LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH
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**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 QUALITY IMPROVEMENT COMMITTEE (QIC) MEETING
09/16/2020
1:30PM-3:30PM**

Type of meeting:	Virtual monthly meeting via MS Teams
SA 8 QI Meeting Link and Slides:	Link to the meeting video is listed below. Started recording late so about the first hour of the meeting is missing (which is the QA portion); however the QI part of the meeting is recorded. http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=8550 View attached slides in lieu of full minutes (meeting notes).
Members Present:	See attached

AGENDA ITEMS	DECISIONS AND ACTIONS	RESPONSIBLE UNIT/STAFF	DUE DATE
QI webpage	https://dmh.lacounty.gov/qid/		
Electronic sign-in	Link was provided during the meeting and on the slides to record attendance: https://tinyurl.com/y4583hr8		
DMH SA 8 Announcement	**New SA 8 Chiefs:** Sharing responsibility and oversight of directly operated clinics and administrative programs: Lori M. Willis, PhD, MPA, Division Chief Outpatient Services – overseeing LB Child & Adolescent Pgm, TIES for Families, Harbor-UCLA Outpatient MHS, Navigation/Admin team, and other assignments (effective 7/2/20)		

	• Scott Hanada, LCSW, MH Program Manager III – (effective 9/1/20) overseeing Coastal, LB Adult, LB API, San Pedro, South Bay, Telemental Health, DMH Warmline, and other assignments **SA 8 Provider's Meeting** – Next meeting: October 22nd at 10:30am-12:00pm. Contract providers will receive invite from their contract liaison.
See attached meeting slides and SA 8 QI/QA meeting recording.	
Central Monthly QA/QI meeting	• **Combined QI and QA meeting on 9/14/20 –video recording link:** • https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=8537 • Countywide QIC Meetings – register for the Central QA/QI Monthly Meeting https://tinyurl.com/QA-QI-Meeting-Invite
Access To Care and Network Adequacy Webinar 9/8/20	• Will send out meeting recording once link is available • Contact Howard Washington to be added to invite list: Hwashington@dmh.lacounty.gov

Notice of Adverse Benefits Determination	• New forms that will replace NOA forms will be available 10/1/20
	• 9 types of NOABD forms were discussed (see slide #15)
	   ○ Service Delivery – replaces the NOA-A for not meeting medical necessity
	   ○ Timely Access – replaces the NOA-E for untimely services.

QI Updates	1. **Consumer Perception Survey –** No Fall surveys
	2. **EQRO –** week of 9/28/20 – 10/1/20
	   • SAs 2 & 5
	   • Focus on Access To Care during COVID19 crisis; Access to care and timeliness metrics (e.g., Network Adequacy, Final Rule)
	   • DMH Strategic Plan updates
	   • Sessions will be held virtually via Zoom

Policy Updates – 8/31/20	Discussed Policy updates: 106.03-P: Procedures - Employee's Ability to Participate in Federally Funded Health Care Programs

	106.04-P: Procedures - Contractor's Eligibility to Participate in and Secure Federally Funded Health Care Program Contracts 301.03: Management of Aggressive Client Behavior in Settings Without Lanterman-Petris-Short Designation 300.07: Use of Client Information for Publication • See slides for list of deleted policies
ACCESS Center	**Clinics temporarily not accepting referrals – SA 8 has 1 agency listed** • Please make sure to update NAS to push most current information into the Provider Directory including whether or not the agency is accepting new referrals.
EQRO – week of 9/28/20	• SAs 2 & 5 will be reviewed • Focus will be on access to care during COVID-19 crisis

Consumer Perception Surveys	• Mostly submitted online surveys
	• QI Co-chairs to review more in depth
	• Overall 259 sites participating representing 78% of those selected.
	• Majority of provider sites (almost 70%) chose to do electronic surveys only (18% paper and electronic; 15% paper only)
	• See slides for preliminary counts
	
	• **Stakeholder Engagement Project** (Lynetta Shonibare)
	  ○ Making CPS data more stakeholder friendly
	    • Pointed out by EQRO as well as a focus identified by LACDMH QI
	    • Solicit input from stakeholders at CCC, CLT and QIC meetings in July and August 2020
	    • Administer Feedback on Reporting Client/Family Satisfaction Data" survey and analyze results
	    • Use CQI processes for feedback loop

Change of Provider Logs (COP)	Please continue to submit (LEs email DMHCOP@dmh.lacounty.gov; DOs continue submitting via online app).

