LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Children's QIC Meeting
QUALITY IMPROVEMENT COMMITTEE MINUTES

Type of Meeting	SA 2 Children's QIC	Date	December 15, 2022
Place	Online – Teams Meeting	**Start Time**	1:30pm
Chairperson	Michelle Rittel	**End Time**:	3:30pm
Co-Chair	Open		
Members Present	Amarilys Reyes, Araceli Ortiz, Cheryl Davis, Cindy Luna, Claudia Morales, Daiya Cunnane, Dave Mendez, David Lopez, Emily Fitleberg, Gina Leggio, Heylee Barriola, James McEwen, Jeanine Caro-Delvaille, Jennifer Mitzner, Karely Gutierrez, Karina Krynsky, Kaylee Devine, Kimber Salvaggio, Laura Padrino, Lezly Zavala, Maggie Holland, Michelle Rittel, Rafael Santoya, Roman Shain, Sara Klausner, Stephanie Ochoa, Susan Dorairaj, Tanya Khanjian, Victoria Shabanzadeh, Vierre Stevenson, Wanta Yu		

Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Call to Order Introductions and Announcements: Michelle Rittel	Meeting called to order at 1:30pm. Introductions were made.		
Review of Minutes: Michelle Rittel	Minutes from October 20, 2022 meeting were previously emailed for review and approved in the meeting.		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Improvement (QI)			
DMH QIC Meeting Report: Michelle Rittel	CANS-IP & PSC-35: Administrative Close Assessment Type (Providers) – Administrative Close is selected when providers are unable to complete the CANS-IP/PSC-35 at required times. Reasons for close are client not available/assess only, Client/caregiver declined to participate for CANS-IP or client/caregiver declined to complete PSC-35, Other. Administrative Close Assessment Type (DMH) – DMH EPSDT Outcomes Team can also submit an Administrative Close for the same reasons as providers as well as after repeated attempts, no response from provider, client aged out. Urgent Assessment Type – This is selected when there is an need for reassessment CANS-IP/PSC-35 prior to the date of reassessment, such as significant changes in the child's life or significant changes in the child's behavior. This type does not change the due date of the next CANS-IP/PSC-35 – reassessment CANS-IP/PSC-35 must still be completed every 6 months from the previous reassessment or initial CANS-IP/PSC-35. Resources are available to providers on the DMH website under Outcomes/Resources including CANS-IP and PSC-35 FAQ, CANS and PSC Quick Guides, Clinical Forms Bulletins 19-03 and 19-04, QA Bulletins 19-02 and 19-03. Questions/Information about CANS-IP and PSC-35 can be sent to DMH Outcomes Inbox – peioutcomes@dmh.lacounty.gov

Client/Caregiver Participation in SA QIC Meetings: We don't currently have client/caregiver participation in the SA2 Children's QIC meeting, but it is something we would like to have if possible. The recommendation comes from EQRO. Concerns were expressed as to whether this meeting is an appropriate forum for client/caregiver participation. One suggestion was that the SA2 SALT meeting would be a more appropriate forum for client/caregiver participation and | | |

| Departmental QI Meeting Report, contd.: Michelle Rittel | Kimber suggested having a standing item on the SALT agenda for QIC. Lezly Zavala from Children's Bureau expressed interest in having a subcommittee to address the issue.

Compliance, Policy & Audit Services Update: Monthly bulletins with new, revised and deleted policies are posted online and can be reviewed on the DMH website. The October and November 2022 bulletins were briefly reviewed.

CAPP: The CAPP meeting is an online Teams meeting on the third Tuesday of the month, 11am-1pm. All Parent Partners are strongly encouraged to attend. Please have Parent Partners contact Cristina Rojas to be added to the email distribution list at crrojas@dmh.lacounty.gov | | |

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Assurance (QA)			
Departmental QA Meeting Report: Michelle Rittel	General QA Updates: Link to the December 2022 QA/QI Central Meeting recording/slides was included with the slides handout for this meeting. QA on the Air – next meeting is December 28, 2022 at 9am. It will focus on CPT Codes/Payment Reform. Link to the meeting was provided. New Law Requires Notice to Patients About Open Payments Database – requirements of new law were briefly reviewed. This law applies to physicians. At the initial office visit with their patient, a physician must provide either a written or electronic notice of the Open Payments Database that includes the following text: "The Open Payments database is a federal tool used to search payments made by drug and device companies to physicians and teaching hospitals. It can be found at https://openpaymentsdata.cms.gov." A copy of the notice needs to go into an electronic records system or a signed/dated copy if using a paper record. A notice of the Database must be posted at each location where the physician practices in an area likely to be seen by all persons. It must include a link to the Data base and the following text: "For informational purposes only, a link to the federal Centers for Medicare and Medicaid Services (CMS) Open Payments web page is provided here. The federal Physician Payments Sunshine Act requires that detailed information about payment and other payments of value worth over ten dollars ($10) from manufacturers of drugs, medical devices, and biologics to physicians and teaching hospitals be made available to the public." If the physician is employed by a health care employer, that employer is responsible for meeting this requirement.		

