June 23, 2003

MMCD Policy Letter No. 03-02

TO: County Organized Health Systems (COHS)
Geographic Managed Care (GMC) Plans
Prepaid Health Plans (PHP)
Primary Care Case Management (PCCM) Plans
Two-Plan Model Plans

FROM: Luis R. Rico, Acting Chief
Medi-Cal Managed Care Division

SUBJECT: CERTIFICATION OF MANAGED CARE PLAN STAFF RESPONSIBLE FOR THE CONDUCT OF PRIMARY CARE PROVIDER SITE REVIEWS

PURPOSE

The purpose of this policy letter is to guide and specify the requirements and process for health plan certification of Master Trainers, other trainers and site reviewers responsible for conducting site reviews of contracted primary care provider (PCP) sites. Specifically, this policy letter addresses the method by which physicians and registered nurses (RNs) become certified as trainers and site reviewers.

GOAL/BACKGROUND

Plans contracting with DHS are required to have an internal quality improvement (QI) program. The site review process is that part of a plan’s QI program that focuses on the capacity of the PCP site to support the safe and effective provision of clinical services (Title 22, CCR, Section 56230). Historically, compliance with the site review requirements have resulted in overlapping and duplicative reviews of PCP sites by plans and other agencies or entities, often with little or no communication between the reviewing parties.
Contracted managed care plans have used the Medi-Cal Managed Care Division's (MMCD) Site Review Policy Letter 96-06 to conduct site reviews of PCP sites until May 2002 when MMCD Site Review Policy Letter 02-02 was released. The new policy provides a standardized site review process and requires plans to share site review information on PCPs who contract with one or more plans in a common geographic area or county. Sharing of PCP site review information will eliminate multiple office visits by plan staff to shared PCP sites. This certification process has been implemented to ensure that all persons conducting the site reviews consistently interpret and apply the site review policy and tools.

Policy

I. General Requirements

All plans are required by regulation (Title 22, CCR, Section 562300) and contract to conduct reviews of all PCP sites to ensure that the sites have the capacity to support the safe and effective provision of primary care clinical services to plan members. To comply with this requirement, MMCD Policy Letter 02-02 states that “plans shall identify designated physician and/or registered nurse (RN) personnel to become certified trainers responsible for training and supervising reviewers, certifying RN and physician reviewers, monitoring reviews and evaluating reviewers for inter-rater reliability.” Plans shall also ensure that the reviewer responsible for each survey shall be, at minimum, a certified RN.

The Plan Medical Director shall be ultimately responsible for the overall Facility Site Review Program (FSR), but may designate operational responsibility for ensuring:

- That all trainers and site reviewers conducting PCP site reviews are appropriately trained and certified.
- Monitoring of initial and ongoing site review training and certification of site review personnel.

II. Levels of Certified Personnel Who May Conduct Site Reviews

Master Trainer

All plans shall identify one, but may have two staff persons, who will be certified by MMCD as the plan's Master Trainer. Master Trainers shall have the overall responsibility for training and certification of other plan trainers and site reviewers. The plan will be responsible for notifying DHS when a Master Trainer resigns.
Other Trainers

Plans shall identify other trainers as necessary to assist the Master Trainer in providing training and supervision of staff responsible for conducting site reviews. The Master Trainer shall certify these trainers.

Site Reviewers

Plans shall identify RNs who will be responsible for each site review and who shall sign the site review and/or the medical record survey as required in MMCD Policy Letter 02-02. Plans shall ensure the RN site reviewer is certified by a master or other designated plan trainer.

III. Initial Certification

Physicians and RNs shall meet the following criteria to be certified as a Master Trainer, trainer or site reviewer.

<table>
<thead>
<tr>
<th>Initial Certification Criteria</th>
<th>Master Trainer</th>
<th>Trainer</th>
<th>Site Reviewer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Possess current California RN or MD license</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Have experience in conducting training (small groups or individuals) of groups in a health related field within the past five years; or experience conducting Quality Improvement activities such as medical audits, site reviews or utilization management activities</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Attend site review training sponsored by DHS or completion of the DHS site review training curriculum.</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Completion of a minimum of three site reviews according to the 02-02 Site Review Policy and Tools</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Completion of a minimum of five site reviews according to the 02-02 Site Review Policy and Tools</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Completion of the inter-rater site review process which involves an onsite review with a:</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>• DHS MMCD Medical Monitoring RN;</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Certified Master Trainer;</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>• Certified trainer; and</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>• Achieving an inter-rater score defined by DHS</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Completion and submission of the “Application Request for Certification” to MMCD (Enclosure A) (Plans have the option to use the application or develop other forms for trainers and reviewers).</td>
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<td>X</td>
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</table>
IV. Re-certification

Re-certification will occur every two years. Physicians and RNs designated as trainers and site reviewers will be required to meet the following criteria to be re-certified.

