

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