



LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
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**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 QI/QA COMMITTEE MEETING
01/20/2021
1:30PM-3:30PM**

Type of meeting:	Virtual monthly meeting via MS Teams
Meeting Recording:	Link to the meeting video: http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=8826
Members Present:	See attached at the end of the minutes

AGENDA ITEMS	DECISIONS AND ACTIONS	RESPONSIBLE UNIT/STAFF	DUE DATE
Meeting sign-in	Link was provided during the meeting and on the slides to record attendance: https://tinyurl.com/SA8QualityJan2021		
QUALITY ASSURANCE			
QA webpage	https://dmh.lacounty.gov/qid/		
Central Monthly QA/QI meeting	Central QA/QI Meeting recordings: 1/11/21 – https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=8793		
Health Information Management (HIM)	<ul style="list-style-type: none">• The Health Information Management team has a new eFax number: (213) 652-1875• The new eFax number is the preferred method for sending record requests from Directly-Operated clinics to Health Information Management.• The eFax goes directly to an inbox that staff can monitor while teleworking.		

<p>DHCS Updates</p>	<ul style="list-style-type: none"> • Requirements changing significantly. • Students (persons in formal graduate psychology programs) will no longer need a DHCS-issued Waiver (under WIC 5751.2) in order to provide “license-requiring” services <ul style="list-style-type: none"> ○ Must not be employed or under contract with the MHP (DO and 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 five years. • DHCS Information Notice forthcoming (Issued 20-069 Dec 11, 2020) •
<p>Annual QA Report - Legal Entity</p>	<p>Due Date: January 31, 2021</p> <ul style="list-style-type: none"> • All Legal Entity Contract (LE) Providers; 1 per LE <p>Required Forms:</p> <ul style="list-style-type: none"> • Annual QA Report for Legal Entities • Written QA Process for Legal Entities • Corrective Actions Plan (if indicated) <p>Updates:</p> <ul style="list-style-type: none"> • New questions on QA Report form <ul style="list-style-type: none"> ○ Person responsible for entering/updating NAPPA ○ Person responsible for monitoring access to care • New item on Written QA Process form <ul style="list-style-type: none"> ○ Clinical peer review process – ensuring standard level of quality of care
<p>QA Knowledge Assessment</p>	<p>Project is resuming</p> <ul style="list-style-type: none"> • Survey consists of documentation sample and questions regarding the sample • Completed anonymously • Purpose is educational and to inform areas to emphasize in training • Link to QA Knowledge Assessment Survey # 3 will be sent out this week

	<ul style="list-style-type: none"> ○ Will be sent to QA contact person(s) of each Legal Entity (LE) ○ QA contact person(s) will identify/coordinate which staff within LE to send survey link ● Survey link will remain open for 4-5 weeks <ul style="list-style-type: none"> ○ Anonymous countywide results will be sent out/posted shortly after survey closes
Legal Entity (LE) Chart Reviews Update	<ul style="list-style-type: none"> ● Upcoming ● Exceptional Children's Foundation – January 19th ● Hillsides – January 25th
COVID FAQs	<p>Q: Can practitioners provide services to clients (either via phone or telehealth) who are currently residing out of state?</p> <p>A: For services that require a license/registration, practitioners must refer to the laws of the State where the client is regarding service provision by out of state licensed staff. Any service provided to the client while that client is out of state is not billable (00000). This also includes services provided by staff who do not require a license.</p>
Procedure Codes Update	<p>QA Bulletin 20-08:</p> <ul style="list-style-type: none"> ● Please refer to the Guide to Procedure Codes which has been posted on-line for information about new E&M procedure codes: https://dmh.lacounty.gov/qa/qama/A Guide to Procedure Codes ● Reviewed common questions regarding updated E&M codes
Preauthorization of IHBS, TBS, and TFC	<p>QA will be issuing a revised QA Bulletin to reflect updates that have occurred such as:</p> <ul style="list-style-type: none"> ● Authorization requests are at the Legal Entity level (do not need to submit new authorization when a client moves between provider sites) ● The date on which claims will begin to be denied has been pushed back to March 1, 2021 ● Other potential updates will be finalized this week ● Please review the slides for details
CANS and PSC Updates	<ul style="list-style-type: none"> ● In submitting CANS data to the state, denials are occurring due to multiple agencies sending multiple CANS on the same client

