SA5 Quality Improvement Committee Meeting

August 25, 2020

Meeting Agenda

- Welcome and Introductions
- ▶ DMH and SA5 Updates
- Quality Assurance
- Quality Improvement
- ▶ Next SA5 QIC Meeting November 17, 2020

Quality Assurance

- Covid-19 Telehealth Updates (Prescribing, Out-of-State, Billing Provider)
- Clinical Guidance re: Assessing and Treating 0-5 Population during Covid-19
- QA Bulletin, NO. 20-02, Co-Occurring Mental Health & Substance Use Disorders - Documentation and Claiming Reminders, June 8, 2020
- Clinical Forms Bulletin, No. 20-02, June 30, 2020
- MH 740 Notice to Psychotherapy Clients (For Licensed or Registered Practitioners w/ BBS)
- MH 741 Notice to Psychotherapy Clients (For Unlicensed or Unregistered Practitioners)
- QA Bulletin, No. 20-03, Updates to the Included and Allowable ICD-10-CM Diagnoses Lists, August 13, 2020
- Documentation Trainings (DO and LE)
- ▶ LE Chart Reviews
- Medi-Cal Certification Updates
- Network Adequacy / Access to Care

Quality Improvement

- Reminder: EQRO Week of September 28
 - SA2 and SA5
 - Focus on Access to Care during Covid-19
- DO and LE Provider Feedback: CPS Survey Spring 2020 Administration
- SA5 Fall 2019 CPS Results Jen Regan, PhD

Provider Check-Ins

- Alcott Center
- Clare Matrix
- Dídí Hirsch
- Edelman Adult
- Edelman Child
- Exceptional Children's Foundation
- Exodus Recovery
- Family Service of Santa Monica
- Homes for Life
- New Directions for Veterans

- PACS
- Providence St. John's
- SHARE!
- St. Joseph Center
- Step Up on Second
- The Help Group
- The People Concern
- UCLA Ties for Families
- Vista Del Mar

Next SA5 QIC Meeting:

Tuesday, November 17, 2020 10:00 - 11:30 am

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH SA 5 Quality Improvement Committee Minutes