<table>
<thead>
<tr>
<th>Re-Certification Criteria</th>
<th>Master Trainer</th>
<th>Trainer</th>
<th>Site Reviewer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verification of current California RN or MD license</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Verification of trainers’ continued responsibility for training on the MMCD Site Review Policy and Tools and completion of a minimum of five site reviews since initial certification or re-certification</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Completion of a minimum of ten site reviews since initial certification or re-certification</td>
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<td></td>
<td>X</td>
</tr>
<tr>
<td>Participate in plan-sponsored site review training sessions</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Participate in MMCD-sponsored site review teleconferences or meetings as defined by the MMCD Site Review Workgroup</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>Participate in MMCD-sponsored site review training every two years starting July 2005</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Completion of the inter-rater site review process and achieve an inter-rater score defined by DHS</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

V. Inter-rater Review Process

As part of the certification/re-certification process, trainers and site reviewers must complete the inter-rater review process. This process requires the trainer or site reviewer to participate in a site review with a designated rater such as the plan Master Trainer or another certified trainer. Both individuals will concurrently complete and score selected elements of the site review tool. The trainer or site reviewer must achieve an inter-rater score as defined by DHS and the site review workgroup.

VI. Passing/Non passing of Inter-rater Review Process

Physicians and RNs meeting all of the certification criteria, including achieving an inter-rater score as defined by DHS, will be certified. All individuals who are certified will receive a certificate (Enclosure B) issued by DHS MMCD or the plan. Plans shall follow the instructions for certificate completion (Enclosure C). Physicians and RNs who are certified will be authorized to sign site review surveys with the designation of a Department of Health Services Certified Trainer (DHSCT) or a Department of Health Services Certified Site Reviewer (DHSCSR).
If the trainer or site reviewer does not achieve the inter-rater score defined by DHS, they may repeat the inter-rater review process. The designated rater and the individual with a non-passing inter-rater score will jointly assess training needs, and develop and implement a training plan prior to conducting a second inter-rater review. Generally, trainers and site reviewers should be allowed at least two opportunities to become certified. Plans have the discretion to determine the point at which an individual is no longer eligible to repeat the inter-rater review process.

VII. Delegation of Certification To Plan-Designated Entities

Plans may elect to delegate the certification of other trainers and site reviewers to plan-designated entities. However, plans may not delegate the certification of the Master Trainer. If the plan delegates certification of trainers and site reviewers, per MMCD Policy Letter 02-02, the plan is responsible for:

- establishing a formal, mutually agreed upon document with the delegated entity which identifies specific delegated functions;
- overseeing and monitoring delegated activities; and
- ensuring that delegated functions are properly carried out.

All delegated entities must be approved by DHS and shall follow the most current MMCD site review policy requirements. Site review personnel from delegated entities shall be trained, certified and supervised according to the policy standards established for contracting plans.

VIII. Documentation of Process of Certification of Trainers and Site Reviewers

Plans shall develop policies and procedures outlining the certification process of trainers and site reviewers. Plans shall ensure that these policies and procedures incorporate a system for ongoing supervision and monitoring of certified site review personnel to ensure continued inter-rater reliability. Plans shall maintain certification records including, but not limited to, site review training activities and documentation to support the issuance of certificates. Policies and procedures shall be initially reviewed and approved by DHS' MMCD, Medical Monitoring Unit, and submitted as per MMCD All Plan Letter 02006.

IX. Timelines for Certification

Effective July 31, 2003, MMCD will only accept site review surveys signed by a certified trainer or site reviewer. All reviewers employed by the plan must be certified by July 31, 2003 (Enclosure D). After this date, plans must ensure that physicians and RN's who are designated as trainers and site reviewers receive site review training and timely certification on an ongoing basis.
DHS Responsibility

MMCD shall evaluate the certification process and provide technical assistance and consultation to plans. MMCD shall certify Master Trainers identified by plans, and issue certificates to Master Trainers upon completion of the inter-rater review process and achievement of an inter-rater score as defined by DHS. MMCD will convene a workgroup consisting of all plans to coordinate, collaborate and assess the certification process.

If you have any questions regarding this policy, please contact your contract manager.