NEXT MEETING	No meeting in August. Next meeting will be held on September 16, 2020 from 2:30PM-3:30PM immediately after QA agenda items.

Minutes Recorded by Ann Lee, DMH SA 8 Administration

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 QUALITY IMPROVEMENT COMMITTEE (QIC) MEETING
09/16/2020
1:30PM-3:30PM**

Members Present:

NAME	AGENCY/PROGRAM
Ann Lee (SA 8 Liaison)	DMH SA 8 Administration
Anna Galindo	Personal Involvement Center
Annketse Desta	DMH
Anya Juvasvat	Dream Home Care Inc.
Brittany White	Personal Involvement Center
Carina Hernandez	Star View Community Services
Cheryl Malinowski	TELECARE MH Urgent Care Center (MHUCC)
Claudia Morales	Pacific Asian Counseling Services (PACS)
Courtney Stephens (co-chair)	Mental Health American Los Angeles (MHALA)
Dalia Diaz	Helpline Youth Counseling Inc.
Daphne King	South Bay Childrens Health Center
David Worden	SHIELDS for Families
Debra DeLeon	SSG-OTTP
Della Clayburg	DMH - Specialized Foster Care - South County
Demitri Richmond	1736 Family Crisis Center
Dexter Jefferson	Tarzana Treatment Center
Dora Anderson	Harbor UCLA MHS
Dr. Tiffany Harvey	Alafia Mental Health Institute
Elva Gutierrez	The Guidance Center
Erika Flores	Alafia Mental Health Institute
Frances Wyatt	SSG Alliance
Gabriela Rodriguez	South Bay Mental Health Center
Geralyn La Fleur	Personal Involvement Center
Helen Chang	DMH-Coastal API Family MHC
Irasema Sandoval	CA Mentor
Jamie Chess	Exodus Recovery, Inc.
Jeff Baer	DMH - LBCAP
Jesica Sandoval	AADAP, Inc.
Jocelyn Aguilar	For the Child
Jonathan Figueroa	Exodus Recovery
Karina Quintero	Shields for Families
Kathleen Villagomez	San Pedro Mental Health

Layhearb Poon	Long beach APIFMHC
Linda Nakamura	Masada Homes
Lisa Cash	SSG
Lisa Sumlin	Counseling4kids
MARC BORKHEIM	DMH QA
Mariela Gorosito	Telecare Corporation ERS/Step Down
Marissa Cabral	Tarzana Treatment Centers
Martin McDermott	Bayfront Youth & Family Services
Mayra Maciel	Ties for Families- South Bay
Melinda Kuoch	DMH HOME SA 8
Michele Munde (co-chair)	Star View Behavioral Health
Michelle R. Barajas-Sanchez	Olive Crest
Natalie Anderson	ChildNet
Nicole Santamaria Cuevas	Helpline Youth Counseling
Nizhu Minhaz	Counseling4Kids
Paula Valencia	Star View Behavioral Health Urgent Care Center (BHUCC) - LB
Queta Allred	Didi Hirsch MHS
Renee Yu	SSG Alliance
Rosa Diaz	Alma Family Services
Sangita Shukla	Aspiranet
Stephanie Yamada	Pacific Asian Counseling Services
Susan Osborne	MHALA
Tiffani Miller	For The Child
Yessica Brown	Crittenton Services for Children and Families

SA 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT COMMITTEE MEETING VIA SKYPE

September 16, 2020   1:30PM - 3:30PM

▶ Join Microsoft Teams Meeting

▶ +1 323-776-6996; Conference ID: 691 014 664#

▶ Electronic signin – please click the link to complete the sign in survey: https://tinyurl.com/y4583hr8

**If you are calling in, please put your phone on MUTE.
Do NOT use the hold feature since many phone systems play music and this disrupts the meeting.**

DMH SA 8 Announcements

DMH SA 8 Leadership:

➢ Lori M. Willis, PhD, MPA, Division Chief Outpatient Services – overseeing LBCAP, TIES for Families, Harbor-UCLA Outpatient MHS, Navigation/Admin team, and other assignments

➢ Scott Hanada, LCSW, MH Clinical Program Manager 3 – (effective 9/1/20) overseeing Coastal, LB Adult, LB API, San Pedro, South Bay, Telemental Health, DMH Warmline, and other assignments

