State of California Department of Health Care Services (DHCS)

COUNTY MENTAL HEALTH PLAN (MHP) ATTESTATION FISCAL YEAR (FY) 2014-2015 COMPLIANCE WITH SPECIFIED MEDI-CAL REQUIREMENTS

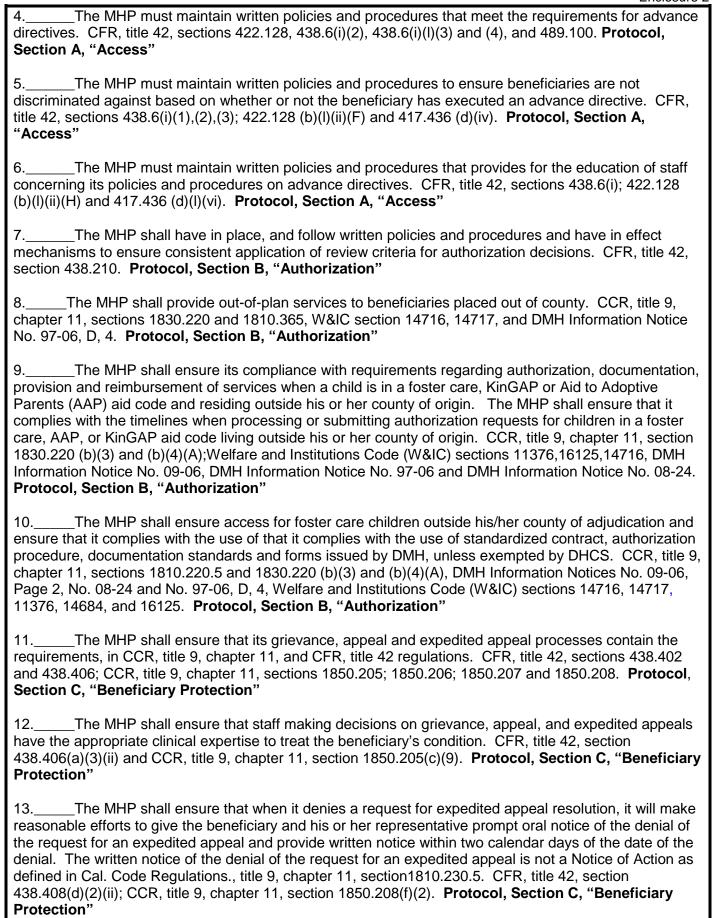
All MHPs scheduled in the FY 2014-2015 Triennial System Review must execute and return this Attestation, no later than 60 days prior to the MHP's scheduled review. (Refer to Enclosure 3 – Program Oversight and Compliance Review Schedule for FY 2014-2015)

Instructions:

- A. When the MHP is in full compliance with all 25 items in the Attestation:
 - Initial in the space next to each numbered item to confirm compliance.
 - MH Director or Designee must sign on page 4 of the Attestation.
 - Date and return to DHCS at the address noted on page 4 of the Attestation.
- B. When the MHP is not in full compliance:
 - Any item not initialed will require an explanation (via an addendum) stating why the MHP is not in compliance with that item.
 - The MHP must specify one date in the addendum when all items in the Attestation will be in compliance.
 - MH Director or Designee must sign on page 4 of the Attestation.
 - Date and return to DHCS at the address noted on page 4 of the Attestation.
 - When the MHP is in full compliance by the above specified date, an amended Attestation will be due to DHCS.

DHCS reserves all rights and remedies pursuant to its oversight authority to monitor and take actions regarding instances of non-compliance.

l, (print name)	, as the Mental Health Director of the County of
(name of County), or appropriate designee of the County Mental Health Director compliance with the following Medi-Cal requirements:	, as the lawful and ector, hereby attest regarding the County's
Please read the items and initial:	
1The MHP shall ensure that it makes a good for notice of termination of a contracted provider, within 15 notice to each enrollee who received his or her primary terminated provider. CFR, title 42, section 438.10 (f)	5 days after receipt or issuance of the termination / care from, or was seen on a regular basis by, the
2The MHP shall have written policies regardin 438.100(a)(b) and (d) and DMH Letter No. 04-05. Pro	
The MHP shall ensure that it complies with concluding the development and implementation of a cubeen incorporated into Item 3) CCR, title 9, chapter 02, Enclosures, Criterion 7, Section III, C, Page 22, Cr Section IV, Pages 18 &19, and DMH Notice 10-17, En Criterion 7, Section IV, A, Page 18, Criterion 5, Section (U.S. Code 42., Section 2000d), CFR, title 45, Part 80.	Itural competence plan. (Prior Items 4 & 5 have 11, section 1810.410. DMH Information Notice 10-iterion 7, Section IV, A, Page 22, Criterion 5, closures, Criterion 7, Section III, C, Page 17, n IV, Pages 13-14, title VI, Civil Rights Act of 1964