Enclosures:
- Application for Request for Certification for Master Trainer
- Sample Certificate
- Instructions for Assigning Certificate Numbers
- MMCD All Plan Letter 02006-Implementation of Medi-Cal Managed Care Policy Letter 02-02
## Application for Master Trainer Site Review Certification

<table>
<thead>
<tr>
<th>Request for:</th>
<th>Initial Certification</th>
<th>Recertification</th>
<th>Applicants Name (Last)</th>
<th>(First)</th>
<th>(M.I.)</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Physician</th>
<th>Registered Nurse</th>
<th>License #</th>
<th>Expiration Date</th>
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</thead>
</table>

### Training

Please specify type of training

<table>
<thead>
<tr>
<th>Training Site Survey Dates Completed</th>
<th>Date</th>
<th>Given By</th>
<th>Summary of Course Content</th>
</tr>
</thead>
</table>

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### QI Experience or Training in the last 5 Years

*Additional pages available for requested information*

<table>
<thead>
<tr>
<th>Date</th>
<th>Employer</th>
<th>Primary Responsibilities</th>
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</table>

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7/30/02
For DHS Use Only

Inter-Rater Site Review Scheduled for:

Date:

Provider Office:
☐ Family Practice  ☐ Pediatrics  ☐ General Practice  ☐ Internal Medicine  ☐ OB/GYN  ☐ Specialist

Name
Address
City
State
Zip

Telephone Number

Findings:

Inter-Rater Score:

Recommendation:
☐ Approve Certification:
☐ Deny Certification:

If certification denied, please provide comments/actions required:

Date Issued: 
Certification #: 
Recertification Date: 

Completed by:

Date

MMCD Medical Monitoring Unit
### Training
Please specify type of training

<table>
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</table>
State of California
Department of Health Services
Medi-Cal Managed Care Division
Site Review Certification

Josephine Wong, RN
LA Care

has satisfactorily passed the Inter-Rater Site Review process and is certified as a Site Review Master Trainer:

Dori's Signature

Dori Childress, Chief
Medical Monitoring Unit
Medi-Cal Managed Care Division

Certificate # 123020201A
Date Issued: 12/02/02
Expiration Date: 12/02/04
Enclosure C

Instructions for Assigning Certificate Numbers

Each physician and registered nurse that achieves the designation of Certified Trainer or Certified Site Reviewer shall receive a certificate upon successfully completing the initial and subsequent certification. DHS MMCD shall issue certificates to master trainers. Plans shall issue certificates to all other trainers and site reviewers. The certificate will, at a minimum, contain a series of numeric and alpha values to identify the plan, county, month and year certification was granted, and identification code and level of designation for master trainer, trainer or site reviewer.

A certificate number may resemble the following:

000-04-0702-01-A

000 = Plan Identification Code
04  = Plan County Code
0702 = Month and Year Certificate Issued
01  = Plan specific trainer or site reviewer ID number
A   = Master or other Trainer
B   = Site Reviewer
September 25, 2002

MMCD All Plan Letter 02006

TO: [X] County Organized Health System Plan (COHS)  
    [X] Geographic Managed Care (GMC) Plans  
    [X] Prepaid Health Plans (PHP)  
    [X] Primary Care Case Management (PCCM) Plans  
    [X] Two-Plan Model Plans

FROM: Cheri Rice, Chief Medi-Cal Managed Care Division

SUBJECT: IMPLEMENTATION OF MEDI-CAL MANAGED CARE DIVISION (MMCD) POLICY LETTER 02-02

The purpose of this letter is to clarify the process for implementing the MMCD Site Review Policy Letter 02-02, which was issued on May 16, 2002 and supercedes MMCD Policy Letter 96-06.

Effective immediately, plans must implement the policy and tools for site reviews. The new policy and tools should be used as provider sites are due for a site review according to their currently established schedules, unless there is a need for the master trainer, or trainers, to have sites available to meet the required number of sites for certification.

As of July 31, 2003, all reviewers will need to be certified and all systems for the site review process will need to be in place, including plan/county collaboration. No sites will be accepted after this date if not performed by a certified site reviewer. In addition, all plans will need to have their policies and procedures related to the site review process reviewed and approved by July 31, 2003.

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714 P Street, Room 650, Sacramento, CA 95814
(916) 654-8076
Internet Address: www.dhs.ca.gov
The Medi-Cal Managed Care Division recognizes there is a learning curve for plans and providers to fully understand and implement elements of the new site review tool, as well as the need to continually fine tune the tool during its use. As a result plans have the option to count the scores of 94 percent or above and submit the provider site data to MMCD. Those provider sites would be placed into a three-year cycle. Scores do not have to be submitted for those provider sites that do not receive 94 percent or higher during the transitional period ending January 1, 2004.

Operational issues that need to be considered include:

- MMCD may ask for provider site scores during the transition period solely for the purpose of reviewer inter-rater reliability validation.
- The initial provider site review will serve as the three-year renewal date.
- Plans will need to prioritize the critical elements within a provider site that are do not comply and have the provider site correct them in a timely manner.
- A provider site has to be in compliance with MMCD provider site review standards by January of 2004 if their review is scheduled within that time frame.
- If a provider site is due to be reviewed after the transitional time frame, consideration can be made on a case-by-case basis for those providers not receiving optimal scores.

It remains the plan's responsibility to ensure that provider sites are safe, clean, maintained, and provide the necessary services to the members of the respective plans. Plans may use the provider site review tool as part of the criteria for the removal of a provider from their network.