

Monterey County Behavioral Health Policy and Procedure

Policy Number	454
Policy Title	Reporting of Quality Improvement Time
References	 DMH Information Notice 10-5
Effective	January 1, 2000 Revised April 12, 2006 Revised February 1, 2011

1 Policy:

2 It is the policy of Monterey County Health Department Behavioral Health Division to accurately 3 document all quality improvement and utilization activities under Quality Management service 4 code, 802- Quality Improvement, in the appointment scheduler option of the electronic medical 5 record. When coding time as Quality Improvement staff must enter a note in the notes section of 6 the appointment scheduler option to indicate the detail of the Quality Improvement activity. 7 Although many meetings are eligible to be coded as Quality Improvement time, each meeting must 8 be evaluated independently to meet one of the criteria listed below. 9 10 11 The activities considered appropriate to code as Quality Improvement time are listed below: 12 13 1. Utilization review and training activities related to monitoring of mental health plan program integrity standards, including services provided by subcontractors; 14 15 2. Utilization review and training activities required as part of clinical performance improvement projects 16 3. Quality Improvement (QI) Committee meetings, preparation time, documentation of 17 minutes, and follow-up of clinical QI issues; 18 19 4. Clerical time spent supporting utilization review chart selection, gathering of chart and billing documentation, and follow-up of clinical QA issues; 20 21 QA activities required for development, implementation, evaluation, and revision of clinical 22 practice guidelines; 6. Utilization review activities required for Therapeutic Behavioral Services (TBS), assistance 23 with state audits, and federal audits of TBS; 24 25 7. Personnel time and materials for assisting state and federal auditors with county audits for compliance with External Quality Review standards, and other related Medi-Cal specialty 26 27 mental health services standards; 28 8. Utilization review activities required as part of medication monitoring; 9. Training of SPMP (Skilled Professional Medical Provider) and staff who are directly 29 supporting SPMP for utilization review and QA activities 30 31 10. Personnel time required for the operation of management information systems that are necessary for completion of utilization review activities 32

- 11. Plan development activities if not billed as case management or other specialty mental
- 34 health service