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QUALITY ASSURANCE RESOURCES

For the
THE SUCCESSFUL IMPLEMENTATION
of the DMC-ODS
QUALITY ASSURANCE STANDARDS

(This presentation and the DMC-ODS Resource Library replaces Quality Assurance-C training and the QA-C Toolkit which was developed by the author, Stan Taubman, has been revised and edited by Rod Libbey for CIBHS.)

California Institute for
Behavioral Health Solutions
(CIBHS)

Drug Medi-Cal Organized
Delivery System (DMC-ODS)
DMC-ODS Quality Assurance
Resources

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Services (DHCS)

NOTE: Changes or Updates in the Information Presented

Notice: The information in this presentation is current as of 5/25/2020 and will be updated per changes or updates in Federal or State guidelines.

Notice: COVID 19 has modified certain Behavioral Health guidelines, coverage, and regulations applicable to counties, providers and beneficiaries. Please consult the DHCS website for information on the impact of COVID 19 on these services.
<https://www.dhcs.ca.gov>

To access handouts for this presentation,
please type the link below as-is into your web
browser

<https://bit.ly/DMCqac>

LEARNING OBJECTIVES

- QUALITY ASSURANCE STANDARDS- Overview of the DMC-ODS Quality Assurance Standards
- COMPLIANCE- Understand the compliant implementation of the Quality Assurance (QA) Standards
- The OA REVIEW PROCESSES- Clarify how the review processes determine compliant implementation
- EVIDENCE of COMPLIANCE- Clarify what is considered evidence of compliance by reviewing entities
- THE DMC-ODS RESOURCES- Brief overview of the content of each Resource



MEETING DMC-ODS QUALITY ASSURANCE REQUIREMENTS

Meeting and documenting Quality Assurance requirements under the DMC-ODS can be a significant challenge for counties and providers that...

- have not previously been subject to such extensive quality requirements
- have not previously been subject to close monitoring for quality compliance
- have staff with limited training or exposure to the information needed to successfully implement DMC-ODS documentation, evidence-based practices, etc.
- The DMC-ODS Resources are designed to help programs and staff meet the challenge



What we'll cover in this webinar

1. A Review of Drug Medi-Cal's Purpose and Quality Standards,*
 - Why these Standards are critical to Quality care
 - Complying with the Standards
 - Documenting for evidence of compliance
2. How the Resources can assist with compliance and evidence of compliance with the Standards

* 'Quality', as specified in the Special Terms and Conditions (STCs) that each county agrees to when implementing the DMC-ODS.

<https://www.dhcs.ca.gov/provgovpart/Documents/CA-Medi-Cal-2020-STCs-CMS-TC-11-19-19-NoExpWaiver.pdf> See STCs pp. 397-403.



What is the Purpose of the Resources

- The DMC-ODS Resources contain the definitions and requirements of the Quality Assurance Standards as well as the knowledge and skills that administrators and clinical staff will need to meet those requirements
- The Resources are in the following topic areas:
 - DMC-ODS Documentation Requirements:
 - Comprehensive Clinical Assessments and Diagnosis
 - Treatment Planning and Progress Monitoring
 - Evidence Based Practices
 - Case Management and Care Coordination
 - Effective Treatment Planning and Treatment Plans



Overview of the DMC-ODS Waiver (42CFR 438)

- The DMC-ODS Waiver- “Centers for Medicare and Medicaid Services (CMS) offered a new opportunity for Medicaid demonstration projects authorized under section 1115 to test Medicaid coverage of a full SUD treatment service array in the context of overall SUD service delivery system transformation, provided participating states meet specific requirements...”
- State and County Requirements- The California Department of Health Care Services (DHCS) applied for and received approval from CMS to participate according to a set of conditions, the Special Terms and Conditions (STCs), which then became the quality requirements for contracted County programs and their providers.
- Implementation Plans and Contracts for Counties that have ‘opted in’ to the Waiver can be found at <https://www.dhcs.ca.gov/provgovpart/Pages/County-Implementation-Plans-.aspx>

DMC-ODS COMPLIANCE REVIEWS- for QUALITY ASSURANCE

- External Quality Review Organization (EQRO) reviews are conducted annually
- These reviews are required by CMS to insure State and County compliance with the STCs
- The reviews focus on evidence of compliance in the key STC areas of:
 - Timely Access
 - Network Adequacy, Continuum of Care and Utilization Management
 - Internal County and Provider Quality Controls
 - Data Management
 - Treatment Outcomes
- Annual review reports specify areas of needed improvements for full compliance



DMC-ODS COMPLIANCE REVIEWS- for PAYMENT

- DMC pays for services as they are provided
- Medi-Cal payment is based on the assumption that the services provided have met all Quality Assurance requirements
- DMC auditors later review clinical records to determine whether or not those services actually met quality assurance requirements
- Audit disallowances are funds taken back for services that did not meet requirements

Accurate Clinical Documentation is critical in assuring payment



The Quality Standards

- What the DMC-ODS Waiver or 42CFR Part 438 ‘promises’, and what contracted counties agree to:
 - Timely Access to treatment
 - A Continuum of Care- the stages of which are Medically Necessary for the client
 - Utilization Management to improve care and use resources efficiently
 - Provide greater administrative oversight on quality measures
 - Coordinate client care with other systems of care (BH, medical, social services, criminal justice, etc.)
 - Improve outcomes of DMC beneficiaries in SUD treatment



Quality is 'baked in' to County and Provider Programming

- State allows counties to 'opt in' to the DMC-ODS with a proposal that meets the Standard Terms and Conditions (STCs)
- County proposals include an Implementation Plan describing how the STCs will be met
- Proposals also describe the structure and operation of the Quality Assurance Committee (QAC), its membership, frequency of meetings, etc.
- Why is the work of the QAC important to program administration and staff?
 - The QAC reviews how programs (county-operated and providers) are meeting DMC-ODS quality requirements
 - EQRO will review County DMC-ODS annually, seeking evidence that quality measures are in place and utilized



