

## Memo

Date: July 31, 2024

To: Alameda County Behavioral Health Department (ACBHD) Specialty Mental Health

Services (SMHS) Providers

From: Torfeh Rejali, Division Director, Quality Assurance Torfeh Rejali,

Subject: SMHS System of Care Audit Results- Quarter 2 - FY 2022- 2023

# **Purpose**

This memo is to advise you of the publication of the Quarter 2- FY 2022-2023 SMHS System of Care audit that was completed by the ACBHD Quality Assurance (QA) division.

#### **Background**

ACBHD QA completed an audit of the SMHS System of Care for the period of September 1, 2022, to November 30, 2022. The System of Care audit report is an aggregate analysis of the findings and compliance rates with Medi-Cal claiming requirements and documentation standards. The report can be found in the Internal Audit section of the QA Audits page on the ACBHD provider website.

### **Overview of General Findings**

A total of 10 charts and 185 claims were reviewed for 10 providers. Of the 185 claims reviewed, 8 were disallowed, representing a claims compliance rate of 96%. The overall compliance rate for all categories reviewed was 81%.

## **Summary**

For areas that were found to be non-compliant, the following common issues were identified:

- Missing or incomplete medical history section, such as primary care provider information or past medication details
- Missing co-occurring substance use disorder diagnosis or adequate follow-up of co-occurring issues
- Late entry of Progress Notes, beyond 3 business days for routine and 24 hours for crisis notes
- Problem Lists not consistently updated to reflect the beneficiary's current condition
- Progress Notes not adequately explaining gaps in continuous service



- Insufficient documentation of safety risks, including the use of safety plans, or timely completion of risk assessments
- Missing appropriate telehealth consent form/notes
- Incomplete Release of Information forms
- Procedure codes not matching the service described, with no recoupments since no overbilling occurred
- Rationale for extended brokerage/targeted case management services not clearly documented

Individual provider Corrective Action and Quality Improvement Plans addressing the above issues were reviewed by QA. Examples of plans included training and re-training of team members, improving clinical note templates in Electronic Health Records to better capture the required information, and use of the CQRT tool by providers to track compliance.

ACBHD QA will continue to monitor and reinforce these issues in monthly Brown Bag and other meetings.

## **Next Steps**

Please make note of the common issues identified above and reach out to ACBHD QA if you have any questions regarding the requirements related to these areas. Additionally, we invite you to attend the monthly Brown Bag meeting where these and other issues are clarified. Brown Bag meeting invitations can be found on the QA Training webpage on the Provider website.

For questions, please contact QATA@acgov.org.