	<ul style="list-style-type: none"> ○ The State rules unfortunately prevent DMH from submitting in these situations ● Reminder: State is looking at CANS at the client level ● Providers should coordinate with each other regarding who should complete the CANS <ul style="list-style-type: none"> ○ Providers can share copies of CANS with other providers; decide who is doing the CANS and put a copy in your clinical record ● To address, DMH is adding the following assessment types to the CANS and PSC forms: <ul style="list-style-type: none"> ○ Administrative Close –to be used in situations when unable to complete the CANS at the required time period (every 6 months –4-8 months), client/caregiver declined to participate ○ Urgent –select when there is a need for a Reassessment CANS prior to the next reassessment being due (e.g. placement disruptions, significant changes to the child’s behavior); this type of CANS does not change the next due date ● For the 0-5 population, a CANS must be done initially but if the client is not receiving TCM there is no requirement to complete future CANS <ul style="list-style-type: none"> ○ When the client turns 6, the CANS-IP must be done, selecting the “Initial” assessment type
<p>Network Adequacy Provider and Practitioner Administration (NAPPA)</p>	<p>NAPPA is on hold for Directly Operated Providers</p> <ul style="list-style-type: none"> ● DO can still update Service Location Information such as address, phone/fax number ● Hold for Adding New Practitioners or Associating existing practitioners ● Validation Function with NPPES (e.g. Category, Taxonomy, Name) will be available in NAPPA <ul style="list-style-type: none"> ○ Will be limiting use of Practitioner Enrollment in IBHIS ● Once the system is ready, Scenarios/Instructions will be issued <p>NAPPA is LIVE for Legal Entity Providers</p> <ul style="list-style-type: none"> ● Department is aware of the following issues for LE providers: <ul style="list-style-type: none"> ○ Updating of association date which causes claims to deny <ul style="list-style-type: none"> •Fix already applied, will not be an issue from this point forward

	<ul style="list-style-type: none"> •CIOB is currently correcting the practitioners impacted prior to fix •CBO will contact those providers to resubmit the claims ○ Taxonomy differences between PRM and NAPPA <ul style="list-style-type: none"> •Has been updated, but Providers will have to make changes ○ Providers still waiting on Access (make sure to get a C-number, SAR Portal) ○ Practitioners not showing as associated to the Legal Entity (must associate and assign to a Service Location)
Access To Care Monitoring Updates	<ul style="list-style-type: none"> • QA is currently looking at data for August –September 2020 <ul style="list-style-type: none"> ○ In the process of contacting providers who are below 80% who have not already been contacted for the May –July benchmarks • QA will be reviewing Access to Care quarterly starting in 2021. In January, we will review Q4 of 2020 (October-December). • A QA Bulletin will be issued later in January with access to care expectations, reminders and other important information
NOABD Application for LE	<ul style="list-style-type: none"> • Patients Rights and QA have worked with CIOB to develop an on-line application for LE providers to submit NOABDs <ul style="list-style-type: none"> ○ Will no longer fax NOABDs to Patients Rights • The application is expected to be available at the end of January • LE providers must obtain access through the SAR Portal • Eventually, the plan is to develop a web service to submit NOABDs directly from the LE EHRS
Revised Beneficiary Handbook	<p>The Medi-Cal Beneficiary Handbook has been updated</p> <ul style="list-style-type: none"> ○ Includes authorization requirements, continuity of care, and other Final Rule items ○ Still needs to be translated; however, includes taglines in other languages <p>Reminder: Must provide the Handbook when beneficiary first accesses services and thereafter upon request</p> <p>The Handbook is considered to be provided to the beneficiary when the Provider has:</p> <ul style="list-style-type: none"> ○ Mailed a copy to the beneficiary's mailing address;

	<ul style="list-style-type: none"> ○ E-mailed a copy to the beneficiary after obtaining their agreement to receive by email; ○ Provided a written notification (paper or electronic) to the beneficiary with a link to the Handbook; ○ Handed a copy directly to the beneficiary. <p>To be in compliance with State requirements, we will be posting any significant changes to the Handbook as soon as possible, making every effort to be at least 30 days in advance of changes, on the DMH website QA Bulletin will be issued this week</p>
Directly Operated (DO) QA Check-Ins and Chart Reviews	<ul style="list-style-type: none"> ● Reviewed upcoming schedule (See slide 35-36)
QUALITY IMPROVEMENT	
QI webpage	https://dmh.lacounty.gov/qid/
QI Updates	<p>EQRO 2020 SUMMARY Report is available. Link here: https://www.caleqro.com/data/MH/Reports%20and%20Summaries/Fiscal%20Year%202020-2021%20Reports/MHP%20Reports/Los%20Angeles%20MHP%20EQRO%20Final%20FY20-21%2012.29.20.pdf</p> <p>EQRO Review was discussed. See slides 43-48</p> <ul style="list-style-type: none"> ● EQRO team impressed with LACDMH's COVID response and shift to telehealth ● Psychiatry and Peer Review Process at DO ● Therapeutic Transport - multidisciplinary team ● Street medicine pilot with homeless population ● Improving CSP communication (one page summaries)
ACCESS Center	<p>Clinics temporarily not accepting referrals – none listed for SA 8</p> <ul style="list-style-type: none"> ● 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.