SA 8 Provider's Meeting – Next meeting: September 24th at 10:30am-12:00pm

Central QA/QI meeting link and SA 8 QI/QA Meetings

➢ **Combined QI and QA meeting on 9/14/20 – video recording link:**

➢ https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmFlNGM2Y2MtNTQ5OC00Mzg3LTg5NmYtYzExODMzMTViM2M0%40thread.v2/0?context=%7b%22Tid%22%3a%2207597248-ea38-451b-8abe-a638eddbac81%22%2c%22Oid%22%3a%226829d411-dcc3-4715-9a94-fa36ac9c9e4c%22%2c%22IsBroadcastMeeting%22%3atrue%7d

➢ **SA 8 will continue to hold meetings via TEAMS** until safe to meet in person.

➢ **Electronic signin survey form** – Please submit to record your attendance. Link below and will also be emailed after this meeting with the meeting recording: **https://tinyurl.com/y4583hr8**

DHCS Updates

Items in development from DHCS

1. PAVE -
   - ✓ Individual practitioners and providers (programs/agencies) associated with county MHPs have not been required to be enrolled into the FFS Medi-Cal program.
   - ✓ However, with the implementation of the federal Cures Act (42 CFR 438.602(b)), certain licensed practitioners and types of providers (DO, LE and FFS) associated with MHPs must soon be enrolled into the FFS Medi-Cal program.
   - ✓ The PAVE portal is a web-based application designed to simplify and accelerate the enrollment process.
   - ✓ Providers will use the portal to complete and submit applications, report changes to existing enrollments, and respond to PED-initiated requests for continued enrollment or revalidation.
   - ✓ MHPs must enroll their practitioners and providers that are eligible (required) to be enrolled. Enrollment of existing practitioners/providers should occur before the end of the year.

Updates - Reminders

1. CalAIM – DHCS has postponed in order to effectively address COVID-19; will seek approval of proposals at a later date; tentatively planned for effect Jan 1, 2022

2. 1915b Specialty Mental Health waiver – DHCS received a temporary six month extension (exp Dec 31, 2020); seeking additional 12 month extension (exp Dec 31, 2021)

3. 1115 Waiver (Whole Person Care & DMC-ODS) – DHCS seeking a 12-month extension request

QA Policy & Technical Development

DHCS Updates
- ➤ Needs evaluation must be completed upon determination of medical necessity (at initial assessment) – effective 10/1/20; full implementation by 1/1/21
- ➤ Update annually for clients receiving TCM
- ➤ Adults (21 and over) - Needs Evaluation Tool (replaces CFE)
- ➤ Children (age 6-20) - CANS IP can be used as needs evaluation
- ➤ Children (age 0-5) – looking into the use of CANS
- ➤ Existing clients – complete at the next Client Treatment Plan
- ➤ Newly active clients – at initial assessment

QA Policy & Technical Development

Needs Evaluation

QA and Clinical Forms Bulletins coming soon

Policy Change
(Effective 10/1/20; Full Implementation 1/1/21)

- A needs evaluation must be completed:
  - Upon determination of medical necessity (at initial assessment)
  - Annually for clients receiving TCM
  - When new ancillary needs arise

Required Forms to Use

- For adult clients (age 21 and over) – **Needs Evaluation Tool** (effective 10/1/20)
  - Replaces the Community Functioning Evaluation
- For children (age 6-20) – the **CANS-IP** can be used as a needs evaluation
- For children (age 0-5) – looking at the use of the CANS

Implementation

- Allowing 3 months (up to 1/1/21) for full implementation
- Existing clients – complete at the next Client Treatment Plan
- Newly active clients – complete at the assessment

Training

- Optional – video module available on 9/22/20
- Other modules will be updated to account for new policy and form

MH 742
10/1/20

NEEDS EVALUATION TOOL

Page 1 of 3

Instructions: Complete this form with the client to determine if he/she has any ancillary needs. This form should be administered after the initial assessment, at any point new needs arise, and annually if Targeted Case Management (TCM) services are being provided.

Immediate Action	Action Needed	Monitor	No Action Needed	Strength to Utilize
Client's situation is highly unstable; an urgent need for the client	Client's situation is unstable; a need for the client	Client's situation is somewhat stable or temporarily stable; an area to monitor	Client's situation is stable; no needs at this time	Client's situation is thriving; a strength that may assist the client in reaching other goals

BASIC NEEDS / BENEFITS ESTABLISHMENT

Housing: What is your current living situation?

