

# County of Los Angeles – Department of Mental Health SA2 Children’s QIC

December 17, 2020

## Agenda

1:30 – 1:40 Introductions/Announcements/Minutes . . . . . Michelle Rittel  
1:40 – 3:25 Report from DMH QI/QA . . . . . Michelle Rittel

### QI

- EQRO
- PRO
- Presentation – Sexual Orientation and Gender Identity (SOGI) – Inclusive Services: A 2021 QI Work Plan Discussion. . . . . LyNetta Shonibare – DMH QID
- Compliance, Policy and Audit Services Update
- CAPP (Parent Partner meeting)

### QA

- State DHCS Updates
- Training & Operations
- Policy and Technical Development: PAVE & Medi-Cal Rx, QA Contacts, Network Adequacy/Access to Care, QA Bulletins
- HIM: The 21<sup>st</sup> Century Cures Act

3:25 – 3:30 Suggestions for Next Meeting

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**Next Meeting:**  
Thursday, February 18, 2021  
Location: Online - Teams

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

|   |  |   |  |  |
|---|--|---|--|--|
| <b>Type of Meeting</b>  | SA 2 Children’s QIC  | <b>Date</b>   | December 17, 2020                        |  |
| <b>Place</b>  | Online – Teams Meeting   | <b>Start Time</b>   | 1:30pm                                   |  |
| <b>Chairperson</b>  | Michelle Rittel  | <b>End Time:</b>  | 3:30pm                                   |  |
| <b>Co-Chairs</b>  | Alex Medina & Angela Kahn  |   |  |  |
| <b>Members Present</b>  | Alex Medina, Aminah Ofumbi, Anabel Aispuro, Ariel Landrum, Cassie Lopez, Cheryl Davis, Cindy Luna, Claudia Morales, Dave Mendez, Danielle Price, Diana Dawson, Esther Lee, Freda McGovern, Gina Leggio, Honey Hira, Iliana Martinez, Ingrid Balbuena, James McEwen, Jennifer Palma, Jennifer Roecklein, Judy Cardona, Kate Carada, Katherine Smith-White, Kaylee Devine, Kevin Boyd, Kimber Salvaggio, Laura Padrino, Luis Pereira, LyNetta Shonibare, Maggie Holland, Mark Rodriguez, Michelle Chitel, Nizhu Minhaz, Robin Washington, Tanya Khanjian, Tiger Doan, Vicky Rivera Vasquez, Vicky Shabanzadeh, Zeena Burse |   |  |  |
| <b>Absent Members</b>   | Adik Parsekhian, Agueda Cabrera, Angela Kahn, Angie Sanchez, Arezoo Masjedi Esfahani, Carolyn Kaneko, Danielle Norman, Ericka Rivera, Gurudarshan Khalsa, James Pelk, Jennifer Sherman, Jenny Sanchez, Jolene Bajnath, Karina Krynsky, Marina Eckart, Martha Basmadjian, Michele Burton, Michelle Barajas-Sanchez, Michelle Ferrante, Nicole Lomas, Pilar Navarro, Stephanie Yamada, Tim Petersen, Wendy Medina, Wendy Salazar   |   |  |  |
| <b>Agenda Item &amp; Presenter</b>  | <b>Discussion and Findings</b>   | <b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b> | <b>Person Responsible &amp; Due Date</b> |  |
| <b>Call to Order<br/>Introductions and Announcements:<br/>Michelle Rittel</b> | Meeting called to order at 1:30pm. There were no announcements.  |   |  |  |
| <b>Review of Minutes:<br/>Michelle Rittel</b>                                 | Minutes from October 15, 2020 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 |
|---|---|--|-------------------------------|
| <b>Quality Improvement (QI)</b>                           |   |  |                               |
| <p><b>DMH QIC Meeting Report:</b><br/>Michelle Rittel</p> | <p>EQRO: A draft of the EQRO report has been received and is being reviewed.</p> <p>Patient’s Rights Office: The Grievance/Appeal new portal is not active yet.</p> <p>Cultural Competence Updates: No Update</p> <p>Compliance, Policy &amp; Audit Services Update: Monthly bulletins with new, revised and deleted policies are posted online. Please review from the website.</p> <p>CAPP: The CAPP meeting returns in January. It is an online Teams meeting on the third Tuesday of the month, 11am-1pm. All Parent Partners are strongly encouraged to attend.</p> <p>QID Updates: No updates.</p> <p>Presentation – LyNetta Shonibare from DMH QID – Sexual Orientation and Gender Identity (SOGI) Inclusive Services: A 2021 QI Work Plan Discussion – Topics discussed include SOGI Data; it was noted that the acronym should be SOGIE, adding the word Expression, SOGIE Inclusive Services, Current (and Pending) Departmental Efforts, Potential QIC Activities.</p> |  |                               |

