

Quality Improvement Committee (QIC) Meeting		06/25/2015	
		11:00am-12:00pm	
		Shasta Room, Health Dept.	
Meeting called by: Amie Miller, QI Manager			
Facilitator: Amie Miller, Lucero Robles			
Attendees: Please refer to sign-in sheet for QI Committee Meeting			
Minutes			
Agenda item:	Review audit findings from Department of Health Care Services (DHCS)	Presenter:	Amie Miller, Ben Bunyi
Discussion:	<p>DHCS reviews our County delivery of services. The review includes how the system functions as a whole, but also reviews the quality of the services delivered.</p> <ul style="list-style-type: none"> • Discussion of disallowance/recoupment rate. The rate of disallowance is the same as the previous audit (2011) but the amount of service minutes claimed was three times greater compared to 2011. • Discussed trends of findings. Highlighted the areas of strengths and areas for improvement. <ul style="list-style-type: none"> ○ Areas of strengths include improved overall system ○ Areas of concern include need to clearly document medical necessity; including at time of assessment and throughout the delivery of services. • Discussed plans of correction items <ul style="list-style-type: none"> ○ Quality Improvement will need to submit a plan of corrections and implement changes to address findings outlined in the audit report. • Discussion ensued regarding specific examples and expectations in treatment and documentation 		
Conclusion	QI to implement changes to address audit findings.		
Agenda item:	Review of finding of Behavioral Health Concepts External Quality Review Organization (EQRO)	Presenter:	Amie Miller, Lucero Robles

<p>Discussion:</p>	<ul style="list-style-type: none"> • Explained purpose of EQRO review and differences between DHCS audit. <ul style="list-style-type: none"> ○ EQRO review is done on an annual basis and includes two performance improvement projects (PIP). • Discussed overall approved claims per beneficiary <ul style="list-style-type: none"> ○ Monterey County has increased the number of claimed services in the last 3 years. When compared to other counties of similar size across the state, our County spends more money per beneficiary. • Discussed overall penetration rates (number of people we are serving based on Medi-Cal eligibility). <ul style="list-style-type: none"> ○ Some concerns include access to services ○ Penetration rate decreased in 2013 compared to 2011 & 2012 ○ Need to review this data to target where interventions may be implemented to increase services to the community. ○ Need to review the number and type of services provided • Discussed Hispanic penetration rate. <ul style="list-style-type: none"> ○ Although the issue is a Statewide issues, we need to see improvements in this area ○ We have increased penetration rate among the Hispanic population over the last 3 years by opening clinics in South County regions. The question we continue to look at is to examine if we have adequately staffed these clinics/regions. • Discussed penetration rates for children in foster care system <ul style="list-style-type: none"> ○ Monterey County is the highest and exceeds the average. • Discussed high cost beneficiaries (high cost approximately \$14,000/month/beneficiary) <ul style="list-style-type: none"> ○ Monterey County is over the state averages • Discussed diagnostic categories <ul style="list-style-type: none"> ○ Monterey County reported lower rates of diagnosis of depression, disruptive disorders, and deferred. • Monterey County reported higher rates for diagnosis of psychosis, bipolar disorder, anxiety disorders, and adjustment disorders. <p>Participant shared:</p> <ul style="list-style-type: none"> ○ need for more community education for Latinos about mental health services ○ need to continue to examine models of treatment to outreach Latinos <ul style="list-style-type: none"> ○ examples include providing services where Latinos reside ○ examples include offering services in non-traditional office hours ○ Need to improve cultural competence.
<p>Conclusion</p>	<p>Quality Improvement to respond to EQRO findings and continue to strategize on changes to implement to address findings.</p>
<p>✓ No items tabled</p>	
<p><i>Other Items</i></p>	
<p>Next Meeting:</p>	<p><i>July 23, 2015.</i></p>