☐ Immediate Action	☐ Action Needed	☐ Monitor	☐ No Action Needed	☐ Strength to Utilize
Currently homeless or facing eviction; has an eviction notice	At risk of losing housing; residing in temporary housing (shelter or motel); has difficulty qualifying for housing; doubled up with others	Has stable housing for at least 6 months (subsidized or unsubsidized); residing in transitional housing	Secure housing (renting or owning) with limitations of choice due to moderate income	Secure housing (renting or owning) in a neighborhood of choice

Specific Need(s) if applicable

Income: Do you have enough income to cover your basic needs?

☐ Immediate Action	☐ Action Needed	☐ Monitor	☐ No Action Needed	☐ Strength to Utilize
No income for meeting basic needs	Income inadequate for meeting basic needs	Income adequate for meeting basic needs; but no savings or ability to handle financial emergencies	Income sufficient & stable for meeting basic needs & paying monthly bills; & provides for some savings	Income is sufficient & stable for meeting basic needs & paying monthly bills; & provides for significant savings

Specific Need(s) if applicable

1. **Areas of sufficiency or strength** (i.e. areas marked as "No Action Needed" or "Strength to Utilize"):

   Comments (include any positive outcomes where previous needs were met or improved upon):

2. **Areas of potential need** (i.e. areas marked as "Immediate Action", "Action Needed", or "Monitor"; areas marked "YES"):

   Agreed upon areas to provide support/assistance through **linkage & referral:**

   Comments: (include history & current status of need; relevant information from significant supports; information from other documents/chart review, & any barriers to getting needs met such as lack of identification):

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ICC Updates

QA and Clinical Forms Bulletins coming soon

Policy Change
(effective 10/1/20)

- All providers who currently provide TCM will be expected to be able to provide ICC to all EPSDT clients for whom it is appropriate and medically necessary

Forms to Use
(available 10/1/20)

- **ICC Eligibility form**
  - Complete prior to a Client Treatment Plan & any time the Client Treatment Plan is being considered for updates based on significant changes in the client's condition or status
  - No longer need to use the Katie A Subclass form

Training

- Video training module for ICC coming soon

Policy & Technical Development

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ICC ELIGIBILITY CRITERIA (must meet at least one of the criteria below):

☐ Yes ☐ No Client is involved in two or more child serving systems *(e.g. mental health, child welfare, juvenile probation, special education).*

☐ Yes ☐ No Client has more intensive needs. *(Below indicates situations that may result in more intensive needs)*
- *Client is receiving, or being considered for one of the following: Wraparound, Intensive Field Capable Clinical Services (IFCCS), Full Service Partnership (FSP) or Intensive Services Foster Care (ISFC); other intensive SMHS (e.g. TBS), crisis stabilization/intervention services; high-level-care institutional settings, such as group homes or Short-Term Residential Therapeutic Programs (STRTPs)*
- *Client has been discharged within 90 days from, or currently reside in, or are being considered for placement in, a psychiatric hospital or 24-hour mental health treatment facility*
- *Client has experienced two or more mental health hospitalizations in the last 12 months*
- *Client has experienced at least one placement change due to behavioral health needs*
- *Client has been treated with two or more antipsychotic medications, at the same time, over a three-month period*
- *If the child is zero through five years old and has more than one psychotropic medication, the child is six through 11 years old and has more than two psychotropic medications, or the child is 12 through 17 years old and has more than three psychotropic medications*
- *If the child is zero through five years old and has more than one mental health diagnosis, the child is six through 11 years old and has more than two mental health diagnoses, or the child is 12 through 17 years old and has more than three mental health diagnoses*
- *Client has two or more emergency room visits in the last 6 months due to primary mental health condition or need, including, but not limited to, involuntary treatment under California Welfare and Institutions (W &I) Code section 5585.50*
- *Client has been detained, pursuant to W&I sections 601 and 602, primarily due to mental health needs*
- *Client has received SMHS within the last year, and have been reported homeless within the prior six months*

☐ Yes ☐ No Client's treatment requires cross-agency collaboration.

ICC PROVISION DETERMINATION (to be completed if eligibility criteria is met)

Will ICC be provided?   ☐ Yes ☐ No
If no, why?   ☐ Client/Family Declined Services ☐ Other (specify below):
If the client will receive ICC, with additional authorization they are also eligible to receive Intensive Home Based Services (IHBS).

