



**SA5 Quality Improvement  
Committee Meeting**

December 7, 2021

## Meeting Agenda

- ▶ Welcome and Introductions
- ▶ DMH and SA5 Updates
- ▶ Quality Assurance
- ▶ Quality Improvement
- ▶ Provider Check-ins
- ▶ Next SA5 QIC Meeting - February 22, 2022

## Quality Assurance

- ▶ CalAIM
- ▶ QA Bulletin, No. 21-05, Updates to Practice from Covid-19, 9/17/21
- ▶ QA Bulletin, No. 21-06, Updates to Access to Care Related Policies w/ Timelines Chart, 9/23/21
- ▶ DMH Policy 302.07 Access to Care (Version:2), 9/15/21
- ▶ DMH Policy 302.14 Responding to Initial Requests for Service (Version:2), 9/15/21
- ▶ Access to Care / Network Adequacy
- ▶ QA Bulletin, No. 18-07R, Update: MAT Procedure Codes & Documentation, Revised 9/23/21
- ▶ Triannual Assessments
- ▶ Annual LE Report & Written QA Process
- ▶ QA Knowledge Assessment Presentation (Marc Borkheim)

## Quality Improvement

- ▶ Non-Clinical PIP Review: Closing the Gap between the Access to Care Beneficiaries Receive and What is Expected (Presentation - Daiya Cunnane)
- ▶ SA5 QIC Meetings 2022 - Provider Input

## Provider Check-Ins

- Alcott Center
- Didi Hirsch
- Edelman - Adult
- Edelman - Child
- Exceptional Children's Foundation
- Exodus Recovery
- Family Service of Santa Monica
- New Directions for Veterans
- Pacific Asian Counseling Services
- Providence St. John's
- SHARE!
- St. Joseph Center
- Step Up on Second
- The Help Group
- The People Concern
- UCLA Ties for Families
- Vista Del Mar



**Next SA5 QIC Meeting:**

Tuesday, February 22, 2022  
10:00 - 11:30 am

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH**  
**SA 5 Quality Improvement Committee**  
**Minutes**

<b>Type of Meeting</b>	<b>Quality Improvement Committee</b>	<b>Date:</b>
<b>Place</b>	MS Teams	December 7, 2021
<b>Chair</b>	Dara Vines, DMH	<b>Start Time:</b> 10:00 AM
<b>Co-Chair</b>	Misty Aronoff, Step Up On Second	<b>End Time:</b> 11:30 AM
<b>Members Present</b>	Dara Vines, DMH; Misty Aronoff, Step Up On Second; Jacquelyn Wilcoxon, DMH; Marc Borkheim, DMH QA; Sherry Nourian, Vista Del Mar; Jennifer Regan, DMH QI; Daiya Cunnane, DMH QI; Martha Andreani, Providence St. John's; Araceli Barajas, UCLA Ties for Families; Eloisa Ramos Robles, Exceptional Children's Foundation; Caitlyn O'Hara, Alcott Center; Mandy Sommers, St. Joseph Center; Claudia Angel, Exceptional Children's Foundation; Libby Hartigan, SHARE!; Claudia Morales, PACS; Michelle Matthews, Edelman (Adult); Renee Lee, QA – Medi-Cal Certification; Michele Burton, The Help Group, Cheryl Carrington, Vista Del Mar; Jorge Alfaro, Providence St. John's; Johanna Aguiluz, The People Concern; Jenny Escalante, The Help Group; David Lee, DMH;	
<b>Excused/Absent Members</b>	Patrice Grant, Edelman (Child); Sara van Koningsveld, St. Joseph Center; Kayla Jones, The Help Group; Stephanie Yamada, PACS; Renee Lee, QA – Medi-Cal Certification; Wendy Coloma, The People Concern; Queta Allred, Didi Hirsch; David Tavlin, Step Up On Second; Ashlei Sullivan, The People Concern; Filippo Forni, New Directions for Veterans; Kristine Santoro, Didi Hirsch, Evelyn Leonidas, Didi Hirsch; Nataly Cohen, Didi Hirsch; Kathy Shoemaker, Exodus Recovery; David Kneip, Exodus Recovery; LeeAnn Skorohod, Exodus Recovery; Deborah Gibson, Homes for Life Foundation; Sara Nouri, Alcott Center; Kristi Rangel, Alcott Center; Aminah Ofumbi, Didi Hirsch; Camille Dennis, SHARE!; Trish Burkett, Exodus Recovery; Nilsa Gallardo, Edelman – Adult; Theodore M. Cannady, DMH; Blair Ibarra, Exodus; Angeline Loch, The People Concern; Marina Eckhart, Didi Hirsch; Maureen Cyr, SA5 Home Team/DMH; Lance Lenford, DMH; Michael Lyles, DMH; Esther Lee, CMMD/DMH; Claudia Angel, Exceptional Children's Foundation; Kelly Delish, Family Service of Santa Monica / VDM; Maria Tan, OASOC;	

