



C A L I F O R N I A D E P A R T M E N T O F

Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-2309

October 6, 2008

DMH INFORMATION NOTICE NO.: 08-29

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: STATEWIDE EARLY AND PERIODIC SCREENING, DIAGNOSIS,
AND TREATMENT (EPSDT) PERFORMANCE IMPROVEMENT
PROJECT (PIP) FISCAL YEAR (FY) 2008-09

REFERENCE: EARLY AND PERIODIC SCREENING, DIAGNOSIS AND
TREATMENT (Title 9, California Code of Regulations (CCR)),
Section 1810.215

Effective July 1, 2008, Mental Health Plans (MHP) are required to implement activities of a Statewide Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Performance Improvement Project (PIP). The goal of this Statewide PIP is to explore and address opportunities to improve the coordination, quality, effectiveness, and/or efficiency of service delivery to children who are receiving EPSDT services. This Statewide PIP was developed in consultation with the California Mental Health Directors Association (CMHDA), the County Welfare Directors Association (CWDA), the California Council of Community Mental Health Agencies (CCCMHA), the California Alliance of Child and Family Services (CACFS) and Consumer Family Member participation.

The Statewide PIP may replace one of two required PIPs that the MHPs are currently performing pursuant to Title 42, Code of Federal Regulation (CFR), Section 438.242. This Statewide PIP can be either Clinical or Administrative at the discretion of the MHP. Please see Attachment A for the statewide study question.

In October 2008, DMH will provide each MHP with an initial list of clients who meet the criteria for inclusion in the initial PIP process. This data is intended to assist the MHP to establish a local study question and study group. MHPs should review the list, identify those clients who are no longer receiving services and remove those clients' names from the data set.

MHPs are required to establish a process for ongoing identification of clients who meet the criteria for evaluation to participate in the PIP. The MHP must have data-driven criteria/rationale for inclusion and/or exclusion of new clients in the study group. The criteria for client evaluation to participate in the PIP are:

Criteria A: Any EPSDT client who receives \$3,000 (or more) of EPSDT services in a month.

Criteria B: For MHPs where Criteria A does not result in a meaningful study population, the MHP will evaluate clients for inclusion if the client exceeds a monthly dollar threshold based upon the MHP's top 5% annual dollar value from FY 2007-08.

For example:

- 1) An MHP where the top 5% dollar value starts at \$24,000 annually will have a monthly average threshold population which starts at \$2,000 of EPSDT services in a month (or more). This MHP would look at clients at or above \$2,000 in services as the monthly threshold for evaluation.
- 2) An MHP where the top 5% dollar value starts at \$18,000 annually will have a monthly average threshold population which starts at \$1,500 of EPSDT services in a month (or more). This MHP would look at clients at or above \$1,500 in services as the monthly threshold for evaluation.

The data provided by DMH in October 2008 will indicate if the MHP fell into Criteria A or Criteria B for FY 2007-08.

Attachment A is the modified "Roadmap to a PIP" template. The template includes the Statewide problem statement, data statement, and study question. Each MHP is expected to design an individual problem statement, data statement, and study question in collaboration with local stakeholders including, but not limited to, representatives from county operated and contract providers. The MHP study question must be related to the statewide study question and the MHP's data.

Available online is the Department of Mental Health Aid Codes Master Chart, <http://www.dmh.ca.gov/MedCCC/Library.asp>, to assist MHPs in identifying the EPSDT population to be included in the development of the local PIP study question.

MHPs are required to use the following guidelines and parameters in their implementation of the EPSDT PIP. In all cases:

- Conduct a review of services provided to the study group clients to explore trends in the pattern of service delivery prior to the client meeting the threshold for inclusion in the PIP, and the impact on the pattern of service delivery upon the client's inclusion in the PIP.
- Examine inpatient psychiatric services utilization factors relevant to the study group population.

MHPs, in collaboration with their providers, are responsible for the identification and collection of relevant data such as clinical data derived from chart reviews, billing/reporting data, treatment service factors, etc., and continuing data exchange and reporting to DMH to inform, measure and continuously improve services to children and their families.

In order for DMH to track study group participants, MHPs must report all study group participants through an on-line form. To ensure that this information is adequately protected, it is submitted through a secure server. The form can be accessed at the following URL: <https://poqi1.dmh.ca.gov:8443/lfserver/PIPEnroll>.

The information required for reporting includes the County Code of Record (the two-digit county code for the county initiating the services), the client's Social Security Number (SSN), the County Client Number (CCN), the client's first and last name, gender and date of birth (DOB). The date of the client's inclusion in the study group and, as necessary, the date the client is discontinued from participation in the study group.

MHPs may determine when to routinely update the report to DMH; however, all current information must be submitted to DMH initially by December 31, 2008, and again by June 30, 2009. This information will be used by DMH to track the individuals participating in the study group. MHPs should also ensure that accurate and complete information is submitted to other systems such as the Client Service Information system and Short-Doyle Medi-Cal approved claims.

DMH's contracted External Quality Review Organization (EQRO) will conduct an External Quality Review of each MHP annually as required by Title 42, Code of Federal Regulations (CFR), Part 438, Subpart E. MHPs that were reviewed prior to full implementation of the Statewide PIP will be contacted by the EQRO, and documentation/information from that contact will be included in the EQRO Annual Statewide Report published by August 31 of each FY. Starting FY 2008-09, EQRO individual MHP reports will be posted on the EQRO website.

EPSDT will continue to be the focus of a Statewide PIP at least through FY 2010-11. The outcomes of this FY 2008-09 Statewide PIP will be the subject of a report to the Legislature

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in October 2009. DMH will continue to meet with partners and stakeholders to determine the new problem statement, data description, study question, and criteria for the study group for FYs 2009-10 and 2010-11.

MHPs shall be in compliance with Welfare and Institutions Code 4096, the provisions of Title 9, Chapter 11, California Code of Regulations and the contract between DMH and MHP.

Technical assistance opportunities will be available and information will continue to be posted on the DMH EPSDT PIP website at http://www.dmh.ca.gov/Services_and_Programs/Medi_Cal/EPSDT_Statewide_PIP.asp. If you have questions regarding this notice, please contact your County Contract Manager listed on the following internet site: <http://www.dmh.ca.gov/docs/CoOpRoster.pdf>.

Sincerely,

Original signed by

STEPHEN W. MAYBERG, Ph.D.

Director

Enclosure