KATIE A SUBCLASS DETERMINATION

Client has an open child welfare case & meets intensive needs above? ☐ Yes ☐ No
If yes, client meets Katie A. Subclass Criteria and the DPI segment must be included on all claims.

Pre-Authorization Updates

QA and Clinical Forms Bulletins coming soon

Policy Change
(effective 10/1/20)

- The following services require prior authorization for service delivery:
  - Intensive Home Based Services (IHBS), Therapeutic Behavioral Services (TBS), and Therapeutic Foster Care (TFC)
  - Pre-authorization will be required every 6 months

Forms to Use
(available 10/1/20)

- **Supplemental IHBS Assessment, Supplemental TFC Assessment**, and Updated **Supplemental TBS Assessment**
  - Complete to request pre-authorization

Implementation

- **90-day grace** period to allow providers to fully implement the pre-authorization process
  - Starting **1/1/21** claims will be denied w/o pre-authorization
- Existing clients – ASAP; appropriateness of services post 10/1/20 until request date + pre-authorization going forward
- Newly active clients – ASAP; authorization will cover start date of IHBS

Process & Training

- To request pre-authorization, submit the supplemental assessment form, assessment, CANS and treatment plan
  - LE – use Provider Connect (training on 9/22/20)
  - DO – email

Access to Care - Monitoring

Process

- Monitoring all DO and LE providers quarterly
- Data currently being reviewed for this month is from **May – July 2020**
- Metrics being monitored:
  - Percent of untimely appointments
  - NOA-E issuance
  - Timely submissions, SRLs in draft, dispositions
  - Emails will be sent in the next 2 weeks to Program Manager (for DO) and QA Rep (for LE)

% Timely	QA Response	# Providers
80% and over	• Great work! No notification from QA	• Routine 219 • Urgent 10 • Discharge 71
70% - 79%	• Notification email	• Routine 25 • Discharge 3
60% - 69%	• Notification email • Template to complete (identifying issues and corrective action plan)	• Routine 9 • Discharge 2
Below 60%	• Notification email • Template to complete (identifying issues and corrective action plan) • Scheduled call with QA • Will be monitored monthly until numbers improve to above 60%	• Routine 27 • Urgent 7 • Discharge 3

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Template for Providers to Complete

Los Angeles County Department of Mental Health
Quality Assurance Unit
Policy & Technical Development Team

Access to Care – Plan of Correction

Date: |

Provider Name & Provider Number:

Program Manager (Name / Phone Number / Email):

Quality Assurance Representative/s (Name / Phone Number / Email):

Contact(s) Name / Position / Phone Number / Email

Identification of Factors Contributing to Difficulties
1. Internal factors: *(Be sure to include any language/cultural issues, misunderstanding requirements, workflow issues, challenges with applications/technology)*
2. External factors: *(e.g., number of referrals sent over, service area coordination issues)*

Action Plan
1. Plan to address identified factors:
2. Responsible parties:
3. Estimated date of completion:
Process for Issuing NOABDs *(include responsible parties)*

Network Adequacy

Network Adequacy Updates

- **Goal is to create a one stop application to maintain and keep updated with provider and practitioner information in order to monitor our Network**

- The process for Legal Entities to set up practitioners to claim within the LACDMH SMHS is being moved from Practitioner Registration & Maintenance (PRM) to the Network Adequacy application

  - The plan is to begin piloting with select providers early October

- Once the LE application is updated, DO practitioner set up will be moved from IBHIS Practitioner Enrollment to the Network Adequacy application

ACCESS To Care and Network Adequacy – Webinar held 9/8/20
➢ Will send out meeting recording once link is available
➢ Contact Howard Washington to be added to invite list: Hwashington@dmh.lacounty.gov

NOABD Forms
Available 10/1/20

- **Notice of Adverse Benefit Determination (NOABD)** forms will replace Notice of Action (NOA) forms

- **NOABD Types:**
  1. Denial Notice – *replaces the NOA-B for denying request for authorization*
  2. Payment Denial
  3. Service Delivery – *replaces the NOA-A for not meeting medical necessity*
  4. Modification - *replaces the NOA-B for modifying request for authorization*
  5. Termination - *replaces the NOA-B for terminating a previously authorized service*
  6. Authorization Delay - *replaces the NOA-B for not responding to authorization request timely (standard 5 business days)*
  7. Timely Access – *replaces the NOA-E for untimely services*
  8. Financial Liability
  9. Grievance and Appeal – replaces the NOA-D; issued by Patients Rights

