Quality Assurance and Utilization Review Activities

- Determination of whether Drug Medi-Cal Organized Delivery System (DMC ODS) services are or were reasonable and medically necessary for the diagnosis or treatment of illness

- Determination of whether the quality of DMC ODS services meets professionally recognized standards of health care

- Utilization review and training activities related to monitoring of DMC ODS program integrity standards, including services provided by county-contracted service providers

- Utilization review and training activities required as part of clinical performance improvement projects

- Quality Improvement Committee meetings, preparation time, documentation of minutes, and follow-up of clinical quality improvement issues

- Clerical time spent supporting utilization review chart selection, gathering of chart and billing documentation, and follow-up of clinical Quality Assurance (QA) issues

- QA activities required for development, implementation, evaluation, and revision of clinical practice guidelines

- Personnel time and materials for assisting state and federal auditors with county audits for fiscal and compliance with External Quality Review standards, and other related DMC ODS service standards

- Utilization review activities required as part of medication monitoring

- Training of skilled professional medical personnel (SPMP) and staff who are directly supporting SPMP for utilization review and QA activities

- Personnel time required for the operation of management information systems that are necessary for completion of utilization review activities

- County QA/UR plan development activities if not billed as case management or other DMC ODS service