

Questions and Answers regarding the Statewide EPSDT PIP
(Updated 12/08/2008)

1. How often will MHP need to routinely update the report to DMH, other than the 2 required timeslots of 12/31/08 and 6/30/08?

For Fiscal Year 2008-09, MHPs are only required to submit data by two dates; one by 12/31/08 and the other by 06/30/09. Additional reporting is optional, but encouraged. (11/21/2008)

2. Can MHPs expect an out of cycle, i.e., another CAEQRO review, if that has already been conducted for this year? Would this be on-site or conference calls?

No. APS will work with DMH to design a review process to capture information about the statewide PIP. The review process will not be onsite. (11/21/2008)

3. Is there a way to find out the names of the other counties that were assigned to the same Criteria group as Lake County? In other words, is there a way to find out the other counties that were assigned to Criteria B?

Yes, the EPSDT PIP Baseline Eligibility Process is posted on the EPSDT Website:
http://www.dmh.ca.gov/Services_and_Programs/Medi_Cal/EPSDT_Statewide_PIP.asp (11/21/2008)

4. The explanation for Criteria B is a little bit confusing. Can we get some clarification on the instructions for that criterion?

The EPSDT PIP Instructions for MHPs provides clarification and is posted on the EPSDT website:
http://www.dmh.ca.gov/Services_and_Programs/Medi_Cal/EPSDT_Statewide_PIP.asp

Please submit additional questions about what specifically is causing confusion. (11/21/2008)

5. Could you please send me information on what the proposed EPSDT PIP is exactly?

Please refer to DMH Information Notice 08-29, Statewide Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Performance Improvement Project (PIP) Fiscal Year (FY) 2008-09. The attachment, "The Roadmap to a PIP" includes the problem statement, data statement and study question and is intended to help guide the development of the MHP specific study question. (11/21/2008)

6. In our list of FY 07/08 EPSDT clients that meet Criteria B for inclusion in the study group, there are 6 clients with incorrect County Client Number (CCN) identifiers; will APS Healthcare correct this information and provide it to our county via ITWS?

The data is based on DMH paid claims data that is based on what MHPs submit. There is no plan to make changes to the information. (11/21/2008)

7. We need clarification of the "Start Date" data element – is the start date intended to reflect: The date of the actual first service; or the date of the first open episode; *i.e.*, the original opening date or the date that the client begins participating in the local PIP study group?

The Start Date is the date that the client begins participating in the local PIP study group. (11/21/2008)

8. Can APS Healthcare provide a breakdown of services by category and state provider # for each client in each month in which the client received these services? Examples of categories: MHS, CMB, MS, CI, TBS, etc.?

No. That information is available at the county level. (11/21/2008)

9. Must closed clients be removed from the eligible study group as directed in DMH Information Notice 08-29, or can they be retained in the study group for the purposes of analyzing their history?

This would depend on the MHP process and established criteria/rationale the MHP established for their PIP. (11/21/2008)

10. What data would the MHP report to the State if data was submitted more frequently than the two required reporting dates of December 31, 2008 and June 30, 2009?

The data would be the same as what is required on December 31, 2008 and June 30, 2009. (11/21/2008)

11. How should study group clients be handled if they become ineligible for Medi-Cal (even for one or more months and become eligible again)?

Each MHP will establish their own process with data driven criteria/rationale for inclusion/exclusion in the study group. (11/21/2008)

12. Since DMH/APS supplied the original Excel data, it does seem we should be able to simply identify which records to include?

No, the provided information is to assist with a starting point; each MHP needs to look further into their databases, client files and related information. (11/21/2008)

13. When I log into ITWS I see Performance Outcome files but not the EPSDT file. Who would I talk to about this?

Look under the Short/Doyle Medi-Cal EOB section, under that the Functions - Transfer Files Upload/Download. There should be an EPSDT zip file there. Please ensure you are properly registered through ITWS. The ITWS hotline is (916) 654-3117. (11/21/2008)

14. My understanding is that a client is included in the cohort if they have a service utilization of >\$3K in *any* month during the FY?

A client is included in the cohort using this criterion if the MHP falls in Criterion A category. For MHPs falling in the Criterion B category, the 5% cut-off dollar value will be used for inclusion in the cohort. How this would be utilized will depend on the individual's MHP's criteria/rational for inclusion in the study. (Updated 12/03/2008)

15. Regarding the billed services for each client by month in the client list, were inpatient charges included in the billed service amount?

No. (11/21/2008)

16. You are not including inpatient - how about Crisis Residential or Crisis Stabilization?

Yes. (11/21/2008)

17. Any trends already identified about the Criteria B MHPs?

MHPs should identify trends in their individual data. (11/21/2008)

18. Based on monthly projection on Day Treatment cost, we show a cost of \$4048. Will this mean that this population will always meet the target and therefore be subject for the study?

The referenced population meets the criteria for inclusion in the initial PIP process. MHPs will determine the continuing study group criteria. (11/21/2008)

19. Just to clarify - do we have to include *all* the clients identified in the cohort, or can we identify a cohort based on some criteria of our own interest (e.g., particular service utilization patterns)?

Your study group and resulting study question should be based on issues the MHP identifies based on the data/information provided and the MHP's own data/information. (11/21/2008)

20. What are the data elements that flag a service as EPSDT, i.e. do you have a summary of the specific data elements used to create the example reports from the various counties?

Answer: (John will provide an answer)

21. DMH Information Notice 08-29 further states “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.” Does this requirement preclude a static study group that is established at the beginning of the PIP, to which EPSDT clients are neither added nor removed?

The study group may be fluid depending on the rationale used that supports the inclusion of new clients or removal of clients that met criteria from the beginning of the PIP. (12/05/2008)

22. Trailer Bill language repeatedly refers to children but EPSDT beneficiaries could be up to 21 year adults. Are 18-21 year olds included?

Yes

23. Will we be able to upload participant data through XML rather than individual participant data entry?

A data import project is currently in the works.

24. Couldn't we possibly upload a database that has all the required information in it, as opposed to completing a separate form for each participant?

A data import project is currently in the works.

25. Why can't we submit participant lists through an upload in a database, rather than submitting a form for each participant?

A data import project is currently in the works.

26. Also regarding the billed services for each client by month in the client list, where the monthly charges based on the month the service was provided or on the month the bill was paid or received?

Monthly charges are based on the month the service was provided. (12/03/2008)