



# Quality Assurance Bulletin

## Quality Assurance Unit

County of Los Angeles – Department of Mental Health

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September 1, 2026

No. 26-09

### PROVIDER QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT REPORT

For Directly Operated and Contracted Providers

This Bulletin provides information related to reporting requirements for the Provider Quality Assurance and Performance Improvement (P-QAPI) Report (formerly the QA/QI Report) and Written Quality Management Program (QMP) as set forth in the Los Angeles County Department of Mental Health (LACDMH) Outpatient Organizational Providers Contract, the Organizational Provider's Manual, QA Bulletins, and other departmental policies. The P-QAPI and QMP are requirements utilized by Los Angeles County Department of Mental Health (LACDMH) to ensure all providers are adhering to the Department of Health Care Services (DHCS) Medi-Cal Specialty Mental Health Service (SMHS) requirements. All Directly Operated (DO) and Contracted Outpatient Organizational Providers are required to annually submit a P-QAPI Report and a Written QMP.

The P-QAPI Report goes beyond documentation requirements and can be utilized by providers to identify key SMHS requirements and share how critical provider SMHS responsibilities are met. The P-QAPI Report serves as both a comprehensive monitoring tool for the Quality Assurance (QA) Unit and a checklist for providers to verify adherence to requirements including but not limited to quality management, access to care, network adequacy, health information management, consent, credentialing, and LPS designation/authorization. The P-QAPI Report also provides a means for providers to include requirement related supporting documentation (e.g., policies, procedures, workflows) and plans for corrective action.

The Written QMP provides a means for DO and Contracted providers to submit their quality assurance (QA) process as required as well as describe the processes they have in place for performance and quality improvement (QI). The Written QMP is a structured template that allows providers to detail protocols and activities covering the following areas: QA/QI committees, clinical record reviews, QA/QI activities, use of QA/QI related resources, corrective feedback and improvement processes, medication monitoring and training.

#### Reporting Requirement

DO and Contracted providers are required to submit the electronic P-QAPI Report, Written QMP, and any supporting documents or Corrective Action Plan (CAP) forms annually in November. The QA Unit will announce specific deadline dates and any updated forms annually in September. For the 2026 submission, all providers must submit the required documents by **November 16, 2026**. If any information is found to be incomplete or contain errors, the documents must be resubmitted within ten (10) business days from the date of contact by the QA Unit.

The link to the electronic P-QAPI Report, Written QMP form, Corrective Action Plan (CAP) forms, along with related resources and guidance to aid in completing this annual requirement can all be accessed from the [Quality Assurance Plan](#) page on the QA Website.

#### Submission Process

The P-QAPI must be submitted via the [MS Forms](#) while the Written QMP, any supporting documents and Corrective Action Plan (CAP) forms are to be submitted via email to [DMHQAP@dmh.lacounty.gov](mailto:DMHQAP@dmh.lacounty.gov). For DO providers, the documents should include all provider numbers under a program manager (i.e., separate reports are not needed for each provider number). For Contracted providers only one submission is required for all provider numbers under the legal entity.

The following steps are recommended for completion/submission of the P-QAPI Report and Written QMP:

1. Review the guidance and items on the P-QAPI Report Information Gathering Tool
2. Review the items on the Written QMP form

3. Collaborate internally within your agency/program to gather the information needed and to confirm that responses are accurately reflected for the P-QAPI and Written QMP
4. Complete any Corrective Action Plan (CAP) forms as indicated in the P-QAPI Report
5. Gather all supporting documents (i.e. policies, processes and procedures) indicated in the P-QAPI Report
6. Complete Written QMP form (in Excel)
7. Complete and submit the P-QAPI Report electronically via the link provided on the Quality Assurance Plan page of the QA Website
8. Gather any supporting documents indicated in the Written QMP
9. Email Written QMP, any completed CAP forms, and all supporting documents to [DMHQAP@dmh.lacounty.gov](mailto:DMHQAP@dmh.lacounty.gov)

If directly-operated or contracted providers have questions related to this Bulletin, please email the QA Unit at [DMHQAP@dmh.lacounty.gov](mailto:DMHQAP@dmh.lacounty.gov)

cc: DMH Executive Management  
DMH Administration Managers  
DMH QA Liaisons  
Legal Entity Executive Management

DMH Clinical Operations Managers  
DMH Quality Management Division  
DMH CIOB Managers  
Legal Entity QA contacts