Change of Provider Logs (COP)	Please continue to submit (LEs email DMHCOP@dmh.lacounty.gov ; DOs continue submitting via online app).
NEXT MEETING	Next meeting will be held on February 17, 2021 from 1:30PM-3:30PM.

Ann Lee PhD

Minutes Recorded by Ann Lee, DMH SA 8 Administration



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**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 QUALITY IMPROVEMENT COMMITTEE (QIC) MEETING
01/20/2021
1:30PM-3:30PM**

Members Present:

NAME	PROGRAM/AGENCY
Aaron Icedo	DMH San Pedro
Amy Sutherland	Aspiranet
Ana Viana	Star View
Angela Lee	DMH TIES for Families-South Bay
Anna Galindo	Personal Involvement Center
Annetse Desta	DMH
Anya Juvasvat	Dream Home Care Inc.
Brenda Miranda	alma family services
Carina Hernandez	Star View Community Services
Cherrelle Harris	Personal Involvement Center
Cheryl Malinowski	Telecare MHUCC
Claudia Morales	Pacific Asian Counseling Services
Dalia Diaz	Helpline Youth Counseling Inc.
Daphne King	South Bay Children's Health Center
David Worden	SHIELDS for Families
Debra DeLeon	SSG-OTTP
Denice Palacios	Telecare Older Adults FSP
Denise Shook	Behavioral Health Services, Inc.
Dexter Jefferson	Tarzana Treatment Centers
Dora Anderson	Harbor 6859 and 7738
Dr. Tiffany Harvey	Alafia Mental Health Institute
Efrain Marquez	Behavioral Health Services
Ekaete Ekpo	Exodus Recovery
Elva Gutierrez	The Guidance Center
Erica Julian	Shields for Families
Eugenia Cervantes	DMH WOW volunteer
Evelyn Nankanja	Dream Home Care Inc.
Gavin Tochiki	Telecare 7
Hala Masri	SSG Alliance
Helen Chang	Coastal API Family MHC
Janine Solano	Star View Community Services

Jeff Baer	DMH - Long Beach Child and Adolescent Program
Jen Regan	DMH QI
Jennifer Mitzner	Olive Crest
Jesica Sandoval	AADAP, Inc.
Josie Myles	Dimondale adolescent
Karina Quintero	Shields for Families
Kate Katzban-Beren	One In Long Beach
Kathleen Villagomez	San Pedro Mental Health
Kristina Castellanos	Starview Community Services
Layhearb Poon	Long Beach api
Linda Nakamura	Masada Homes
Lisa Sumlin	Counseling4Kids
Makesha Jones-Chambers	DMH CMMD
Maria Llamas	For The Child
Martin McDermott	Bayfront Youth & Family Services
Melinda Kuoch	DMH HOME 8
Michele Munde (co-chair)	Star View Behavioral Health
Natalie Anderson	ChildNet
Nicole Santamaria	Helpline Youth Counseling
Nicolette Bidlingmeyer	1736 Family Crisis Center
Nizhu Minhaz	COUNSELING4KIDS
Patti Dilliner	Children's Institute, Inc.
Paula Valencia	Star View BHUCC
Rosa Diaz	Alma Family Services
Ruth Wen	DMH San Pedro
Socorro Elias	Tarzana Treatment Centers
Stephanie Canales	Star View
Susan Osborne	Mental Health America of Los Angeles
Yessica Brown	Crittenton services

SA 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT COMMITTEE MEETING

January 20, 2021 1:30PM - 3:30PM

- ▶ [Join Microsoft Teams Meeting](#)
- ▶ [+1 323-776-6996](#); Conference ID: 691 014 664#

Electronic sign-in – please click the link to complete the sign-in survey:

<https://tinyurl.com/SA8QualityJan2021>



SA 8 Countywide Activity Fund (CAF) Participants

SA 8 QI/QA meetings are approved for CAF reimbursement

CAF Questions? Please email Ann Lee, SA 8 CAF Liaison
CAF@dmh.lacounty.gov

- ❖ **Meeting sign-in is required.** Sign-in options:
 - ❖ Use electronic sign-in option on the first slide;
 - ❖ Enter your full name into the chat/conversation box; OR
 - ❖ Contact Ann Lee at (562) 256-1270 (voicemail only) or alee@dmh.lacounty.gov to confirm your attendance

Agenda

I. 1:30-2:30 QA

II. 2:30-3:30 QI

Central QA/QI meeting link and QA Communication

- Central QA/QI Meeting recordings:
 - 12/14/20 - https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=8755
 - 1/11/21 - https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=8793

- **Please signup for Central QA meeting reminders via <https://tinyurl.com/QA-QI-Meeting-Invite>**

- **QA Communications:**
 - Emails will come from “County of Los Angeles”
 - Subject will be “County of Los Angeles DMH – Quality Assurance”
 - These meetings are recorded and posted online at:
<https://dmh.lacounty.gov/qa/qaw/>

- **Next Central QA/QI meeting will be held on February 8th, 10:30am-12:00pm**

HEALTH INFORMATION MANAGEMENT

- The Health Information Management team has a new eFax number: (213) 652-1875
- The new eFax number is the preferred method for sending record requests from Directly-Operated clinics to Health Information Management.
- The eFax goes directly to an inbox that staff can monitor while teleworking.

