

**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>	February 17, 2022	
<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-Chair</b>	Open			
<b>Members Present</b>	Adik Parsekhian, Anabel Aispuro, Aubrey Ferman, Cheryl Davis, Cindy Luna, Claudia Morales, Dave Mendez, David Lopez, Diana Dawson, Elizabeth Pak, Erik Sherman, Gina Leggio, Heather Bowen, Heylee Barriola, Ilda Aharonian, Iliana Martinez, James McEwen, Jeanine Caro-Delville, Jennifer Mitzner, Jennifer Palma, Karina Krynsky, Katherine Smith-White, Kaylee Devine, Kim Peterson, Kimber Salvaggio, Laura Padrino, Luis Pereira, LyNetta Shonibare, Maggie Holland, Mercedes Cortez, Meredith Hatch, Michelle Rittel, Michelle Wells, Morgan Goulet, Roman Shain, Stephanie Ochoa, Terica Roberts, Tyler London, Vi Nguyen, Vicky Shabanzadeh			
<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</b> <b>Introductions and Announcements:</b> Michelle Rittel	Meeting called to order at 1:30pm. Elizabeth Pak from Medi-Cal Certification announced that Honey Hira has left DMH following the birth of her child and Elizabeth and other Certification staff will be covering SA2. If providers have any questions or concerns, please let her know. She also announced A50 Fire Safety Inspection Request is not to be used. Certification asks that you contact your local fire authority. The Fire Chiefs have been very upset about the use of those forms, because they are not valid. Also, Certification is doing desk reviews of electronic files. They prefer documents be sent in a Zip file or two if needed.			
<b>Review of Minutes:</b> Michelle Rittel	Minutes from December 16, 2021 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>			
<b>DMH QIC Meeting Report:</b> Michelle Rittel	<p>Presentation – Consumer Perception Survey Data: Service Area 2 Youth/Family Trends Fall 2018 to Spring 2021– Presented by LyNetta Shonibare from QID. Power Point presentation was emailed to everyone prior to the meeting.</p> <p>CPS Spring 2022: CPS is coming up in May. LE Providers were encouraged to start working on getting C numbers for all staff that will be involved with CPS administration.</p> <p>Compliance, Policy &amp; Audit Services Update: Monthly bulletins with new, revised and deleted policies are posted online and can be reviewed on the DMH website. The December 2021 bulletin was briefly reviewed.</p> <p>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 <a href="mailto:crrojas@dmh.lacounty.gov">crrojas@dmh.lacounty.gov</a></p>		

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<b>Quality Assurance (QA)</b>			
<b>Departmental QA Meeting Report:</b> Michelle Rittel	<p>General QA Updates: MR Grant will no longer provide audits for LACDMH as of January 2022. Diane Guillory has retired and Professional Licensing Waivers will be transferred to Policy and Technical Development, with David Crain being the lead. Continue using this email address: <a href="mailto:waivers@dmh.lacounty.gov">waivers@dmh.lacounty.gov</a> . The waiver request form has been updated by DHCS. The QA On the Air webcasts will be continuing on a monthly basis starting in March.</p> <p>State Updates: Medi-Cal Rx – LACDMH is aware that the Medi-Cal Rx transition has not been smooth and is working with the state to address issues. If there are significant issues preventing a client from getting medications timely, please contact Dr. Sou at <a href="mailto:pharmacy@dmh.lacounty.gov">pharmacy@dmh.lacounty.gov</a> (213) 738-4725.</p> <p>CalAIM – QA Bulletin 21-08: New Criteria to Access SMHS &amp; Medical Necessity – The bulletin was sent out to everyone. A training video has been posted on the QA Training webpage. Per DHCS, children (under 21) who would meet criteria to access SMHS based solely on child welfare involvement, homelessness or juvenile justice involvement may still be determined not to need the level of care provided by SMHS and may be referred to non-SMHS prior to assessment. DHCS will be developing FAQs and will address this in writing. DMH QA has developed FAQs for QA Bulletin 21-08. The FAQs were briefly reviewed and are posted with the bulletin online.</p> <p>CalAIM - Documentation Redesign – Coming 7/1/22 – Highlights from the draft “Documentation Requirements for all SMHS, DMC-ODS and DMC Services” were reviewed. LACDMH will be looking at how to clearly identify the minimum documentation requirements and is already having</p>		

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

discussions around how to modify our electronic health record (IBHIS) for Directly Operated. If you are interested in sharing your opinions on what documentation areas can be improved, there was a survey link provided with the Power Point slides.

CalAIM – Screening and Transition Tools – coming 1/1/23 – DHCS will require the use of standardized screening and transition tools across the state. The screening tools will facilitate accurate determinations of when care would be better delivered in the MCP or the MHP service system. The transition of care tools will support a beneficiary’s transition to the other delivery system when their condition changes. There will be both adult and child versions of the tools.

