCCR Portal
 - DCCR Administrator
- Documentation
 - FSP DO User Guide
 - FSP Release Notes
 - Outcomes Website

▶▶ How to Filter for the OMA Form Status (DO)

Active Assessments ▾

Edit columns Edit filters Filter by keyword

| <input type="checkbox"/> | Assessm... ▾ | Client Name ▾ | Client ID ▾ | Baseline ▾ | Form Type ▾ | Age Group ▾ | Partnership... ▾ | Assessm... ▾ | Provider ▾ | Program ▾ | Form Status ▾ | Created By ▾ | Portal User ▾ |
|--------------------------|--------------|---------------|-------------|------------|-----------------------------------|-------------|------------------|--------------|------------|--------------|---|--------------|---------------|
| <input type="checkbox"/> | | | | | Filter by | | 5/14/2020 | 3/30/3021 | | Homeless FSP | Filter by | | |
| <input type="checkbox"/> | | | | | Equals | | 12/6/2023 | 7/25/2024 | | Adult FSP | Equals | | |
| <input type="checkbox"/> | | | | | | | 2/8/2024 | 7/25/2024 | | Adult FSP | | | |
| <input type="checkbox"/> | | | | | <input type="checkbox"/> Baseline | | 2/8/2024 | 7/25/2024 | | Adult FSP | <input checked="" type="checkbox"/> Saved | | |
| <input type="checkbox"/> | | | | | <input type="checkbox"/> KEC | | 2/8/2024 | 7/25/2024 | | Adult FSP | <input type="checkbox"/> Incomplete | | |
| <input type="checkbox"/> | | | | | <input type="checkbox"/> 3M | | 2/8/2024 | 7/25/2024 | | Adult FSP | <input type="checkbox"/> Complete | | |
| <input type="checkbox"/> | | | | | KEC | TAY | 2/8/2024 | 7/25/2024 | | Adult FSP | <input type="checkbox"/> Submitted | | |

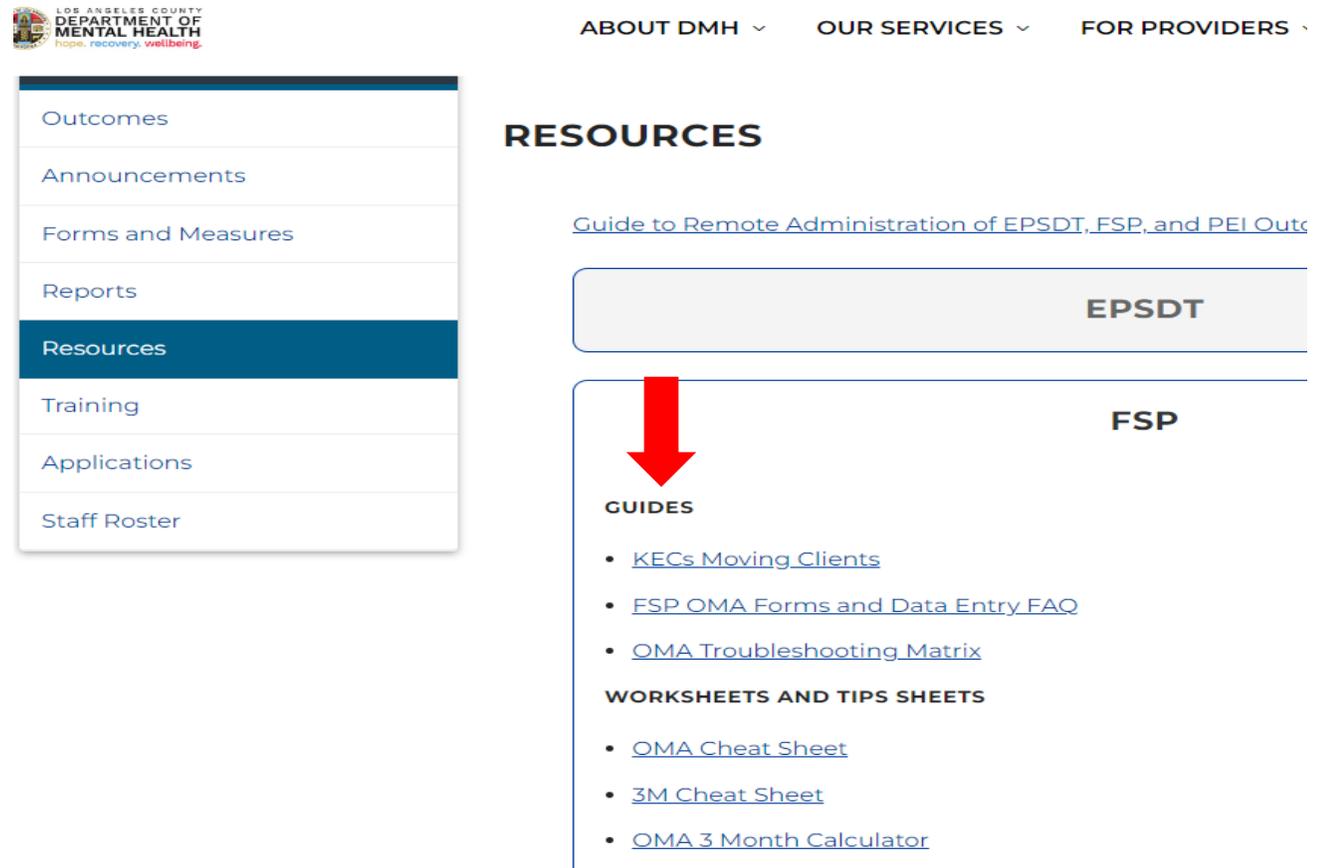
▶▶ Things to Remember

- Be sure to update probation status as it changes
- Be sure to update Living Arrangement when reestablishing a client and when receiving a transfer
- Always double check that you are logged in as the provider that you're entering data for
- Please contact other providers directly for client specific requests
- Always use Microsoft Edge browser to open FSP OMA
- Don't forget to Save work as you go and hit "Submit" only when assessment is completed
- Always use **secure** email when sending any PHI
- Do not put PHI in subject line of email (not encrypted)

▶▶ FSP Resources

Outcomes website: <https://dmh.lacounty.gov/outcomes/resources/>

- OMA 3 Month calculator
- KEC Moving Clients guide
- FSP OMA Forms and Data Entry FAQ



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ABOUT DMH ▾ OUR SERVICES ▾ FOR PROVIDERS ▾

RESOURCES

[Guide to Remote Administration of EPSDT, FSP, and PEI Outcomes](#)

EPSDT

FSP

GUIDES

- [KECs Moving Clients](#)
- [FSP OMA Forms and Data Entry FAQ](#)
- [OMA Troubleshooting Matrix](#)

WORKSHEETS AND TIPS SHEETS

- [OMA Cheat Sheet](#)
- [3M Cheat Sheet](#)
- [OMA 3 Month Calculator](#)

▶▶ OMA Labs and OMA Alerts

- **HELP DESK: (213) 351-1335**
- **OMA Labs**
 - Wednesdays 9:00AM-10:00AM (link on Outcomes website)
- **OMA Alerts**
 - Stay informed and connected:
FSPoutcomes@dmh.lacounty.gov

▶▶ Questions or Additional Information

- **Outcomes Website:**
<http://dmh.lacounty.gov/outcomes/>
- **FSP Outcomes e-mail address:**
FSPoutcomes@dmh.lacounty.gov

Questions?



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