| Agenda Items & Presenter  | Discussion & Findings  | Decisions, Recommendations, Actions, & Scheduled Tasks | Person Responsible & Due Date |
|---|--|--|-------------------------------|
| <b>Quality Assurance (QA)</b>                                     |  |  |                               |
| <p><b>Departmental QA Meeting Report:</b><br/>Michelle Rittel</p> | <p>Audits: None scheduled.</p> <p>Medi-Cal Certification Section: No Update</p> <p>State DHCS Updates: Waiver requirements are changing significantly. Students (persons in formal graduate psychology programs) will no longer need a DHCS-issued waiver in order to provide “license requiring” services. They must not be employed or under contract with the MHP (DO &amp; LE providers). License requiring services = Assessment, Psychotherapy, Psychological Testing. Persons who have received their doctorate and are accruing hours of supervised professional experience toward licensure will still need a waiver. Maximum waiver duration remains 5 years. Updated DHCS Information Notice forthcoming.</p> <p>Training and Operations: Trainings in Development – Collaborative Documentation for LEs, TCM &amp; Rehab Module, Updated Assessment Module, Interactive Training Tools/Exercises.</p> <p>There are no LE chart reviews upcoming for SA2.</p> <p>Annual LE QA Report &amp; Written QA Process – due by 1/31/21. A memo will be sent out by next week with updated forms. Please do not utilize outdated forms currently on the QA website. Updated forms will have Dec. 2020 revision date.</p> |  |                               |

**Departmental QA Meeting Report, contd.:**  
Michelle Rittel

Policy and Technical Development: PAVE & Medi-Cal Rx Update – There is a new date for the enrollment deadline. Eligible practitioners must enroll in PAVE and if applicable, Medi-Cal Rx, prior to 4/1/21 instead of 1/1/21. Reminders – Practitioners need to enroll themselves and upload copies of their current professional licenses (state issued copy) and current state issued ID. Prescribing practitioners must also register in Medi-Cal Rx portal. Prescribers will have to enroll in PAVE prior to enrolling in Medi-Cal Rx. LACDMH is still waiting on more information from DHCS. An Info Notice is in development. PAVE FAQs were reviewed.

DO QA Check-Ins and chart reviews 2021 – none for SA2 Children’s programs.

QA Questions: Who to Contact? – In order to be as accessible as possible to providers, questions can be directed to either your SA QA Liaison or the QA Mailbox – [qualityassurance@dmh.lacounty.gov](mailto:qualityassurance@dmh.lacounty.gov) If directed to the QA Liaison, they will address the question or send to their assigned QA Lead for consultation or to the QA mailbox. If directed to the QA mailbox, QA Liaisons will be kept in the loop. Network Adequacy and Access to Care questions can go directly to the Network Adequacy mailbox – [networkadequacy@dmh.lacounty.gov](mailto:networkadequacy@dmh.lacounty.gov)

Network Adequacy & Access to Care: Access to Care Monitoring – General findings from last quarter (May-July): Internal – staffing issues: interns ending, obtaining/retraining staff, lack of clerical support, not enough staff to provide ongoing treatment (eg therapy), so delays in scheduling intakes. External – increase in referrals from other agencies, EPSDT logistical issues re: coordinating care with other providers such as Wrap; delays in obtaining consent, providers not marking ‘date of agreement’ which would start the clock at a later point from the ‘date of request’, transitioning to telehealth with COVID – delayed intakes, Access sometimes marking requests as ‘urgent’ when should have been routine, referring ‘urgent’ requests on Fridays when urgent requires response within 48 hours. QA is finishing up Discussion calls with providers. QA has pulled data for Aug.-Sept. – will be comparing data to May-July and only reaching out to providers that are below 80% and

**Departmental QA Meeting Report, contd.:**  
Michelle Rittel

were not on the list for the May-July pull. QA is in discussions around how to make data available to providers so you can monitor the same info QA is monitoring. A QA Bulletin will be issued in January with Access to Care expectations, reminders and other important information.