CalAIM – Payment Reform/CPT Codes – coming 7/1/23 – LACDMH is currently reviewing a final draft of the DHCS Billing Manual. DHCS is hoping to release the final version in February or March. LACDMH is requesting a document from DHCS covering the key fundamental changes in how billing will be done.

Audits: None scheduled for SA2 Children’s Providers.

Training and Operations: Annual LE QA Report and Written QA Process – Thank you to everyone for submitting your reports, processes and supplements. Submissions are currently being reviewed and you will be contacted if there are any questions.

Collaborative Documentation – QA are coordinating additional CD resources and the next set of General CD Trainings and Train-the-Trainer sessions with MTM. They will let us know when those will be happening and how to register. Please direct questions to Wanta Yu [wyu@dmh.lacounty.gov](mailto:wyu@dmh.lacounty.gov) You can also view the CD webpage on the QA website.

LE Chart Reviews – Counseling4Kids review begins mid-March. QA is coordinating additional reviews for April and May and updating the Chart Review Checklist.

Training Updates – Currently updating Reimbursement & Claiming module on LE/Non-IBHIS QA Training page to incorporate CalAIM changes. Should be available next month.

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

Policy and Technical Development: Writing Letters for Support Animals – AB 468 Emotional Support Animals: prohibits a licensed healthcare professional from providing documentation related to an individual’s need for an emotional support dog unless the practitioner complies with certain criteria. The criteria include that they must possess a valid, active license and establish a client-provider relationship with the individual for at least 30 days prior to providing the documentation.

Guide to Procedure Codes Updates – There are no updates at this time. QA is hoping to have an ETA for the updates by the next meeting.

Final QA Bulletin 21-09 : Organizational Providers Manual Updates – The bulletin provides key highlights related to changes in the Org Manual. Updated medical necessity and criteria to access SMHS. Removed section on the Clinical Loop and “softened” language around Client Treatment Plan requirements. Removed reference/requirement for the ICC Eligibility Form.

Network Adequacy & Access to Care: Brief Updates – Revised Provider Directory coming end of February/beginning of March. SRTS 2.0 coming early March. Continued focus on monitoring NAPPA and Access to Care. The monthly webinar will be changing to the first Tuesday of the month beginning in April.

Referring clients to their MCP for Non-SMHS – Currently, initially referring out to MCP must not be done at the point of screening. It would happen after the assessment is completed. Under CalAIM, standardized screening and transition tools are coming in January 2023. They are developing FAQs on this topic.

Current Status of Providers Accepting New Beneficiaries – There are 134 Service Locations in NAPPA that show not accepting new beneficiaries, up from 52 a year ago. Please double check that your information is correct for all of your service locations.

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

Access to Care Monitoring Provider Directory Updates – New and improved Provider Directory coming end of February/beginning of March. QA is currently working with CIOB on final edits. Everyone will have access to the same Provider Directory. The Provider Directory is linked to NAPPA data and is refreshed daily. Please make sure your information is correct. QA Bulletin, quick training video and handout are coming soon. Also, if you are listing your website in the Provider Directory, please make sure you use http or https so that it will show up as a link. Additionally, a link was provided so that providers could check their current Provider Directory information and make corrections in NAPPA prior to the Provider Directory going live.

SRTS 2.0 – Final release date TBD – possibly early March – have to ensure training is complete and staff are set up in new SRTS prior to go live. There will be at least 2 weeks notice prior to training dates. There will be a transition period in which you will create new records in 2.0 while dispositioning the old SRTS. Significant changes in new SRTS include: using the same provider sites as the Provider Directory/NAPPA, SRTS will now track to the point of whether or not a client showed for their appointment, removed limitations that prevented normal workflow, new and clarified disposition option, Specialized Foster Care Co-located sites will now use SRTS, refocused SRTS on standardized data elements for access to care.

NAPPA Monitoring and Common Errors – QA continues monitoring NAPPA to ensure it is kept up to date. QA has reviewed 28 providers – 14 LE and 14 DO. QA Monitoring will now include attestation that the provider has verified all required licensed disciplines have enrolled in PAVE.

Language from Contracts was reviewed that addresses the requirement that all providers are to enter and keep current their information in NAPPA. Some common errors found in NAPPA include: missing information for service location and practitioners, many practitioners without association to a service location, the practitioner’s category is incorrect, incorrect updates made to the category/taxonomy.

<p><b>Departmental QA Meeting Report, contd.:</b> Michelle Rittel</p> <p><b>Suggested Items for Nest Meeting:</b></p> <p><b>Handouts:</b></p>	<p>There were no suggestions.</p> <p>QA Bulletin 21-07 QA Bulletin 21-08 QA Bulletin 21-09 SA2 Child CPS – Feb 2022 Power Point SA2 Children’s QIC Power Point – February 17, 2022</p>		
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<b>Next Meeting:</b>	Thursday, April 21, 2022 1:30-3:30pm Location: Online – Teams Meeting		

**Respectfully submitted,**

**Michelle Rittel, LCSW**