Quality, Compliance and Evidence of Compliance in DMC-ODS

- To ensure that counties and providers are meeting standards to improve the *quality* of client management and treatment, *compliance* with certain areas of providing treatment under the DMC-ODS is required, as is *evidence* of compliance
- Example
 - Placement in a Level of Care (LOC) is determined by a specific ASAM assessment and a DSM-5 diagnosis. **QUALITY!**
 - client placement in a level of care was guided by the assessment. **COMPLIANCE!**
 - Placement is documented, approved, signed by the Medical Director or LPHA. **EVIDENCE!**

THREE NEW AND IMPORTANT REQUIREMENTS in the DMC-ODS

The following 3 slides note important compliance requirements:

- Medical Necessity
- Appropriate staff for specific functions
- Acceptable assessment and diagnostic tools



QUALITY STANDARDS- Note on Medical Necessity

Medical Necessity or *Medically Necessary* are new concepts to SUD treatment

- The American Society of Addiction Medicine (ASAM) assessment and Diagnostic and Statistical Manual (DSM-V) diagnosis determine that the client's placement in a LOC and the intervention(s) selected for treatment are medically necessary to address and improve the client's functional impairment(s).
- Medical Necessity is a clear move away from program driven treatment where both the treatment plan and the timelines are pre-established for most if not all clients.



QUALITY STANDARDS- NOTE on SCOPE of PRACTICE and SCOPE of COMPETENCE

The requirement that only practitioners with certain levels of licensure or certification perform specific functions in assessing and treating Substance Use Disorder (SUD) clients is a new and very important requirement for DMC compliance. For example:

- A Licensed Practitioner of the Healing Arts (LPHA) after a discussion with the client's Counselor must establish that the client has a SUD diagnosis and must also validate the diagnosis
- Both scope of practice and scope of competence of any practitioner involved in client treatment should be considered in assigning staff to certain functions.
- Scope of Practice = Practices that are permitted for a particular profession by the California Business and Professions Code.
- Scope of Competence = Practices that an individual member of a profession has been adequately trained to engage in.



QUALITY STANDARDS- NOTE on SUD ASSESSMENTS and DIAGNOSES

- At Intake, use the ASAM Multidimensional Assessment and Placement Criteria including the 6 dimensions with risk ratings and appropriate level of care [LOC] determination
- A review the Admission Assessments and other intake information helps determine DIAGNOSIS and establish MEDICAL NECESSITY
- DSM-V, issued in 2013 has become the community standard of practice for diagnosis.

The DMC-ODS RESOURCES

- The following slides briefly describe each Resource. Again, the Resources provide information that will assist counties and providers with the successful and compliant implementation of the Quality Standards. For example, the Resource on Evidence-Based Practices describes each EBP that is acceptable under the STCs, and suggests implementation plans that will meet compliance standards.
- The Resources provide information on each topic but are not designed as training documents. However, CIBHS sponsors face-to-face training and webinars on many of the Resource topics. See: <https://www.cibhs.org/dmc-ods-curriculum>

RESOURCE- CLINICAL DOCUMENTATION AND ACCOUNTABILITY

In DMC-ODS programs, clinical documentation is used to establish...

- Medical necessity as a basis for reimbursement
- The appropriate LOC and other services for an individual client
- That the criteria are met for a client's diagnosis
- The assessment findings that are the basis for a client's treatment plan
- The extent to which treatment goals and objectives are being met
- The extent to which interventions constitute Evidence-Based Practices
- Whether or not continuing services are needed

RESOURCE- CLINICAL DOCUMENTATION cont'

- Documentation requirements apply to...
 - Clinical assessments
 - Diagnosis
 - Treatment plans
 - Interventions
 - Progress notes
 - Discharge Plan
- These requirements are met only when there is coherence or 'integrity' among these five elements of service delivery.

RESOURCE- CLINICAL DOCUMENTATION: WHAT IS 'INTEGRITY'

- The treatment plan goals and objectives are relevant to- or proceed from- the information on the client described in the assessment and diagnosis documentation. Treatment plan goals and objectives may also be influenced by counselor and client input.
- Interventions and progress monitoring address the goals and objectives of the treatment plan.
- Progress notes reflect client progress in relation to treatment plan goals
- **INTEGRITY:** Progress notes tie back to the interventions and progress monitoring which tie back to the treatment plan which ties back to the assessment.



RESOURCE: EVIDENCE-BASED PRACTICES

Overview: Resource on Evidence-Based Practices includes...

- Articulating use of the five required Evidence-Based Practices
- STC (Special Terms and Conditions) Requirements Regarding Evidence Based Practices
- Summaries of key concepts and practice principles of the five mandated Evidence Based Practices
 - Motivational Interviewing
 - Cognitive Behavioral Therapy
 - Relapse Prevention
 - Trauma Informed Treatment
 - Psychoeducation

RESOURCE: CASE MANAGEMENT and CARE COORDINATION

- Overview of Case Management and Care Coordination as a service
- Clarifies the practice of Case Management vs. Care Coordination
- Discusses the value of each in client treatment and client management
- Who should practice each, county or provider?
- Where will reviewers look for evidence of the active practice of each?

RESOURCE: TREATMENT PLANNING AND TREATMENT PLANS

- Treatment Planning as a Therapeutic Process
- Treatment Plan Objectives with a Sense of Direction
- Treatment Planning as a Basis for Objective Progress Evaluation

QUESTIONS

Please contact:

Yvonne Frazier, DMC-ODS Project Manager

yfrazier@cibhs.org