Accepting New Beneficiaries – 39 service locations in NAPPA specifically show as not accepting new beneficiaries as of 12/7/20, down from 48 in July. Please review the status for your locations. Currently, Accepting New Beneficiaries is under Accessibility in NAPPA and is yes or no. No should only be marked if not accepting ANY referrals/requests.

Network Adequacy – Modifications to NAPPA were released on 12/1/20. They impact both DO and LE. Service locations – track ability to see new clients at the age group and program level. A QA Bulletin will be issued soon with instructions.

Practitioner – indicate if Mode 15 services are provided regularly, gender, ethnic origin, race, category – tracks discipline at a more specific level, eg LCSW vs Registered SW, and DSMV practice focus. All providers must keep NAPPA up to date – check every 30 days – language has been added into the LE contract requiring NAPPA to be updated. QA will start contacting providers who have not been accessing the system and keeping it up to date. For DO – working on a few additional edits for DO providers, which should be finalized by the end of the week with scenarios/instructions sent out. DO providers should hold on any updates until instructions are sent out. For LE – no longer able to use a generic log in, You must have a C# that is associated to the use of NAPPA. If you do not have a C# or have a C#, your authorized signer must request access to NAPPA. When logging in, utilize [C#@dmh.lacounty.gov](mailto:C#@dmh.lacounty.gov) then click Azure. Make sure to update the info for any new service locations. For LE, PRM is no longer in use. NAPPA must be used for practitioner registration and maintenance. For any ‘missing’ practitioners, associate the practitioner to your LE/Service Location using the scenarios guide.

Access NAPPA 3.0 portal on-boarding process – get a C# to access NAPPA. Ask your liaison to submit the request through

**Departmental QA Meeting Report, contd.:**  
Michelle Rittel

the SAR portal – paper form is no longer accepted. If you do not know who your liaison is, open a HEAT ticket and DMH can look up who is assigned to you. If a liaison has not been identified for your organization, work with your management to identify one. Users at an organization can only be granted access to the system with assistance of a liaison. Helpdesk # 213-351-1335 [helpdesk@dmh.lacounty.gov](mailto:helpdesk@dmh.lacounty.gov)

QA Bulletins: FAQs have been posted next to the bulletins. Revised PAVE Bulletin and updated FAQs will be posted soon. Updated Pre-Authorization for IHBS/TBS/TFC FAQs coming soon.

QA Bulletin 20-06 TCM Needs Evaluation – CANS Requirements – LACDMH is working on finalizing a paper versions of the CANS 0-5 form. There is a link for a version to use for now. For DO providers – will be working to get the 0-5 in IBHIS and will be incorporating the needs evaluation questions into the CANS form in IBHIS. Will be adding an “administrative discharge” and “crisis” assessment type to both CANS forms. Additional info coming with when to use these options. FAQs were reviewed.

QA Bulletin 20-05: Pre-Authorization of IHBS, TBS, TFC – QA is confirming with state regarding the procedure codes to use while providers are waiting for approval for pre-authorization. QA & Child Welfare will continue looking into how to streamline intensive program enrollment and pre-authorization requirements. Authorization is at the LE level, not at the program level. Approval date will never be back dated. Pre-Authorization requirements are effective 1/1/21. Claims will be denied without pre-authorization starting 3/1/21. The extension is in order for the grace period to match the 6 month authorization period and prevent all authorizations being due on the same date. To ensure clients receiving the services continue receiving the services, the analysis of the requests will be phased in with more detailed analysis. Emphasis will be on not denying services. Will initially look at key clinical components and ensuring requirements for the service are met. If documents are missing, but justification for

**Departmental QA Meeting Report, contd.:**  
Michelle Rittel

services can be inferred, will approve without/ Will eventually phase in stricter adherence to document submission and other items. Will be pulling together a workgroup of providers to discuss the process. FAQs were reviewed.

