



Health Care Agency Behavioral Health Services Policies and Procedures	Section Name:	Quality Improvement
	Sub Section:	Other
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	SIGNATURE	DATE APPROVED
Director of Operations Behavioral Health Services	<u>Signature on File</u>	<u>04/22/2021</u>

SUBJECT: Quality Management and Community Quality Improvement Committee

PURPOSE:

To establish a process for ongoing collaboration between the various divisions in the Health Care Agency (HCA) Behavioral Health Services (BHS) to address quality improvement and quality of clinical care occurrences in order to improve the systems for Medi-Cal beneficiaries who are eligible for mental health services (MHS) and substance use disorder (SUD) services through HCA.

POLICY:

BHS shall establish a quality management (QM) program to determine quantitative measures to assess performance and to identify and prioritize areas of improvement to ensure Medi-Cal beneficiaries who are eligible to receive MHS and SUD services through HCA receive proper screening, assessment, referral and care coordination.

The QM program oversight shall include the establishment of a Quality Improvement (QI) committee to review the quality of MHS and SUD treatment services provided to beneficiaries.

SCOPE:

This policy covers BHS in its delivery of MHS through the Mental Health Plan (MHP) and SUD services through the Drug Medi-Cal Organized Delivery System (DMC-ODS) to all Medi-Cal beneficiaries served.

REFERENCES:

- [Quality Assessment and Performance Improvement \(QAPI\) Work plan](#)
- [Memorandum of Understanding for the Coordination of Behavioral Health Services](#)
- [BHS 01.01.04 Continuity of Care and Referral in SUD programs](#)
- [DMC-ODS Special Terms and Conditions](#)
- [Specialty Mental Health Special Terms and Conditions](#)

DEFINITIONS:

Drug Medi-Cal - Medicaid funding for services for eligible persons with SUD.

Substance Use Disorder (SUD) services - an array of substance use disorder services as defined in the federally approved State Medicaid waiver 1115, also known as “DMC-ODS Special Terms and Conditions”.

Specialty Mental Health Services (SMHS) - an array of mental health service as described in regulations (Title IX) and under the authority of the federally approved State Medi-Cal 1915(b) waiver, also known as the Specialty Mental Health Special Terms and Conditions.

PROCEDURE:

- I. BHS shall implement continuous quality improvement processes as described in the BHS Quality Assessment and Performance Improvement (QAPI) work plan to ensure compliance with quality improvement requirements for MHP and DMC-ODS services including, but not limited to:
 - A. Beneficiary and system outcomes
 - B. Utilization management
 - C. Utilization review
 - D. Provider appeals
 - E. Credentialing and monitoring, and
 - F. Resolution of beneficiary grievances
- II. A Community Quality Improvement Committee (CQIC) shall be established by Authority and Quality Improvement Services (AQIS) as part of the Quality Management program. AQIS CQIC shall function as the BHS joint MHP and DMC-ODS oversight and multi-disciplinary clinical team that ensures that quality improvement requirements and reporting goals are met.
- III. The AQIS CQIC shall:
 - A. Be a mechanism to monitor appropriate and timely intervention of occurrences that raise quality of care concerns and shall recommend appropriate follow-up action when such an occurrence is identified.
 - B. Review the quality of MHP and DMC-ODS treatment services provided to beneficiaries.
 - C. Recommend policy decisions.

- D. Review and evaluate the results of QI activities, including performance improvement projects.
 - E. Institute needed QI actions.
 - F. Ensure follow-up of QI processes; and
 - G. Document QI Committee meeting minutes regarding decisions and actions taken.
 - H. Meet on a quarterly basis.
- IV. The CQIC includes representatives from:
- A. HCA BHS Director of Authority and Quality Improvement Services (AQIS)
 - B. HCA BHS Director of Adult and Older Adult Behavioral Health (AOABH)
 - C. HCA BHS Director of Children, Youth and Prevention Behavioral Health (CYPBH)
 - D. HCA BHS Medical Director or designee
 - E. Licensed clinical MHP managers and providers from AQIS, CYBH and AOABH
 - F. Licensed clinical DMC-ODS managers and providers from AQIS, CYBH and AOABH
 - G. QI staff from BHS Contracted providers
 - H. Beneficiaries and family members