STATE UPDATE - WAIVERS

- Requirements changing significantly.
- Students (persons in formal graduate psychology programs) will no longer need a DHCS-issued Waiver (under WIC 5751.2) in order to provide “license-requiring” services
 - Must not be employed or under contract with the MHP (DO and 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 five years.
- DHCS Information Notice forthcoming (Issued 20-069 Dec 11, 2020)

ANNUAL QA REPORT – LEGAL ENTITY

- **Due Date: January 31, 2021**
 - **To Be Submitted By:** All Legal Entity Contract Providers
 - 1 per Legal Entity
 - **Required Forms:** Annual QA Report for Legal Entities
Written QA Process for Legal Entities
Corrective Actions Plan (if indicated)
 - **Updates:** New questions on QA Report form
 - Person responsible for entering/updating NAPPA
 - Person responsible for monitoring access to careNew item on Written QA Process form
 - Clinical peer review process – ensuring standard level of quality of care
- * Updated forms were attached with memo that was sent out 12/23/20

ANNUAL QA REPORT – LEGAL ENTITY

[QA/ Chart Review Requirements - Department of Mental Health \(lacounty.gov\)](#)

QA Requirements for LE

[QA Report for LE Contractors](#)

[QA Report Corrective Action Plan](#)

[QA Written Process for Legal Entities](#)

[Chart Review Checklist](#)

[Chart Review Checklist – Day Programs Supplement](#)

QA/QI CONTACTS BY SERVICE AREA

Updates will include:

- QA Lead – Ilda Aharonian resuming coverage of SAs 1 and 2
- Specialty Area Changes
 - Child Welfare – formerly Prevention
 - Forensic Psychiatry – includes Juvenile Halls & Camps
 - Outpatient Services
 - Transition Age Youth

Draft will be sent out to SA Liaisons, QIC Co-Chairs and QA/QI Leads for review

QA KNOWLEDGE ASSESSMENT SURVEY

- Project is resuming
 - Survey consists of documentation sample and questions regarding the sample
 - Completed anonymously
- Purpose is educational and to inform areas to emphasize in training
- Link to QA Knowledge Assessment Survey # 3 will be sent out this week
 - Will be sent to QA contact person(s) of each Legal Entity (LE)
 - QA contact person(s) will identify/coordinate which staff within LE to send survey link
- Survey link will remain open for 4-5 weeks
 - Anonymous countywide results will be sent out/posted shortly after survey closes

LEGAL ENTITY CHART REVIEWS

- Upcoming
 - Exceptional Children's Foundation – January 19th
 - Hillsides – January 25th

POLICY & TECHNICAL DEVELOPMENTS:

COVID FAQs

Q: Can practitioners provide services to clients (either via phone or telehealth) who are currently residing out of state?

A: For services that require a license/registration, practitioners must refer to the laws of the State where the client is regarding service provision by out of state licensed staff. Any service provided to the client while that client is out of state is not billable (00000). This also includes services provided by staff who do not require a license.

POLICY & TECHNICAL DEVELOPMENTS:

COVID FAQs

Q: If a client has tested positive for COVID-19, can this information be disclosed to the provider/staff who will be seeing the client for an intake?

A: The client's COVID-19 status should be disclosed to the provider/staff if the client has not already disclosed that information. Disclosing this would not be a HIPAA violation. Refer to LACDMH Policy 500.02 [Uses and Disclosures of Protected Health Information Not Requiring an Authorization](#). This allows the provider to take the precautions necessary to mitigate any risks (e.g. providing options for telehealth) and communicate with the Department of Public Health for recommendations if needed. Providers can also refer to the LA County Department of Public Health COVID19 webpage [LAC | DPH | COVID-19 Isolation - Patient Information \(lacounty.gov\)](#) and Centers for Disease Control and Prevention's webpage [Information for Healthcare Professionals about Coronavirus \(COVID-19\) | CDC](#) regarding up-to-date information about COVID-19 for community members and healthcare professionals.

PROCEDURE CODES UPDATE:

Effective 1/1/2021

QA Bulletin 20-08 has been issued discussing these updates

Please refer to the Guide to Procedure Codes which has been posted on-line for information about new E&M procedure codes: <https://dmh.lacounty.gov/qa/qama/>

[A Guide to Procedure Codes](#)

PROCEDURE CODES UPDATE:

Phone E&M MSS Procedure Codes

effective January 1, 2021

The new telephone E&M codes for established clients are based on the duration of the call, not total billable time.