- Reminder: Providers are to provide an NOABD when specialty mental health services are being denied due to lack of medical necessity or when a beneficiary is provided with an untimely appointment

DO QA Check-Ins and Chart Reviews

September
- 1909 Hollywood MHC
- 7771 Hollywood FSP
- 7739 Hollywood Wellness

October
- 7715 Women's Reintegration

November
- 1938 Compton Family MHS
- 7707 Compton MHC FSP

ONLINE TRAINING
"MASTERY IN IBHIS & DOCUMENTATION"
FOR DIRECTLY OPERATED PROGRAMS

Quality Assurance – Policy & Technical Development Team is pleased to announce online training, "Mastery in IBHIS & Documentation" for practitioners within DMH directly-operated programs. The on-line training modules allow practitioners to access and repeat the online lectures at any time to identify the essential elements of documentation and prepare to accurately complete an Assessment, Client Treatment Plan and Progress Note within IBHIS, as well as selecting appropriate Procedure Codes.

You are required to complete the entire online training module series for your discipline in order to get authorized access to IBHIS. To begin the training, find the training modules related to your scope of practice/discipline below. (*Optional modules are not required for certain disciplines). We recommend new practitioners initially complete the modules in the order they are presented below.

Upon completion of each module, there is a quiz. Once the quiz is submitted, you will receive a confirmation email of completion. Please keep the email as proof of your training completion.

TRAINING EVALUATION: Upon completion of all training modules related to your scope of practice/discipline, please complete the training evaluation via **https://tinyurl.com/IBHISDocEval**

If you want to practice navigating and using IBHIS, please use the training environment: **IBHIS Practice Site.** **The Local User Administrator (LUA) at your program can help set your account.**

For any questions on the Mastery in IBHIS & Documentation training, please contact QA Unit at QADOTraining@dmh.lacounty.gov

https://dmh.lacounty.gov/qa/qa-training/online-training-for-directly-operated-programs/

Coming Soon

- Understanding Medical Necessity and Completing a Needs Evaluation

In Development

- Crisis Intervention

POLICY & TECHNICAL DEVELOPMENT
CONTACTS

IBHIS Error Correction –
IBHISErrorCorrection@dmh.lacounty.gov

Training Inquiries for Directly-Operated Programs –
DMHQADO@dmh.lacounty.gov

Network Adequacy & Access to Care – **(new email coming soon)**
NetworkAdequacy@dmh.lacounty.gov

Legal Entity Chart Reviews – Update

- Upcoming Reviews
  - Ø Child & Family Center – September (next week)
  - Ø David & Margaret Homes – September/October (in 2 weeks)

Collaborative Documentation Training for Legal Entities

- Currently in development
- Anticipated to be available by December

Available Handouts on QA Website's General Training for Legal Entities and Juvenile Justice/Halls & Camps Page

Coming Soon:

○ Collateral Activity Examples

○ Plan Development Activity Examples

DOCUMENTATION AND CLAIMING RELATED HANDOUTS

- Targeted Case Management (TCM) Activity Examples **NEW**

- Rehabilitation Activity Examples **NEW**

- An Approach to the Treatment Plan Development Process

- Service Component Examples

- What Is Reimbursable And What Is Not

- Intensive Home Based Services (IHBS) Active Interventions

- Mental Health Services (MHS) Active Interventions

- Intensive Care Coordination (ICC) Active Interventions

- Targeted Case Management (TCM) Active Interventions

- Targeted Case Management Vs. Rehabilitation

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Q&A

Signature requirements related to COVID

- CTP and Consents – verbal is acceptable. Signature not required
- Financial forms are separate – different requirements

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HELPFUL QA LINKS:

QA Website:
https://dmh.lacounty.gov/qa/

Webinars link (past meetings and other trainings):
https://dmh.lacounty.gov/qa/qaw/

CANS training questions – check out webpage first for info:
https://dmh.lacounty.gov/for-providers/clinical-tools/training-workforce-development/cans/

  ➢ Please contact Adam Benson (Workforce Development Division) at Abenson@dmh.lacounty.gov

