

**LOS ANGELES COUNTY- DEPARTMENT OF MENTAL HEALTH
Service Area II Program Administration**

**Adult Quality Improvement Committee Meeting
March 15, 2017
San Fernando Mental Health Center
10:00 am-12:00 pm
Agenda**

Welcome- Introductions & Agency Updates All
Review and Adoption of January 2018 Minutes* All

Quality Improvement

Clinical Quality Improvement Office of the Medical Director
 Pharmacy Update
 Safety Intelligence**
Access Center – Capacity Kimber/All
Policy Updates* Office of Compliance
PRO** Office of Pt's Rights
QI Updates/Announcements All

Quality Assurance

Audits All
 OIG
Medi-cal Certification Kimber
State DHCS Updates Kimber/All
 Final Rule*
 Network Adequacy**
Training & Operations Kimber/All
 Documentation Trainings*
 CC Attestations
QA Policy Updates & Technical Asst Kimber
 Clinical Forms & Quality Assurance Bulletins* Kimber
QA Announcements All

Other

How is this information disseminated in your agency All
Future Agenda Items & Adjournment All

Handout*
Sent Via Email**

Next Meeting for SA 2 Adult QIC: May0 17, 2018 at 10-12 pm

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Adult
QUALITY IMPROVEMENT COUNCIL (QIC) Minutes

Type of Meeting	Service Area 2 Adult Quality Improvement Committee	Date:	March 15, 2017	
Place	10605 Balboa Ave 2nd fl Conference Room	Start Time:	10:00 a.m.	
Chair	Kimber Salvaggio	End Time:	12:00 p.m.	
Co-Chair	None			
Members Present	APCTC - Tiger Doan Child & Family Ctr – Tracie Tewksbury Didi Hirsch – Aminah Ofumbi DMH SB 82 - Ramona Casupang DMH SCVMHC - Sabrina Barscheski DMH SFMHC – Diana Garcia DMH Urgent Care – Amy Kress ECDA – Angie Sanchez El Dorado – Amber Cordero Hillview MHC – Catherine Dalley IMCES - James Pelk JFS - Dora Escalante SFVCMHC, Inc. - Leslie Di Mascio Tarzana Tx Ctr - Karry Friedman Tarzana Tx Ctr – Sherry Winston Topanga West Guest Home/ ACT Wellness Ctr - Michelle Logvinsky			
Absent Members	DMH PRO - DMH PSB Countywide QA - DMH PSB Countywide QID - LyNetta Shonibare DMH PSB Cert – DMH PSB Cultural Competency Unit – PACS-LA - SFVCMHC, Inc. - Angela Khan Tarzana Tx Ctr – Lorraine Ragosta DMH WVMHC –			
Agenda Item & Presenter	Discussion and Findings	Decisions Recommendations Actions Tasks	Person Responsible	
Call to Order & Introductions	The meeting was called to order at 10:00 a.m.	Introductions were made	K. Salvaggio	
Review of Minutes	Review and Adoption of January 2018 Minutes		All	

<p>Compliance, Privacy & Audit SVCS Bureau</p>	<ul style="list-style-type: none"> ○ Date of request to date of assessment then date of next appt and when did they actually come in and tx services appt – may require a change in work flow <p><u>Policy Updates *</u> See handout</p>		<p>Provided by Compliance Unit</p>
<p>Pt's Rights</p>	<ul style="list-style-type: none"> • Grievances and Appeals-Final rule Update <ul style="list-style-type: none"> ○ Automated – file complaints electronically – if provider can resolve within 24 hours PRO still needs to log ○ Grievances have chgd • COP Updates <ul style="list-style-type: none"> ○ Change of provider application is done – training manual needs clarification and simplistic ○ Provider can create a report ○ Info on outlook with forms and impt info on the calendar 	<p>Kimber reminded all that all info needed for logs has been placed on outlook as a recurring mtg invitation with forms and impt info</p>	<p>Provided by PRO Staff-reported by Kimber</p> <p>Kimber/All</p>
<p>Cultural Competency</p>	<ul style="list-style-type: none"> • Org assessment – tool being finalized – 65 questions and demographics about 15 minutes to complete • The Health agency – health equity lead is DPH <ul style="list-style-type: none"> ○ Infant mort ○ Sex transmitted infections ○ Health neigh ○ Environmental justice ○ Cultural and linguistic competency – dmh will be the lead – task force institute being setup 		
<p>QI Updates & Announcements</p>	<p>QID Updates</p> <ul style="list-style-type: none"> • Open –ended comments summaries <ul style="list-style-type: none"> ○ some providers did well (made some plans e.g. we will do this in March – are the QIC liaisons checking in if it was done in 		

