Medicaid Administration and Utilization Review/Quality Assurance Claiming Guide

Allowable Administrative Activities
Applicable to MHPs, DMC, and DMC-ODS Counties

1. **General Administration and Management**
    a. Health Care Service agency administration
    b. Local Mental Health Directors' administrative time (when not providing direct services)
    c. Accounting and budgeting
    d. Auditing
    e. Data processing
    f. Employee retirement system administration
    g. Legal services
    h. Motor pool administration
    i. Personnel administration
    j. Procurement
    k. Maintenance and operation of central or home office
    (MH LTR 05-10)
2. **Claims and Contract Administration**
    a. Contract administration activities related to providers
    b. Maintaining and updating Medicaid client records in an EHR system.
    c. Processing and submitting Medicaid claims.
    d. System functions that support Medicaid billing, reporting, and compliance.
    (MH LTR 11-01; 42 CFR 433.15)
3. **Program Planning and Policy Development**
    a. Program planning, policy development, and administrative case management
    (MH LTR 11-01; MHSUDS IN 14-033)
4. **Medicaid Management Information System (MMIS) Development and Operation**
    a. Operation and development of mechanized claims processing and information retrieval systems
    (42 CFR §433.15)
5. **Eligibility Intake and Outreach**
    a. Eligibility intake activities
    b. Outreach activities to inform or persuade beneficiaries to enter Medicaid services
    (State Medicaid Director LTR 122094)
6. **Personnel Training and Supervision for Administrative Functions**
    a. Training of staff performing administrative activities related to Medicaid
    (MHSUDS IN 23-004)
7. **Claims Certification and Reporting**

a. Certification of claims for reimbursement by authorized officials
(MHP Contract Exhibit A-5)

8. **Cost Allocation and Reporting**
   a. Allocation of indirect and administrative costs in accordance with CMS guidelines and OMB Circular A-87
   (MH LTR 11-01; MHSUDS IN 14-033)
9. **Other Allowable Administrative Activities**
   a. Auditing and evaluation related to Medicaid program administration
   b. Maintenance of provider directories
   (BHIN 22-070)

Allowable Utilization Review/Quality Assurance (UR/QA) Activities Applicable to MHPs and DMC-ODS Counties

10. **Medical Necessity and Quality of Care Review**
    a. Determining whether services are reasonable and medically necessary for diagnosis or treatment
    (MHSUDS IN 17-011)
11. **Monitoring and Training Related to Program Integrity**
    b. Utilization review and training activities related to monitoring program integrity standards, including services by contracted providers
    (MHSUDS IN 17-011; MH LTR 05-11)
12. **External Quality Review Activities**
    c. Validation of performance improvement projects, performance measures, compliance with contract standards, network adequacy, and administration or validation of consumer surveys
    (42 CFR §438.358)
13. **Clinical Performance Improvement Projects**
    d. Utilization review and training activities as part of clinical performance improvement projects
    (MHSUDS IN 17-011; MH LTR 05-11)
14. **Quality Improvement Committee Activities**
    e. Meetings, preparation, documentation of minutes, and follow-up of clinical quality improvement issues
    (MHSUDS IN 17-011; MH LTR 05-11)
15. **Clerical Support for UR/QA**
    f. Clerical time for chart selection, gathering documentation, and follow-up of clinical QA issues
    (MHSUDS IN 17-011; MH LTR 05-11)
16. **Development, Implementation, and Evaluation of Clinical Practice Guidelines**

g. QA activities related to clinical practice guidelines
(MHSUDS IN 17-011; MH LTR 05-11)

17. Assisting Auditors with Reviews

h. Time and materials for assisting state and federal auditors with fiscal and compliance audits related to External Quality Review and other DMC or SMHS standards
(MHSUDS IN 17-011; MH LTR 05-11)

18. Utilization Review for Medication Monitoring

i. Activities required as part of medication monitoring
(MHSUDS IN 17-011; MH LTR 05-11)

19. Training Skilled Professional Medical Personnel (SPMP) and Direct Supporting Staff

j. Training for SPMP and staff directly supporting SPMP for utilization review and quality assurance activities
(MHSUDS IN 17-011)

20. Management Information Systems Operation Related to UR

k. Personnel time necessary for operation of management information systems required for utilization review activities
(MHSUDS IN 17-011; MH LTR 05-11)

21. County QA/UR Plan Development Activities

l. Development of QA/UR plans if not billed as case management or other direct services
(MHSUDS IN 17-011; MH LTR 05-11)

22. Quality Assessment and Performance Improvement (QAPI) Program Activities

m. Collection and submission of performance measurement data, monitoring utilization management, provider credentialing, grievance resolution, and quality improvement reporting
(MHP Contract Exhibit A-5)