QI AGENDA TOPICS

1. Consumer Perception Survey – No Fall surveys

2. EQRO – week of 9/28/20 – 10/1/20
   ➤ SAs 2 & 5
   ➤ Focus on Access To Care during COVID19 crisis; Access to care and timeliness metrics (e.g., Network Adequacy, Final Rule)
   ➤ DMH Strategic Plan updates
   ➤ Sessions will be held virtually via Zoom

QI AGENDA TOPICS

3. POLICY UPDATES – links posted on DMH website:

➢ June 30, 2020**:**

Document ID	REVISED POLICY Title	Distribution Level
106.03-P	Procedures - Employee's Ability to Participate in Federally Funded Health Care Programs	Directly Operated
106.04-P	Procedures - Contractor's Eligibility to Participate in and Secure Federally Funded Health Care Program Contracts	Directly Operated and Contractors
301.03	Management of Aggressive Client Behavior in Settings Without Lanterman-Petris-Short Designation	Directly Operated and Contractors

QI AGENDA TOPICS

3. POLICY UPDATES – July 31, 2020:

NEW POLICY

Document ID	Title	Distribution Level
804.08	Client Services CAL-Card Purchasing Program	Directly Operated

REVISED POLICY

Document ID	Title	Distribution Level
110.01	Smoking in Department of Mental Health Facilities	Directly Operated and Contractors
311.01	Integration of Clients' Spiritual Interests in Mental Health Services	Directly Operated

DELETED POLICY

Document ID	Title	Distribution Level
100.01	Service Delivery Definition	Directly Operated and Contractors
303.06	Reporting Unusual Occurrences to the State Department of Mental Health	Directly Operated and Contractors
400.02	Clinical Supervision	Directly Operated

QI AGENDA TOPICS

3. POLICY UPDATES – August 31, 2020:

REVISED POLICY

Document ID	Title	Clinical/Administrative	Distribution Level
300.07	Use of Client Information for Publication	Clinical	Directly Operated

DELETED POLICY

Document ID	Title	Clinical/Administrative	Distribution Level
800.03	Re-Allocation of Funds from Contract Agencies	Administrative	Directly Operated and Contractors
800.04	Allocation of Salary Costs	Administrative	Directly Operated
800.05	Allocation of Third Party Revenue Collections in Excess of Planned Amounts to the Clinics Generating the Revenue	Administrative	Directly Operated
800.06	Collecting and Reporting Sales Tax	Administrative	Directly Operated
801.01	Invoice Billing by Contract Providers	Administrative	Directly Operated
811.01	Recoupment of County General Funds Two-Step Review	Administrative	Directly Operated and Contractors

QI AGENDA TOPICS

4. Access Center – List of Clinics Not Accepting Referrals
- None in SA 8
- Please contact Dr. Jessica Walters if you have any changes or updates to this list

Date	Clinic	City	Clinic Phone #	Provider Number	Age Group	Notes	Informed by
SA 1							
8/24/2020	Optimist Youth Home and Family Services	Palmdale	661-575-8395	7541	Children		Jocelyn Vazquez
SA 2							
8/13/2020	Didi Hirsch	Glendale	888-807-7250	7812	Adult & Children	**At this time NO Individual Therapy**	Lisa-Intake
8/28/2020	San Fernando-East Valley Youth & Family	North Hollywood	818-574-7745	6853	Children		
SA 4							
8/28/2020	IMCES, Inc	Los Angeles	213-381-1250	7312	Adult & Children		

QI AGENDA TOPICS

5. Change of Provider Logs (COP) – Please continue to submit by the 10th of each month via email to DMHCOP@dmh.lacounty.gov

SA 8 QI/QA MEETING INFO

NEXT MEETING:
    October 21ˢᵗ from 1:30PM-3:30PM via teams

CO-CHAIRS:
- ❖ Emily Ramos eramos@dmh.lacounty.gov
- ❖ Michele Munde mmunde@starsinc.com
- ❖ Courtney Stephens cstephens@mhala.org

SA 8 LIAISON:
Ann Lee alee@dmh.lacounty.gov

ELECTRONIC SIGN-IN REMINDER
Don't forget to complete the electronic signin survey if you participated in today's meeting.
https://tinyurl.com/y4583hr8

Link will also be sent out via email after this meeting.

HELPFUL QI LINKS

POLICIES AND PARAMETERS:
LAC-DMH Policies and Procedures

DMH Practice Parameters