QA Bulletin 20-08: Guide to Procedure Code Changes – Changes in Evaluation & Management (E&M) codes is effective 1/1/21. Inactive – 99201 – deleted. To report, use 99202 or other appropriate codes. New – 90882 – Non-billable SSI Application – for DO ONLY – used to track time spent writing up SSI application. There are 3 codes for Telephone E&M with established clients – 99441 (5-10 min), 99442 (11-20 min), 99443 (21+ min). Time is based on duration of the phone call. No need to use the phone (SC) modifier on these codes. Only used for ESTABLISHED clients (seen in the past 3 years at the LE). For telephone E&M services with new clients (eg Initial Med Eval), continue to use H2010SC.

Changes in E&M office or other outpatient services code selection – 99202-99215 – based on Medical Decision Making or Total Time of the service. Other E&M codes remain the same. Medical Decision making is the number & complexity of problems addressed, amount and/or complexity of data to be reviewed and analyzed, risk of complications and/or morbidity or mortality. Total time includes face to face time and other time (eg documentation, review of records, ordering medications/tests).

Health Information Management (HIM): The 21<sup>st</sup> Century Cures Act – Interoperability, Information Blocking & Open Notes. Act of Congress – 2016. Final Rule essentially supports use of modern day technology to meet the need of patients & providers. Sets in place new provisions for certified health IT developers to establish secure and standardized APIs (Application program Interfaces). A separate law that does not supersede current state and federal health record access laws under the HIPAA Privacy rule, Cal H&S codes & CMIA (California Medical Information Act). Another piece of the Act deals with the responsibility of authorized prescribers of



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| <p><b>Departmental QA Meeting Report, contd.:</b><br/>Michelle Rittel</p> | <p>controlled drugs and substances to prevent abuse and misuse of controlled drugs. Updated compliance and enforcement dates – new compliance and enforcement date 4/5/21 for open notes and information blocking – it was 11/2/20. There is an extended compliance date of 12/31/22 for the 2015 edition of health IT certification and new standardized API functionality. Updated extensions, according to ONC, is to allow providers in the healthcare ecosystem to deal with serious issues and concerns around COVID-19. Open Notes – the Act outlaws any kind of information blocking, including patient data access. Healthcare organizations must provide patients access to their electronic health information and data, free of charge. The difference with current laws is that access to data under this Act is immediate and into devices such as smart phones or thumb drives. Notes must be shared with health systems for coordination of care. Psychotherapy notes are exempt from sharing. DMH does not maintain psychotherapy notes as part of clients’ health records. Types of patient data to be available: Diagnosis, Functional States, Treatment Plan, Progress Notes, Symptoms, Prognosis, Progress to Date, Consultations, Pathology and Lab Report Narratives. Groups referred to as Actors under this Act: Healthcare providers, Health Information Exchange &amp; Networks, Health IT developers of certified health IT (EHR Vendors).</p> |  |  |
| <p><b>Suggested Items for Next Meeting:</b></p>                           | <p>There were no suggestions.</p>  |  |  |
| <p><b>Handouts:</b></p>   | <p>QA Bulletin 20-05<br/>QA Bulletin 20-06<br/>QA Bulletin 20-07<br/>QA Bulletin 20-08<br/>Pre-Authorization FAQs<br/>PAVE FAQs<br/>SA2 Children’s QIC Meeting Schedule for 2021</p>   |  |  |

| <b>Agenda Items &amp; Presenter</b> | <b>Discussion &amp; Findings</b>   | <b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b> | <b>Person Responsible &amp; Due Date</b> |
|-------------------------------------|--|---|--|
| <b>Next Meeting:</b>                | Thursday, February 18, 2021<br>1:30-3:30pm<br>Location: Online – Teams Meeting |   |  |

**Respectfully submitted,**

**Michelle Rittel, LCSW**