LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU QUALITY IMPROVEMENT DIVISION

Type of Meeting	Service Area 3 QIC			Date	12/15/2021
Place	Microsoft Teams Call-in Number: (323 Conference ID: 951			Start Time:	9:30 am
Chairperson Co-Chairs	Dr. Kristin Gray Dr. Margaret Faye Mrs. Gassia Ekizia	n		End Time:	11:00 am
Members Present	Brenda Miranda Lisa Ngo-Meza Cynthia Concepcion Misook Nierodzik Renee Lee Marina Barrios Sarah Sullivan Kristin Gray Robin Washington Yesenia Ruiz Ariana Zepeda Tara Mrotek Michael Olsen Windy Luna-Perez Cheri Noone Gassia Ekizian Edina Martinez Jim Klotzle Rebecca Schaal Patricia Tyler	Alma Family Services Alma Family Services Almansor CIFHS DMH- Med-Cal Certification DMH - ESGV DMH - ESGV FSP DMH - SA3 Admin DMH - QA D'Veal D'Veal Eggleston FFA Outpatient ENKI Ettie Lee Five Acres Foothill Family Services HealthRight 360 Haynes Heritage Clinic	Rosa Alvarez Erica Wirtz Sybil Chacko Leana Olague Britney Evans Erica Villalpando Rebecca DeKeyser Dawn Dades Nicholas Jones Lan Nguyen-Chawk Jennifer Escorcia Rodrigo Recendez Margaret Faye Isa Ayala Joseph Bologna Adrienne Bruce Edith Herrejon Desiree Odom	Hillsides Maryvale Pacific Clin Prototypes PUSD San Gabrie Social Mod Spiritt Fan ins SSG/APCT Starview Sunrise Ho Sycamores Tri-City Me Trinity Uplift Fam	el Children's Center lel nily Services C Alhambra prizon FFA
Call to Order & Introductions	•	lled to order and followed as by presenting staff.			

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Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Review of Minutes	Motion to approve the September 2021 meeting minutes by Robin Washington and second by Michael Olsen.		
Quality Improvement			
QI Workflow at D'Veal Youth and Family Services	Yesenia Ruiz and Ariana Zepeda presented on the QI intake pilot review at D'Veal. They discussed purpose of the pilot, objectives, frequency of collection, data source, performance indicators and vision moving forward. Project was conducted on the target population of clients 0-25 years of age with the intake and WRAP teams. Main goal is to be QA/QI audit ready by implementing a clear intake documentation process.		Yesenia Ruiz, LCSW and Ariana Zepeda, LCSW
EQRO Brief Review	EQRO Draft report was presented at QA/QI Countywide meeting. Briefly reviewed percentage of goals met/partially met, as well as identified strengths, areas for follow-up, and recommendations.		
Policy Bulletins	Policy Bulletin 21-11 (November 30, 2021) Revised - 306.01: Medication Delivery (Directly Operated) Policy Bulletin 21-10 (October 31, 2021) Revised - 306.04: Furnishing Supervision (Directly Operated) Continue to check the Policy & Procedures website for updates each month.	https://secure2.compliancebrid ge.com/lacdmh/public/index.ph p?fuseaction=app.main&msg=	

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Medi-Cal Certification	No new updates reported. Medi-Cal Certification Liaison, Renee Lee, reminded providers of physical plan inspections and remote reviews.		Renee Lee, LMFT
Quality Assurance			
CalAIM Draft Bulletin 21-07	CalAIM is a multi-year initiative by DHCS to improve the quality of life and health outcomes of Medi-Cal beneficiaries by implementing broad delivery system, program and payment reforms across the Medi-Cal program. Upcoming Behavioral Health Policies include: • Criteria to Access Specialty Mental Health Services (SMHS) – January 2022 • Documentation Redesign for SMHS – July 2022 • Co-Occurring Treatment – July 2022 • No Wrong Door – July 2022 • Standardized Screening & Transition Tools – January 2023 • Behavioral Health CPT Coding Transition (Payment Reform) – July 2023		
Criteria to Access SMHS Draft Bulletin 21-08	As Outlined in the DHCS Bulletin 21-073: Updated Criteria to Access SMHS for Beneficiaries 21+ • Beneficiary has one or both: ○ Significant impairment, where impairment is defined as distress, disability, or dysfunction in social, occupational, or other important activities AND/OR ○ A reasonable probability of significant deterioration in an important area of life functioning.		