Procedure Code	Type of Client	Duration of call / Medical Discussion	Face-to-Face Time
H2010SC	New	Any	0
99441 (new)	Established	5-10 min	0
99442 (new)	Established	11-20 min	0
99443 (new)	Established	21+ min	0

Example: MD provided a med support service over the phone w/ a client for 19 minutes. MD also conducted a chart review prior to the call and documentation after the call (additional 25 minutes).

- Procedure code to select: **99442** (based on 19-minute call)
- **Face to Face Time = 0** and **Other Time = 44** (duration of call + record review + documentation time)
 - Indicate in the note that other time includes time spent reviewing the chart and documenting

PROCEDURE CODES UPDATE:

Common Questions regarding updated E&M codes

What procedure code should be used for an initial medication evaluation that will be completed over the phone?

For a **new client** (not seen by an MD/DO/NP within the past 3 years within a LE), use H2010SC.

For an **established client** (seen by an MD/DO/NP within the past 3 years within a LE), use 99441, 99442, or 99443 depending on the length of the call.

What procedure code should be used for phone medication services that are not with the client (e.g., calling the pharmacy regarding the medications)

H2010SC

PROCEDURE CODES UPDATE:

Common Questions regarding updated E&M codes

Q: Would psychiatrists ever use 90791 or 90792 for initial medication evaluations?

A: No, 90791 and 90792 are Mental Health Services (MHS). Psychiatrists would use a Medication Support Service (MSS) procedure code for initial medication evaluations.

Q: If a medication support service was supposed to be provided using telehealth, but the client decides not to turn on his/her camera, what procedure code should be used?

A: Since the client wasn't seen, the service should be treated as a phone service rather than a telehealth service. Use one of the new E&M codes for phone services (99441, 99442, or 99443) for MSS provided to established clients. Use H2010SC, if the service is an initial medication evaluation to a new client.

PREAUTHORIZATION OF IHBS, TBS, TFC

QA will be issuing a revised QA Bulletin to reflect updates that have occurred such as:

- Authorization requests are at the Legal Entity level (do not need to submit new authorization when a client moves between provider sites)
- The date on which claims will begin to be denied has been pushed back to March 1, 2021
- Other potential updates will be finalized this week

PREAUTHORIZATION OF IHBS, TBS, TFC

When selecting a Benefit Plan within Provider Connect, must select the plan with the service you are requesting (e.g., IHBS)

- You will either see a specific Benefit Plan associated to the Funding Source (e.g., DMH MH Svcs-STRTP –IHBS [MC])...

Funding Source & Benefit Plan Information

Funding Sources:
DMH Mental Health Services (CGF) MC

Program:
- Please Choose One -

Benefit Plan:
- Please Choose One -
XXX CGF IMD Step Down (MC)
DMH MHSvcs (MC / HF) DAYTX
DMH MH Services (MC)
XXX Homeless Services (MC)
XXX expired
XXX Post-Release Comm Sprvsn MC
DMH MH Svcs TSCF[MC]
DMH MH Svcs ISFC[MC]
DMH MH Svcs STRTP[MC]
DMH MH Svcs IHBS [MC]

Authorization Group
Leave blank for individual CPT Codes requests.
▼

PROCEDURE CODE

PREAUTHORIZATION OF IHBS, TBS, TFC

When selecting a Benefit Plan within Provider Connect, must select the plan with the service you are requesting (e.g., IHBS)

- Or a more generic Benefit Plan which was recently added (e.g., TBS [Non-MC])

Funding Source & Benefit Plan Information

Funding Source:
CalWORKs MHS Non-MC

Program:
- Please Choose One - *

Benefit Plan:
- Please Choose One -
- Please Choose One -
CalWORKs MHS Non-MC
CalWORKs MHS IHBS (Non-MC)
TBS (Non-MC)

QA BULLETIN 20-05:

Pre-Authorization FAQs

Q: If a family refuses ICC services, are they still eligible for IHBS services?

A: There must be a CFT in order to have IHBS services. ICC and CFTs are intertwined, therefore, you must be getting ICC services in order to get IHBS. Providers should discuss with the family the benefit of the cross-agency collaboration amongst the child serving systems.

QA BULLETIN 20-05:

Pre-Authorization FAQs (cont'd)

Q: If a client is in wraparound with our agency but has an outside therapist who completed the assessment/care plan/CANS—who submits for authorization? The Wraparound agency or the agency providing the therapy?

A: The agency that is going to provide the IHBS services must submit the authorization request. In the example provided, the Wraparound agency who will be providing the IHBS would submit the authorization request.