	<p>March)</p> <ul style="list-style-type: none"> ○ Asking for longer sessions ○ Extending hours and weekends ○ Calls not being returned by staff – set aside return call times ○ Rx services being delayed ○ More groups ○ Info about the groups is not well advertised <p>QI Announcements</p> <ul style="list-style-type: none"> ● Test Calls Project <ul style="list-style-type: none"> ○ Non-English calls were interpreter services provided/offered ○ Medication will now go under SMHS ○ SMHS, Crisis & beneficiary are the categories ○ SA 2 will complete calls in June 		
<p>Audits</p> <p>Medi-Cal Certification</p> <p>State DHCS Updates</p>	<p style="text-align: center;"><u>QUALITY ASSURANCE</u></p> <p>None Report</p> <ul style="list-style-type: none"> ● 2 providers w/in the LMHP are out of compliance ● Fire clearance & NPI updates is the main reason for delay ● Medicaid parity final rule <ul style="list-style-type: none"> ○ Updates requirement for handouts for beneficiaries' materials provider directory, etc. July 2018 ○ Grievances and appeals – time frames and adverse benefits ○ Expansion of NOA-A; not providing service the client wants ○ Program integrity – fed database checks from 2 databases to 5 databases ○ Record keeping requirements keep for 10 years ○ Mh and addiction parity act – 5 components ● Medicaid parity final rule – network adequacy <ul style="list-style-type: none"> ○ Adequacy rules due by July 1, 	<p style="text-align: center;"><u>QUALITY ASSURANCE</u></p>	<p>All</p> <p>Provided by PSB-certification staff reported by Kimber</p> <p>Provided by PSB-QA staff reported by Kimber</p>

<p>Training & Operations*</p> <p>Policy Updates & Technical Asst.</p>	<p>2018 stds must be met</p> <ul style="list-style-type: none"> ○ Time and distance within 15 miles or 30 min ○ Timely access – when asked how qic do we offer an appt? ○ currently 15 days chging to 10 biz days psy md 15 days - urgent services (no pre-auth) 48 hours 96 hours for pre-auth ○ urgent =w/out immediate asst clt will need emergency services =5150 ○ Heavy lift – crazy making!!! Short notice certify network July 1, 2018 march 30 need to send documents to state <ul style="list-style-type: none"> ▪ At LE and PN and Individual Practitioner level info needed ▪ Application developed – see handout - Wednesday morning is release date – PH’s & DC’s and QA with temp pswd ▪ Some info will be pre-populated with best guess ▪ <u>DUE MARCH 23RD IN THE APPLICATION</u> ▪ This will be done every 3 months <ul style="list-style-type: none"> ● See handout ● Cultural competency training Attestations– some providers didn’t complete the attestations – no signature ● Final QA bulletin 18-01 co-practitioners <ul style="list-style-type: none"> ○ Documentation doesn’t chg- claiming chgs-can still write one note as long as you can submit a claim for each practitioner separately –must be submitted by feb 1 date of svc or claim? April 10 implementation date ○ Create 2 groups of the same ○ groups bill for entire clx time 		<p>Provided by PSB-QA staff reported by Kimber</p> <p>Provided by PSB-QA staff reported by Kimber</p>
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<p>HIM</p>	<p>each clx gets 60 minutes; claim for active listening (iep) if what's being discussed is relevant to MH and your clt then claim in mtgs vs targeted intervention during a plan development</p> <ul style="list-style-type: none"> ○ moment of service level • Draft QA Bulletins: Documentations Reminders for groups <ul style="list-style-type: none"> ○ No new info just reminders • QA requirements for DO's <ul style="list-style-type: none"> ○ Training on this soon ○ April 1st live no more paper submissions after April 15 • Access to care timeliness & SRL data: CSI requirements <ul style="list-style-type: none"> ○ Will look at data points thru csi ○ Finalizing the data with cms ○ Date of request to date of assessment then date of next appt and when did they actually come in and tx services appt – may require a change in work flow • Side bar on record retention – 10 years or age 25 for someone who rec'd services as a minor 		<p>Provided by PSB-HIM Staff reported by Kimber</p>
<p>Announcements</p>	<ul style="list-style-type: none"> • SSR: chart review <ul style="list-style-type: none"> ○ Review period- potentially in the review period now • Back to basics presentations at clinics <ul style="list-style-type: none"> ○ 2 hour training – ibhis error correction replaces ibhis doc refresher 		
<p>Handouts</p>	<ul style="list-style-type: none"> ➤ Draft of January 2018 Minutes ➤ Medicaid Final rule (Parity) 02/12/18 ➤ SA 2 Adult QIC List of Sites from Compliance ➤ February 2018 & March 2018 Policy Updates ➤ March 2018 Documentation Training Sch'd 		
<p>Next Meeting</p>	<ul style="list-style-type: none"> ➤ May 17, 2018 		

Respectfully Submitted,

Kimber Salvaggio