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations/ Actions/Scheduled Task	Person Responsible/ Due Date
<p><b>Call to Order &amp; Introductions</b></p>	<p>The meeting was called to order at 10:00 AM. The meeting was conducted via MS Teams and telephone due to the Covid-19 pandemic. Participants were asked to type their name and agency information in the meeting chat or to email the Chair if joining by telephone.</p>		<p>Dara &amp; Misty                      QIC                      Membership</p>
<p><b>DMH Updates</b></p>	<p>Jacque Wilcoxon observed that we are coming to the end of a relatively tough year and thanked Providers for all of their hard work. She informed the SA5 QIC that DMH has started to initiate new hiring after a hiring freeze. She expressed awareness that LE Providers are also trying to fill clinical positions at their agencies.</p> <p>The Department is also preparing for the changes that will be coming up based on CalAIM. More information is to come.</p>		
<p><b>Quality Assurance</b></p>	<p>Lastly, Jacque wished SA5 Providers a Happy Holidays and sincere hopes for a productive 2022.</p> <ul style="list-style-type: none"> <li>• CalAIM (California Advancing and Innovating Medi-Cal) Providers should expect a number of changes to medical necessity / criteria to access Specialty Mental Health Services (SMHS) beginning 1/1/2022. The criteria will be less stringent and there will be movement towards expansion of who needs/deserves SMHS to include individuals with past trauma and children with DCFS involvement. DMH QA is recommending that providers be particularly mindful about not denying SMHS at this time, particularly to children. The Org Manual, Beneficiary Handbook and NOABD forms will need to be undergo revision based on CalAIM.</li> </ul>		<p>Providers</p>



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<p><b>Quality Assurance</b></p>	<ul style="list-style-type: none"> <li>QA Bulletin, No. 21-05, Updates to Practice Arising from the Covid-19 Public Health Emergency, 9/17/21            Based on this Bulletin, verbal consent for services will still be allowed. Verbal agreement w/ Client Treatment Plans is also still allowed. Medication Consents can be verbally agreed upon – DOs and LEs should document if the client declined to have the form sent or if the form was sent for client signature. Lastly, QA recently clarified that DOs can sign the Authorization to Release PHI form on behalf of the client (indicating that the client provided verbal authorization). A template is in IBHIS.</li> <li>QA Bulletin, No. 21-06, Updates to Access to Care Related Policies            All providers must ensure that they provide or arrange for timely access to needed SMHS upon request by the client or a provider acting on behalf of the client. Misty went over the access to care timeframes that are outlined in a chart attached to the Bulletin. A short recorded training on the timeframes will be posted on the DMH QA training webpage.</li> <li>DMH Policy 302.7 Version:2 Access to Care 9/15/21            There were a number of modifications to this policy, including: added statements regarding triage policy and the provision of services without a scheduled appointment; information regarding when triage is required; (continued next page)</li> </ul>	<p>QA Bulletin No. 21-05 was emailed to providers prior to the meeting.</p> <p>QA Bulletin No. 21-06 was emailed to providers prior to the meeting.</p>	<p>Providers</p> <p>Providers</p> <p>Providers</p>