QA BULLETIN 20-05:

Pre-Authorization FAQs (cont'd)

Q: Can we request pre-authorization for a client who is indigent or does not have Medi-Cal?

A: Yes, a client who is indigent or who does not have Medi-Cal can still qualify for ICC and IHBS. LACDMH made a decision to provide the same services to indigent as to Medi-Cal clients.

CANS and PSC UPDATES

- In submitting CANS data to the state, denials are occurring due to multiple agencies sending multiple CANS on the same client
 - The State rules unfortunately prevent DMH from submitting in these situations
- Reminder: State is looking at CANS at the client level
- Providers should coordinate with each other regarding who should complete the CANS
 - Providers can share copies of CANS with other providers; decide who is doing the CANS and put a copy in your clinical record

CANS and PSC UPDATES (cont'd)

- To address, DMH is adding the following assessment types to the CANS and PSC forms:
 - Administrative Close –to be used in situations when unable to complete the CANS at the required time period (every 6 months –4-8 months), client/caregiver declined to participate
 - Urgent –select when there is a need for a Reassessment CANS prior to the next reassessment being due (e.g. placement disruptions, significant changes to the child’s behavior); this type of CANS does not change the next due date
- For the 0-5 population, a CANS must be done initially but if the client is not receiving TCM there is no requirement to complete future CANS
 - **When the client turns 6, the CANS-IP must be done, selecting the “Initial” assessment type**

UPDATED CANS-IP and NEW CANS 0-5 FORMS

Assessment Date: _____

Assessing Practitioner: _____

Assessment Type: Initial Reassessment Discharge Administrative Close Urgent

Paper CANS-IP and CANS 0-5

- Added “Urgent” and “Administrative Close” as Assessment Types
- Added questions from the TCM Needs Evaluation

UPDATED CANS-IP and NEW CANS 0-5 FORMS (cont'd)

Clinical Forms Bulletin will be issued shortly

- Updated CANS-IP and CANS 0-5 forms will be available online in the coming weeks and available in IBHIS on 2/5/21

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS-IP)
LA County DMH Version

1. **Areas of sufficiency or strength (i.e. areas marked as "0"):**

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

2. **Areas of potential need (i.e. areas marked as "1," "2," or "3"):**

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):

CANS and PSC UPDATES (cont'd)

- For CANS and PSC questions that are not answered in the bulletins, FAQs, or webinars listed below, please contact:
PEIOutcomes@dmh.lacounty.gov
- [Child & Adolescent Needs and Strengths \(CANS\) Training - Department of Mental Health \(lacounty.gov\)](#)
- [Child Adolescent Needs and Strengths \(CANS\) and Parent Symptom Checklist \(PSC\)](#)
- [19-03: CANS/PSC Update](#)
- [19-02: CANS/PSC Implementation](#)

NETWORK ADEQUACY: PROVIDER & PRACTITIONER ADMINISTRATION (NAPPA)

NAPPA is on hold for **Directly Operated Providers**

- DO can still update Service Location Information such as address, phone/fax number
- Hold for Adding New Practitioners or Associating existing practitioners
- Validation Function with NPPEs (e.g. Category, Taxonomy, Name) will be available in NAPPA
 - Will be limiting use of Practitioner Enrollment in IBHIS
- Once the system is ready, Scenarios/Instructions will be issued

NAPPA (cont'd)

NAPPA is LIVE for **Legal Entity Providers**

Department is aware of the following issues for LE providers:

- Updating of association date which causes claims to deny
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- Providers still waiting on Access (make sure to get a C-number, SAR Portal)
- Practitioners not showing as associated to the Legal Entity (must associate and assign to a Service Location)

We will address additional FAQs during the next Network Adequacy Webinar (1/12/21, 9am) and post on the QA Webpage.

NAPPA (cont'd)

Taxonomy Codes

- Guide to Procedure Codes will be updated to provide instructions on taxonomies and the association to discipline (e.g. Social Worker) and category (e.g. Associate Clinical Social Worker) – QA Bulletin will be issued

- DHCS' directive

Category	Taxonomy Description
→ Associate Clinical Social Worker	101YM0800X - Counselor Mental Health
Licensed Clinical Social Worker	104100000X - Social Worker
	1041C0700X - Social Worker, Clinical
	1041S0200X - Social Worker, School
→ Associate Marriage and Family Therapist	106H00000X - Marriage and Family Therapist
Licensed Marriage and Family Therapist	106H00000X - Marriage and Family Therapist

- NAPPA will **temporarily** allow 104 series of taxonomy codes for ASW and 101YM0800X for AMFT. **Medicare Caution!**
- Providers will have to update practitioners' taxonomy accordingly by March 31, 2021
- As of **April 1**, taxonomy code for ASW will be 101YM0800X only, and both AMFT and LMFT will be 106H00000X.