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	 AND the condition is due to either: A diagnosed mental health disorder, according to the criteria of the DSM and the ICD OR A suspected mental disorder, not yet diagnosed. Criteria for Beneficiaries Under 21 years of age (either Criteria 1 or Criteria 2) Criteria 1: The beneficiary has a condition placing them at high risk for a mental health disorder due to experience of trauma evidenced by any of the following:		

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	health benefits that a Medi-Cal managed care plan is required to provide. AND The beneficiaries' condition, as described above, is due to one of the following: A current diagnosed mental health disorder, according to criteria of the current editions of the DSM and ICD OR A suspected mental health disorder that has not yet been diagnosed OR Significant trauma placing the beneficiary at risk of a future mental health condition based on the assessment of a licensed mental health professional.		
	 Medical Necessity for Services – Medical Necessity now applies to the service (i.e. is the service medically necessary). As part of CalAIM, medical necessity for both SMHS and non-SMHS is now defined as: Medical Necessity Clients 21 + - A service is "medically necessary" or a "medical necessity" when it is reasonable and necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain. Medical Necessity Clients Under Age 21 - A service is "medically necessary" or a "medical necessity" when needed to correct or ameliorate a mental health condition. (Note: 		

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Quality Assurance Updates	Services do not need to be curative or restorative to ameliorate a mental health condition per CMS) • Procedure Codes are being updated – no specific completion date. • Medication Group SC and GT codes. • Neurofeedback with psychotherapy codes. • Qualified Individual Assessment and codes (only for 7171 Continuum of Care providers) • The ICC Form is no longer required – effective immediately. • Information to come regarding the Katie A DPI Indicator. • Medi-Cal Rx begins January 1st, 2022. • Community Outreach Services (COS) Training now available • Annual LE QA Reports & Written QA Process due by January 31, 2022. • QA will reach out regarding chart reviews in January/February. • QA Contact List has been updated • Collaborative Documentation Page now	https://dmh.lacounty.gov/qa/qa -training/general- documentation-and-claiming- online-trainings-non-ibhis/ https://dmh.lacounty.gov/qa/qa c/	
	available	https://dmh.lacounty.gov/qa/col laborative-documentation/	
Network Adequacy/Access to Care	 Access to Care Updates Access to Care training videos available on the QA training webpage Access to Care monitoring team (QA Policy & Technical Development Team) is currently monitoring July 2021 – September 2021. 	https://dmh.lacounty.gov/qa/na// Email questions to: NetworkAdequacy@dmh.lacounty.gov	

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	 Continue to review the accepting new beneficiaries information to make sure it is up to date. Managed Care Plan streamlined referral process will be presented on at the next meeting in January 2022. Internal Provider Directory being expanded to legal entities – ENKI is currently piloting and providing feedback. Access to Care Provider Tips on how to manage challenges related to communication and training, workflow, capacity, monitoring, and linkage. NAPPA Updates Verify current category of practitioners and practitioner association. Error with the category LCSW has been corrected. Dissociate those no longer at your LE. Make sure to update age groups, programs, and primary and secondary contact information in NAPPA for your provider. 		
Handouts	December SA3 QIC PPTDHCS Information Notice 21-073		
Next Meeting	Next Meeting is January 19, 2022 via Microsoft Teams.		

Respectfully Submitted, Kristin Gray, Psy.D., Department of Mental Health