

State of California—Health and Human Services Agency Department of Health Care Services



EDMUND G. BROWN JR. GOVERNOR

DATE: August 29, 2014

MHSUDS INFORMATION NOTICE NO.: 14-027

TO: COUNTY ALCOHOL AND DRUG PROGRAM ADMINISTRATORS COUNTY MENTAL HEALTH DIRECTORS LOCAL MENTAL HEALTH BOARDS

SUBJECT: ANNUAL REVIEW PROTOCOL FOR CONSOLIDATED SPECIALTY MENTAL HEALTH SERVICES AND OTHER FUNDED SERVICES for FISCAL YEAR 2014-2015

SUPERSEDES: MHSD Information Notice No.: 13-18

REFERENCE: Retain until rescinded

Pursuant to the responsibilities of the Department of Health Care Services, Program Oversight and Compliance Branch, Compliance Section, as outlined in Welfare and Institutions Code, Section 5614, this Information Notice provides the specifics of the Program Oversight and Compliance annual review of Mental Health Plans (MHPs) in Fiscal Year (FY) 2014-2015. Enclosed are the following:

- Annual Review Protocol for Consolidated Specialty Mental Health Services and Other Funded Services for FY 2014-2015 – Enclosure 1;
- County Mental Health Plan Attestation for FY 2014-2015 Enclosure 2;
- Program Oversight and Compliance Review Schedule for FY 2014-2015 Enclosure 3; and
- Reasons for Recoupment for FY 2014-2015 Enclosure 4

Annual Review Protocol for Consolidated Specialty Mental Health Services and Other Funded Services for FY 2014-2015

In accordance with oversight authority contained in the California Code of Regulations, Title 9, chapter 11, section 1810.380, DHCS shall review program and fiscal operations of each MHP to verify that medically necessary services are provided in compliance with State and Federal laws and regulations and/or the terms of the contract between DHCS and the MHP.

MHSUDS INFORMATION NOTICE NO.: 14-027 August 29, 2014 Page 2

The MHP will receive an Announcement Letter approximately 30 days in advance of its scheduled system review or hospital review. The letter will provide instructions for the MHP to follow in preparation for the review. The MHP representative(s) involved in the onsite review shall provide sufficient evidence to demonstrate compliance with State and Federal laws and regulations and/or contractual requirements. If during the onsite review DHCS determines that an MHP is out of compliance, DHCS will provide a description of the finding(s), a description of any corrective action(s) required by DHCS, and the time limits for compliance. A Plan of Correction (POC) is required for all items found to be out of compliance.

County Mental Health Plan Attestation for FY 2014-2015

The purpose of the Attestation is for the MHP to certify compliance with specified Medi-Cal requirements. The submittal of the Attestation to DHCS is required of all MHPs who are scheduled to be reviewed during FY 2014-2015. The signed Attestation is due to DHCS Compliance Section 60 days prior to the start of the MHPs scheduled triennial system review. MHPs are to submit the Attestation to:

Chief Compliance Section Program Oversight and Compliance Branch Mental Health Services Division Department of Health Care Services P.O. Box 997413, MS 2703 Sacramento, CA 95899-7413

NOTE: The MHP is in full compliance when the MHP certifies that all 25 items contained in the Attestation are in place and are maintained in accordance with regulations. During the onsite review the corresponding, supporting documents and records required by the Attestation shall be accessible and made available for review upon request by DHCS reviewers.

In the instance in which the MHP is unable to certify compliance to all 25 items contained in the Attestation, the MHP is to submit to DHCS (via an addendum to the Attestation) the identification of the item(s) found to be in non-compliance, provide an explanation of the reason for the non-compliance of the item(s), and specify a date when all items will be in full compliance. Once the MHP is able to certify compliance to all 25 items in the Attestation, the MHP is to resubmit a signed Attestation with the box checked "Amended" to DHCS.

MCO Review Schedule for FY 2014-2015

The schedule includes MHP system reviews, non-hospital chart reviews, and Short-Doyle/Medi-Cal (SD/MC) hospital reviews.

Plan of Correction

The MHP is required to submit a POC for all System and Chart review items found out of compliance within 60 days after receipt of the final report. If the MHP chooses to appeal any of the out of compliance items, the MHP may do so by submitting an appeal in writing within 15 working days after receipt of the final report.

Reasons for Recoupment for FY 2014-2015

DHCS will review a random sample of beneficiary charts and recoup Federal Financial Participation dollars in accordance with the FY 2014-2015 Reasons for Recoupment. DHCS will review the medical necessity criteria and medical records documentation to determine Medi-Cal reimbursement of specialty mental health services. This review includes all medical records associated with the beneficiary's care during the review period.

<u>Chart Review – Non-Hospital Services</u>

Depending on the size of the county (small or large), DHCS will review 10 to 20 Adult/EPSDT beneficiary medical records. The random sample will be drawn from the most recent 90-day period for which paid claims data are available or from a specified time period as determined by the Department. The MHP will be provided with the beneficiary names prior to the review or as determined by the Department.

<u>Chart Review – SD/MC Hospital Services</u>

DHCS will review a sample of adult and/or children's medical records. The random sample will be drawn from paid claims from the twelve month period prior to the date of the review or from a specified time period as determined by the Department.

This Protocol was developed in collaboration with the Compliance Advisory Committee, which includes representatives from the California Behavioral Health Directors Association, the California Mental Health Planning Council, the California Hospital Association, the National Alliance on Mental Illness, Consumer and Family Member Representatives, Disability Rights California, and other stakeholders. MHSUDS INFORMATION NOTICE NO.: 14-027 August 29, 2014 Page 4

If you have any questions regarding this Information Notice, please contact the Chief, Compliance Section at (916) 319-0985.

Sincerely,

Original Signed By

Karen Baylor, Ph.D., LMFT, Deputy Director Mental Health & Substance Use Disorder Services

Enclosures

cc: Jane Adcock, Executive Officer California Mental Health Planning Council 1501 Capitol Avenue, MS 2706 Sacramento, CA 95814

> Robert E. Oakes, JD, MBA, Executive Director County Behavioral Health Directors Association of California 2125 19th Street, 2nd Floor Sacramento, CA 95818

Rusty Selix, Policy Associate California Council of Community Mental Health Agencies 1127 11th Street, Suite 925 Sacramento, CA 95814