ACCESS TO CARE MONITORING UPDATES

- QA is currently looking at data for August –September 2020
 - In the process of contacting providers who are below 80% who have not already been contacted for the May –July benchmarks
- QA will be reviewing Access to Care quarterly starting in 2021. In January, we will review Q4 of 2020 (October-December).
- A QA Bulletin will be issued later in January with access to care expectations, reminders and other important information

NOABD APPLICATION FOR LE

- Patients Rights and QA have worked with CIOB to develop an on-line application for LE providers to submit NOABDs
 - Will no longer fax NOABDs to Patients Rights
- The application is expected to be available at the end of January
- LE providers must obtain access through the SAR Portal
- Eventually, the plan is to develop a web service to submit NOABDs directly from the LE EHRS

The screenshot shows a web-based form titled "Notice of Adverse Benefit Determination". The form is for "150A EXODUS RECOVERY INC" and is in the "Create New Form" stage. The "General" section includes the following fields:

- Notice Type:** Delivery System (medical necessity)
- Service Type:** Outpatient Services
- Date of Letter:** 1/11/2021
- Service Delivery Reason:** Your mental health diagnosis, if any, is not covered for SMHS under OCR Title 3 Section 15.
- Client:** [Redacted]
- Provider:** 150A EXODUS RECOVERY INC
- Requesting Party:** [Redacted]
- Additional Information:** [Empty text area]
- Alternative Provider:** [Redacted]

The image shows a sample of a printed "NOTICE OF ADVERSE BENEFIT DETERMINATION About Your Treatment Request" from the Department of Mental Health. The letter is dated 1/11/2021 and is addressed to 150A EXODUS RECOVERY INC at 3754-66 OVERLAND AVENUE, LOS ANGELES, CA 90034-0312. The letter is signed by Jonathan E. Sherin, M.D., Ph.D., Director, and includes the names of the Chief Medical Officer and Senior Deputy Director. The subject of the notice is "Specialty Mental Health Services (SMHS)".

DEPARTMENT OF MENTAL HEALTH
hope, recovery, wellbeing

JONATHAN E. SHERIN, M.D., Ph.D.
Director

Gregory C. Park, M.P.A.
Chief Deputy Director

Colley L. Bonds, M.D.
Chief Medical Officer

Lisa H. Wong, Psy.D.
Senior Deputy Director

NOTICE OF ADVERSE BENEFIT DETERMINATION
About Your Treatment Request

1/11/2021

150A EXODUS RECOVERY INC
3754-66 OVERLAND AVENUE
LOS ANGELES, CA 90034-0312

RE: Specialty Mental Health Services (SMHS)

This notice lets you know that the Los Angeles County Mental Health Plan (the Plan) has determined that your mental health condition does not meet the medical necessity criteria to be eligible for specialty mental health services under the California Code of Regulations (CCR).

REVISED BENEFICIARY HANDBOOK

The Medi-Cal Beneficiary Handbook has been updated

- Includes authorization requirements, continuity of care, and other Final Rule items
- Still needs to be translated; however, includes taglines in other languages

Reminder: Must provide the Handbook when beneficiary first accesses services and thereafter upon request

The Handbook is considered to be provided to the beneficiary when the Provider has:

- Mailed a copy to the beneficiary's mailing address;
- E-mailed a copy to the beneficiary after obtaining their agreement to receive by email;
- Provided a written notification (paper or electronic) to the beneficiary with a link to the Handbook;
- Handed a copy directly to the beneficiary.

To be in compliance with State requirements, we will be posting any significant changes to the Handbook as soon as possible, making every effort to be at least 30 days in advance of changes, on the DMH website

QA Bulletin will be issued this week

DO QA CHECK-INS & CHART REVIEWS

2021

Month

DO Programs

January	1906 & 7769 Edmund Edelman MHC and Wellness Center
February	7777 & 7705 East San Gabriel MHC and SA 3 FSP Program
April	6859 & 7738 Harbor and Wellness
May	7468 San Antonio Family Center
July	7057 & 7706 Downtown MHC and FSP Program
September	1908 & 7955 West Central MHC and Wellness Field Based
October	1935 South Bay MHC and Wellness Center
November	1905 Santa Clarita
December	7421 & 7784 American Indian and FSP Program

DO QA CHECK-INS & CHART REVIEWS

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QA Training and Operations

(Snapshot of slides from Central QA/QI meeting on 10/5/20)

Training & Operations Contacts

- Nikki Collier ----- ncollier@dmh.lacounty.gov
- Robin Washington ----- rwashington@dmh.lacounty.gov
- Marc Borkheim ----- mborkheim@dmh.lacounty.gov
- Wanta Yu ----- wyu@dmh.lacounty.gov
- Patricia Lopez ----- plopez@dmh.lacounty.gov
- Ilda Aharonian ----- iaharonian@dmh.lacounty.gov
- Dennis Lam ----- dnlam@dmh.lacounty.gov

QA Training and Operations

(Snapshot of slides from Central QA/QI meeting on 10/5/20)

QUESTIONS

General QA questions: QualityAssurance@dmh.lacounty.gov

IBHIS/Documentation questions: ibhiserrorcorrection@dmh.lacounty.gov

Training for DO: QADOTraining@dmh.lacounty.gov

Network Adequacy and access to care questions: NetworkAdequacy@dmh.lacounty.gov
(New!!)