14The MHP shall ensure that it posts notices explaining grievance, appeal, and expedited appeal process procedures in locations at all MHP provider sites sufficient to ensure that the information is readily available to both beneficiaries and provider staff. CCR, title 9, chapter 11, section 1850.205(c)(1)(B). Protocol, Section C, "Beneficiary Protection"
15The MHP shall ensure that forms that may be used to file grievances, appeals, and expedited appeals, and self addressed envelopes are available for beneficiaries to pick up at all MHP provider sites without having to make a verbal or written request to anyone. CCR, title 9, chapter 11, section 1850.205(c) (1) (C). Protocol, Section C, "Beneficiary Protection"
16The MHP shall ensure that individuals making decisions on grievances and appeals were not involved in any previous level of review or decision-making. CFR, title 42, section 438.406(a)(3)(i). Protocol, Section C, "Beneficiary Protection"
17The MHP shall ensure that grievances are resolved within established timeframes and that any required notice of an extension is given. CFR, title 42, section 438.408(a),(b)(1) and CCR, title 9, chapter 11, section 1850.206(b). Protocol, Section C, "Beneficiary Protection"
18The MHP shall ensure that appeals are resolved within established timeframes and that any required notice of an extension is given. CFR, title 42, sections 438.408(a),(b)(2) and CCR, title 9, chapter 11, section 1850.207(c). Protocol, Section C, "Beneficiary Protection"
19The MHP shall ensure that expedited appeals are resolved within established timeframes and that any required notice of an extension is given. CFR, title 42, section 438.408(a),(b)(3) and CCR, title 9, chapter 11, section 1850.208. Protocol, Section C, "Beneficiary Protection"
20The MHP shall ensure that it contracts with disproportionate share and traditional hospitals when the hospital meets selection criteria unless the MHP has obtained an exemption. CCR, title 9, chapter 11, section 1810.430(a),(b),(c). Protocol, Section D, "Funding, Reporting, and Contracting Requirements"
21The MHP shall ensure that the Fee-for-Service/Medi-Cal contract hospital rates negotiated by the MHP are submitted annually. CCR, title 9, chapter 11, section 1810.375(c) and Welfare and Institutions Code (W&IC), section 5614 (b)(4). Protocol, Section D, "Funding, Reporting, and Contracting Requirements"
22The MHP shall ensure that adult and children performance outcome system data is reported. Welfare and Institutions Code (W&IC), section 5610; County Performance Contract. Protocol , Section D , "Funding, Reporting, and Contracting Requirements"
23The MHP shall have written policies and procedures for selection, retention, credentialing and recredentialing of providers; the provider selection policies and procedures must not discriminate against particular providers that serve high-risk populations or specialize in conditions that require costly treatment. CFR, title 42, section 438.214 (a-e). Protocol, Section G, "Provider Relations"
24The MHP shall ensure that it oversees and is accountable for any functions and responsibilities that it delegates to any subcontractor and before any delegation evaluates the prospective subcontractor's ability to perform the activities to be delegated. CFR, title 42, section 438.230 (a). Protocol, Section G, " Provider Relations "
25The MHP shall ensure that it provides the information specified at CFR, title 42 section 438.10 (g)(1) about the grievance system to all providers and subcontractors at the time they enter into a contract. CFR, title 42, section 438.414. Protocol, Section G, "Provider Relations"

Please provide an attached addendum page(s) with an explanation for all items above not initialed. List each omitted item by number, and for each item, state the reason the MHP is not currently in compliance, and the date it expects to be in compliance with all items. 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 the DHCS. Amended	
ATTESTATION	
I hereby certify under penalty of perjury that, to the best of my knowledge, information, and/or belief, and to the extent indicated or as limited above and/or in any attached addendum, the MHP is currently in compliance with this specified list of Medi-Cal related requirements, and that the corresponding, supporting documents and records are available and accessible to the California Department of Health Care Services (DHCS) upon request. I am aware that the documents and records may be requested at any time, including during an onsite review.	
Mental Health Director/or Designee:Date:	
Print Name:Print Title:	
County Name/Address:	
Please return the Attestation to the following address no later than 60 days prior to the MHPs scheduled triennial review: California State Department of Health Care Services Mental Health Services Division Program Oversight and Compliance Branch Attention: Chief, Compliance Section P. O. Box 997413, MS 2703 Sacramento, CA 95899-7413	