Type of Meeting	Quality Improvement Committee	Date:	August 25, 2020
Place	DMH SA5 Administration, 11303 West Washington Blvd.,	Start Time:	10:00 AM
	Suite 200, Los Angeles, CA 90066		
Chair	Dara Vines, DMH	End Time:	11:30 AM
Co-Chair	Misty Aronoff, Step Up On Second		
Members	Dara Vines, DMH; Misty Aronoff, Step Up On Second; Mar	tha Andreani, Providence	St. John's: Jennifer
Present	Regan, DMH QI; Araceli Barajas, UCLA Ties for Families; Danielle Price, The Help Group; Patrice Grant,		
	Edelman (Child); Eloisa Ramos Robles, Exceptional Children's Foundation; Marina Eckhart, Didi Hirsch;		
	Johanna Aguiluz, The People Concern; Caitlyn O'Hara, Alcott Center; Wendy Coloma. The People Concern:		
}	Claudia Angel, Exceptional Children's Foundation, Angeline Loch, The People Concern, Kelly Delish, Family		
	Service of Santa Monica / VDM; Stephanie Yamada, PACS	S; Michelle Matthews, Edel	man (Adult); Christina
	Tuman, Clare Matrix; Cheryl Carrington, Vista Del Mar; Renee Lee, QA – Medi-Cal Certification. Lance		
	Lenford, DMH; David Lee, DMH; Mandy Sommers, St. Joseph Center; Libby Hartigan, SHARE!; Enriqueta		
P* 110.1	Allred, Didi Hirsch; Esther Lee, CMMD/DMH.		
Excused/Absent	Jacquelyn Wilcoxen, DMH; Marc Borkheim, DMH QA; Sherry Nourian, Vista Del Mar; Jorge Alfaro,		
Members	Providence St. John's; David Tavlin, Step Up On Second; Jeanine Caro-Delvaille, The Help Group; Filipo		
	Forni, New Directions for Veterans; Anahita Saadatifaid, Homes for Life; Kristine Santoro, Didi Hirsch, Evelyn		
ļ	Leonidas, Didi Hirsch; Nataly Cohen, Didi Hirsch; Kathy Shoemaker, Exodus Recovery; David Kneip, Exodus		
	Recovery; LeeAnn Skorohod, Exodus Recovery; Deborah Gibson, Homes for Life Foundation; Sara Nouri,		
	Alcott Center; Kristi Rangel, Alcott Center; Aminah Ofumbi, Didi Hirsch; Camille Dennis, SHARE!; Gaby		
ļ	Cardenas, St. Joseph Center; Trish Burkett, Exodus Recovery; Nilsa Gallardo, Edelman – Adult; Dennis		
	Gennis, Clare/Matrix; Theodore M. Cannady, DMH; Maria Tan, OASOC; Martha Andreani, Providence St.		
	John's; Blair Ibarra, Exodus; Angeline Loch, The People Co	oncern.	
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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations/Schedu Task	ns Responsible/
Call to Order & Introductions	The meeting was called to order at 10:00 AM. Meeting was conducted via MS Teams and telephone due to Covid-19 Pandemic.		Dara & Misty QIC Membership
Review of Minutes and Handouts	SA5 QIC Meeting Minutes and Trouble Shooter Roster for May 26, 2020 were emailed to participants for their review and approval prior to today's meeting. Participants were asked to review the May Minutes and current Trouble Shooter and email updates/corrections to QIC Chair.	SA5 QIC Agenda and Minutes for March 3, 2020 were posted to the DMH website.	QIC Membership Dara
DMH Updates	None.		
Quality Assurance	Covid-19 Telehealth Updates (Prescribing, Out-of-State, Billing Provider) Prescribing: Controlled substances must have a two-way audio-visual real time communication. Out-of-State: If the client is currently residing out-of-state, refer to that State's laws regarding service provisions by licensed staff. If the practitioner is out-of-state, you may provide services within California if licensed in this state. Billing Provider: Claims and billing is dependent on where (i.e., the provider number) the practitioner is assigned to work. SA5 QIC members requested more information about treeting clients who are out of states are set of states.	Dara will contact QA to	Providers
	treating clients who are out-of-state or out of the country. QA is reportedly working on a set of FAQs.	enquire about FAQs on this topic.	

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Quality Assurance	Clinical Guidance re: Assessing and Treating 0-5 Population during Covid-19 This Clinical Guidance document was put together by the DMH Prevention Services Division. It addresses the importance of using face-to-face methods with children under 5 years old (either via telehealth or in person), when possible. The ability to observe the child as well as the dyadic relationship with a caregiver is considered an important aspect of treatment with this age group.	The Clinical Guidance document was emailed to providers prior to the meeting.	Providers
	 QA Bulletin No. 20-02, Co-Occurring Mental Health and Substance Use Disorders – Documentation and Claiming Reminders, June 8, 2020 1. Establish Medical Necessity – There must be an "included" mental health diagnosis but you may also have a co-occurring "excluded" diagnosis regarding substance abuse. If the client only has a substance use disorder, medical necessity has not been met and the client should be referred to an appropriate substance use treatment program. 2. Develop a Treatment Plan – Treatment goals/objectives on the Client Treatment Plan must address the client's identified mental health needs. 3. Providing Treatment Services (Interventions) – Progress notes must focus on client's mental health condition and tie back to medical necessity. MHS and MSS interventions aimed solely at the client's substance use/abuse are not biliable as SMHS. 	QA Bulletin No. 20-02 was emailed to providers prior to the meeting.	Providers