Requests for additional telehealth and/or telephone procedure codes: Su Kim
sjkim@dmh.lacounty.gov (New!!)

QA Policy & Technical Development

ACCESS To Care and Network Adequacy

- Webinar held [December 8, 2020](#)
- Webinar held 1/12/21 – not yet posted

Next ATC/NA Webinar:

February 2021 9 - 10:00 AM

Email to be added to invite list:

Networkadequacy@dmh.lacounty.gov

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

OTHER HELPFUL LINKS:

[HTTPS://DMH.LACOUNTY.GOV/PC/CP/](https://dmh.lacounty.gov/pc/cp/)

CLIENT SERVICE – FREQUENTLY ASKED QUESTIONS

<https://dmh.lacounty.gov/pc/cp/faqs/>

[837P 5010 Companion Guide v1.16](#)

[MSO Denial & Adjustment Cheatsheet](#)

[LE Monthly Payment Schedule 2019-2020](#)

QI AGENDA TOPICS

1. EQRO 2020 SUMMARY

- Summary Report is available. Link here:

<https://www.caleqro.com/data/MH/Reports%20and%20Summaries/Fiscal%20Year%202020-2021%20Reports/MHP%20Reports/Los%20Angeles%20MHP%20EQRO%20Final%20FY20-21%2012.29.20.pdf>

QI AGENDA TOPICS

(Snapshot of slides from Central QA/QI meeting on 1/11/21)

2020 EQRO Review

2020 Review was virtual

Took place over 4 days from September 28 - October 1

Major Areas of Focus:

- Access to Care
- Timeliness of Care
- Quality of Care
- Outcomes
- Organizational Structure & Foster Care

Special Focus on SA 2 & 5

QI AGENDA TOPICS

(Snapshot of slides from Central QA/QI meeting on 1/11/21)

Areas of Strength

DMH overall response to Covid-19 and shifts to telehealth to ensure continuity of care

Establishment of a Psychiatry Review Process this year

Innovative programming promoting access to care: Therapeutic

Transport and Outpatient Conservatorship Pilot

Consumer engagement and improvements to the Consumer Perception

Survey Report

QI AGENDA TOPICS

(Snapshot of slides from Central QA/QI meeting on 1/11/21)

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QI AGENDA TOPICS

(Snapshot of slides from Central QA/QI meeting on 1/11/21)

Areas of Focus for Improvement

Communication processes between Executive Management and the LE/Contract providers

Adaptation of an Adult Outcomes Measure tool

More detailed tracking of timeliness measures

QI AGENDA TOPICS

(Snapshot of slides from Central QA/QI meeting on 1/11/21)

Consumer Focus Group Feedback

The SA 2 Adult focus group participants requested an increase in the use of zoom among LE/Contracted providers, and several participants reported dissatisfaction with a local acute inpatient unit (Olive View Inpatient).

The SA 2 TAY focus group participants reported technical connectivity issues with telehealth, mainly bandwidth problems that disrupted treatment sessions.

The SA 5 TAY focus group participants found telehealth convenient and efficient but presented concerns with social isolation and mental health stigma among parents from LatinX communities.

The SA 5 Child Caregiver focus group participants expressed a preference for face-to-face services and ongoing virtual support groups for child consumers.

QI AGENDA TOPICS

(Snapshot of slides from Central QA/QI meeting on 1/11/21)

Notable Recommendations

Review Psychiatric Inpatient Readmission rate of 33.4%.

Expand Medication Monitoring protocols to Les.

Produce CANS-50 and PSC-35 reporting in a format that provides programmatic utility for providers.

Improving communication between DMH and LE/Contract Providers.

Develop comprehensive post-COVID-19 telehealth plan that maintains a robust telehealth presence.

QI AGENDA TOPICS

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

HELPFUL QI LINKS <https://dmh.lacounty.gov/qid/>

POLICIES AND PARAMETERS:

[LAC-DMH Policies and Procedures](#)

[DMH Practice Parameters](#)

SA 8 QI/QA MEETING INFO

NEXT MEETING:

February 17th 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 sign-in survey if you
participated in today's meeting.*

[https://tinyurl.com/SA8Quality
Jan2021](https://tinyurl.com/SA8QualityJan2021)



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