Departmental QA Meeting Report, contd.: Michelle Rittel	State Updates: CalAIM – The CalAIM Quiz link was provided. Peer Support Services Update – Effective January 1 2023. Peer Support Services have been added to the Org Manual, QA is updating NAPPA/IBHIS and the Guide to Procedure Codes to include a new category/discipline for Certified Peer Support Specialist and the new procedure codes, DMH is currently determining how to assign the codes to contracts and providers. Screening and Transition Tools – Coming January 1, 2023 – Update – Working with MCPs to get standard processes in place, screening questions will be added to the SRL/SRTS, for DO, Transition form will be added into IBHIS. Screening and Transition Tools Plan – DHCS to release final Information Notice and Tools (ETA next week). QA will finalize workflows with MCPs and internal procedures. A QA bulletin will be sent out with workflows and tools. Training will be provided through a recorded training and policies will be updated. Initially, PDF forms will be used, with the SRTS updated in to include screening questions later in January. IBHIS will be updated for DO to include Screening and Transition forms. Screener and Transition Draft Work flows were reviewed. Payment Reform/CPT Codes – Coming July 1, 2023 - Update – DHCS released the final Billing Manual, DMH has an internal workgroup that is reviewing the manual in order to provide greater information to providers, December QA On the Air will focus on CPT Codes/Payment Reform. Audits: None scheduled for SA2 Children's Providers. Training and Operations: LE Contract Provider Chart Reviews – QA is working on summary reports and coordination of related meetings for recent reviews and in the process of coordinating additional reviews for January and February. Annual QA Report and Written QA Processes – Required to be submitted by Contract Providers every year by January 31. QA is in the process of updating the forms. Updated forms and official announcement will come out later this month. Re-organization of Main QA Training Page – the new webpage was shared. New HIM Bulletins Link – for DO, on the QA website, under Bulletins you will see Health Information Management Bulletins.		

Departmental QA Meeting Report, contd.: Michelle Rittel	Provider Presentations on QA Process: Wanta Yu discussed having providers volunteer to share their QA processes with the QIC as a way to provide support and assistance to providers and asked for feedback from providers.		
	Policy & Technical Development: Provider Directory – They are still working on modifications to the Directory and Draft Mock Up was shared. Providers are reminded that they must ensure NAPPA has complete and accurate information. Directly Operated Chart Reviews – If DOs are conducting Chart Reviews, use the LE Chart Review tool online. Do not use the tool in IBHIS and do not scan into IBHIS. Due to capacity limitations, QA is not requiring DOs to do Chart Reviews. QA will resume DO chart reviews in 2023. Coming soon – QA Bulletin: Update Guide to Procedure Codes, QA Bulletin: Screening and Transition Tools, Clinical Forms Bulletin: STRTP form, screening and transition. New E-mail Contacts – Accesstocare@dmh.lacounty.gov – use this email for questions about access to care, including monitoring and use of SRTS or SRL. Emails sent to SRTS@dmh.lacounty.gov will be automatically routed to the new email. Networkadequacy@dmh.lacounty.gov – questions/concerns related to network adequacy, including Provider Directory and NAPPA.		
	Network Adequacy & Access to Care: Timely Access to Care Monitoring – Q3 plans of correction were due November 30. Emails have been sent to those that have not submitted their POC. SRTS Metrics for No Disposition – Please ensure SRTS records are addressed as quickly as possible. As soon as you offer an appointment to the consumer, a disposition can be entered into SRTS. There is no need to wait until the actual date of the appointment. Access to Care & Upcoming SRTS Onboarding Reminder – Jail Discharges/Care Transitions – will begin sending out referrals via SRTS. CalWorks will begin using SRTS for referrals beginning 1/1/23.		

Departmental QA Meeting Report, contd.: Michelle Rittel	Available Method of Service Delivery – 751 out of 941 service locations for DO and LE providers have not completed this field in NAPPA. Please check and update this if you have not already done so. Programs Available – Please make sure you have updated this field in NAPPA. 270 of 941 provider service locations have not completed it. Many of those that have put in some information have not completed all fields. Please review and update. Health Information Management (HIM): DO only. Reviewed Policy 501.03 Accounting of Disclosures of Protected Health Information.		
Suggested Items for Nest Meeting:	There were no suggestions.		
Handouts:	SA2 Children's QIC Meeting Power Point – December 15, 2023 Agenda – December 15, 2023		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Next Meeting:	Thursday, February 16, 2023 1:30-3:30pm Location: Online – Teams Meeting		

Respectfully submitted,

Michelle Rittel, LCSW