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Quality Assurance	 Clinical Forms Bulletin No. 20-02, Notice to Psychotherapy Clients (For Licensed or Registered Practitioners Effective 7/1/20, all BBS psychotherapists are required to provide a notice to each of their clients that identifies where the client can file a complaint in accord with current law. Dr. Patrice Grant, MH Clinical Program Manager at the Edelman-Westside Child and Family Program, requested information regarding whether the BBS Notifications to Psychotherapy Clients can be tracked in IBHIS to insure staff compliance. Quality Assurance Bulletin, No. 20-03, Updates to the 	Clinical Forms Bulletin No. 20-02 was emailed to providers prior to the meeting. Dara to contact QA to see if there is a method to track (in IBHIS) BBS Notifications given to clients. (DO only). QA Bulletin No. 20-03	Providers
	Included and Allowable ICD-10-CM Diagnoses Lists, August 13, 2020 Updates are effective 10/1/19 but providers do not need to make retroactive changes. 1) No longer use R69 as it was removed from DSM 5. Use Z03.89 "Encounter for Observation for Other Suspected Diseases and Conditions Ruled Out" (previously referred to as "No Diagnosis") during the assessment period; 2) F84.0 Autistic Disorder (Autistic Spectrum Disorder) was added as an included diagnosis. Do not use PDD criteria as previously directed in QA Bulletin 17-07. Although Autistic D/O is "included", no new obligation exists for treating it under SMHS. Regional Centers and Managed Health Care Plans should continue to provide the services for which they are responsible (e.g., ABA).	was emailed to providers prior to the meeting.	riovideis

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Quality Assurance	 Documentation Trainings (DO and LE) https://dmh.lacounty.gov/qa/qa-training/ Please refer to the QA website for webinar training: Trainings for DO Providers using IBHIS – Training modules related to practice/discipline. Central Training for LE and Juvenile Justice Halls/Camps – General documentation and claiming guidelines. 		Providers
	LE Chart Reviews LE Chart reviews will resume shortly. QA will not be going to the provider agencies for a physical review of charts. Providers will be asked to send pdf chart materials via secure email or print and deliver requested information to DMH.		Providers
	 Medi-Cal Certification Updates There is an update to the Medi-Cal Certification Checklist (revised 8-12-2020). We are still operating under the 1135 Waiver. Since the Fire Clearance and onsite visits are currently being waived, the Certification Team will reach out 2 mos in advance (rather than 10 mos) for upcoming Re-Certifications. The Certification Team will not be conducting virtual visits at this time At the conclusion of the 1135 Waiver, the Certification Team will reach out to Providers to coordinate an onsite visit (starting with March desk reviews). 		Renee Lee, PhD Providers

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Quality Assurance	 Network Adequacy/Access to Care Please refer to Network Adequacy/Access to Care webinars for detailed information. QA is developing an Access to Care Monitoring Plan for DO and LE. Make sure that SRL and SRTS data and case dispositions are entered in a timely manner. Update NACT in a timely manner, including if the provider is not accepting new clients. 		Providers
Quality Improvement	 Reminder: EQRO Week of September 28 SA2 and SA5 Focus on Access to Care during Covid-19 		Providers
	DO and LE Provider Feedback: CPS Survey Spring 2020 Administration Dr. Jen Regan of the QI Unit led a service area discussion regarding the most recent CPS Survey. SA5 providers gave feedback regarding conducting the CPS during the pandemic, including administering the CPS surveys electronically for the first time. Discussed challenges and elicited ideas that could have improved the process. Dr. Regan was appreciative of provider participation given current circumstances.		Jen Regan, PhD Providers

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	SA5 Fall 2019 CPS Results – Jen Regan, PhD Dr. Jen Regan, QI Liaison, gave a PowerPoint presentation on SA5 specific results of the Fall 2019 CPS. Data was presented in context of several earlier CPS findings and providers were engaged to generate hypotheses to help explain data trends. Examples were given as to how to make findings more meaningful for providers.		Jen Regan, PhD Providers
	Provider Check-Ins SA5 DO and LE Providers provided an update regarding their adjustment to providing telehealth during the COVID-19 pandemic. Most were appreciative of the guidelines from QA and indicated that they are continuing to deliver services and in some cases expanding services in response to the pandemic.		Providers
	The next Service Area 5 Quality Improvement Committee Meeting will be held on November 17, 2020 via MS Teams. DO and LE Providers will continue to be invited to participate in the Monthly Countywide QA/QI Meeting.		

Respectfully Submitted,

Dara Vines, PhD (Chair)