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<p><b>Quality Assurance</b></p>	<p>requirements to document information regarding determination of when a client needs to be seen; details on handling emergent cases; and, information on time and distance standards.</p> <ul style="list-style-type: none"> <li>DMH Policy 302.14 Version:2 Responding to Initial Requests for Services 9/15/21</li> </ul> <p>There were a number of modifications to this policy, including information on when an initial request does not need to be recorded and when and how to handle the inability to accept a request. If a provider is unable to serve a potential client due to a justifiable reason, the policy states that the initial request shall be transferred to an appropriate service provider within 1 business day.</p> <ul style="list-style-type: none"> <li>Access to Care / Network Adequacy</li> </ul> <p>SA5 QIC members were reminded to attend the monthly Access to Care / Network Adequacy Meetings via MS Live Events. Changes were recently made to the NAPPA. Misty encouraged Providers to update service locations, age groups and programs for each of their provider numbers on NAPPA.</p> <p>QA is continuing to monitor timeliness, including Providers that do not achieve the 80% threshold of compliance. There has been a significant increase in Providers unable to accept new beneficiaries. Please note that Providers should be accepting medication only cases. However, if the client is (continued next page)</p>		<p>Providers</p> <p>Providers</p>

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<p><b>Quality Assurance</b></p>	<p>stable and no longer needs SMHS, clients may be referred to their Medi-Cal Managed Care Plan for services, including medication monitoring.</p> <ul style="list-style-type: none"> <li>QA Bulletin, No. 19-07R, Update: MAT Procedure Codes and Documentation (revised 9/23/21)</li> </ul> <p>There are 2 providers in SA5 that conduct MAT assessments for the DCFS child population. This revised Bulletin added a statement that MAT must make referrals to needed treatment services in accordance with DMH Policy 302.07 (Access to Care). The referral will not be delayed until the presentation of MAT findings. The following procedure codes were updated: 90791, 90792, H2000 and T1001. There is added reference to the ability to claim ICC when MAT team meetings are for the purpose of beginning, planning, coordinating and linking a child/family to an array of services. QA will be presenting at a Countywide MAT Meeting on 1/24/22.</p> <ul style="list-style-type: none"> <li>Triannual Assessments</li> </ul> <p>Providers were reminded that a Triannual Assessment should take place every 3 years in order to re-evaluate the client, re-establish medical necessity and ensure that the client still needs SMHS. The clinical record and treatment plans should be aligned with the most updated clinical information obtained through the Triannual Assessment. Please refer to the Org Manual for specific information. (Note: Information regarding Triannual Assessments may undergo future changes based on the CalAIM initiatives.)</p>	<p>QA Bulletin No. 19-07R was emailed to providers prior to the meeting</p>	<p>Providers</p> <p>Providers</p>



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	<ul style="list-style-type: none"> <li>SA5 QIC Meetings 2022 – Provider Input                      Dara will be sending out the schedule for 2022 SA5 QIC Meetings soon. Providers indicated that they liked meeting on a quarterly basis for the SA QIC given their participation in the QA/QI Monthly Meetings and the Access to Care / Network Adequacy Meetings. They thought that having more presentations on different topics was a good idea.</li> <li>Provider Check-ins                      There was only a short time for check-ins. Several providers indicated that they are struggling with hiring and that this was the most significant issue impacting service delivery at this time.</li> <li>The next Service Area 5 Quality Improvement Committee Meeting will be held on February 22, 2022 via MS Teams. DO and LE Providers will continue to be invited to participate in the Monthly Countywide QA/QI Meeting.</li> </ul>		<p>Providers</p> <p>Providers</p> <p>Dara and Misty QIC Membership</p>

Respectfully Submitted,



Dara Vines, PhD (Chair)