



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



GAVIN NEWSOM
GOVERNOR

August 31, 2021

Sent via e-mail to: jnagel@ochca.com

Jeffrey A. Nagel, Behavior Health Director
Orange County Health Care Agency Behavioral Health Services
405 West 5th Street, Suite 724
Santa Ana, CA 92701

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Nagel:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Orange County.

The County Compliance Unit (CCU) within the Audits and Investigations Division (A&I) of DHCS conducted a review of the County's compliance with contract requirements based on responses to the monitoring instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Orange County's Fiscal Year 2020-21 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Orange County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 11/1/2021. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions, please contact me at becky.counter@dhcs.ca.gov.

Sincerely,

Becky Counter
(916) 713-8567
becky.counter@dhcs.ca.gov

Audits and Investigations Division
Medical Review Branch
Behavioral Health Compliance Section
County Compliance Unit
1500 Capitol Ave., MS 2305
Sacramento, CA 95814
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Distribution:

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MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch
Azahar Lopez, Orange County Administrative Manager II, Authority and Quality Improvement Services (AQIS)

COUNTY REVIEW INFORMATION

County:

Orange

County Contact Name/Title:

Azahar Lopez, Administrative Manager II, AQIS

County Address:

405 West 5th Street
Santa Ana, CA 92701

County Phone Number/Email:

(714) 796-0208
azlopez@ocha.com

Date of Review:

7/12/2021

Lead CCU Analyst:

Becky Counter

Assisting CCU Analyst:

N/A

Report Prepared by:

Becky Counter

Report Approved by:

Ayesha Smith

REVIEW SCOPE

- I. Regulations:
 - a. California Code of Regulations, Title 22, section 51341.1 – Drug Medi-Cal Substance Use Disorder Services
 - b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
 - c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
 - d. Health and Safety Code, Division 10.5, Section 11750 – 11970: Alcohol and Drug Programs

- II. Program Requirements:
 - a. Fiscal Year (FY) 2020-21 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
 - b. State of California *Youth Treatment Guidelines Revised August 2002*
 - c. DHCS *Perinatal Practice Guidelines FY 2018-19*
 - d. National Culturally and Linguistically Appropriate Services (CLAS)
 - e. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
 - f. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 7/12/2021. The following individuals were present:

- Representing DHCS:
Becky Counter, Associate Governmental Program Analyst, (AGPA)
Natalia Krasnodemsky, AGPA
Kathryn Sears, Staff Services Manager I, (SSMI)
- Representing Orange County:
Glenda Aguilar, Program Manager II, Adult and Older Adult Behavioral Health (AOABH)
Bijan Amirshahi, Service Chief II, Ethnic Services
Elizabeth Bausman, Admin. Manager I, AQIS
Yvonne Brack, Service Chief II, AQIS
David Castellanos, Information Security/ Technology
Wendy Elliott, Service Chief II, AOABH
April Jannise, Admin. Manager II, AQIS
Ian Kemmer, Director, AQIS
Anthony Le, Admin. Manager II, Program Support/Financial
Alicia Lemire, Admin. Manager II, Children, Youth and Prevention Behavioral Health (CYPBH)
Azahar Lopez, Admin. Manager II, AQIS
Chiyo Matsubayashi, Service Chief II, AQIS
Annette Mugrditchian, Director of Operations, Behavioral Health Services (BHS)
Bill Norsetter, Admin. Manager II, Procurement/Contract Services
Sandra Okubo, Sr Research Analyst, AQIS
Joey Pham, Program Supervisor II, AQIS
Kelly Sabat, Division Manager, AQIS
Susan Weidhaas, Admin Manager I, AQIS
April Thornton, Program Manager II, AOABH
Annette Tran, Admin Manager II, CYBH
Don Browder, Human Resources Employee Relations Manager, HCA
Erica Spencer, Staff Specialist, IRIS team
Diane Holley, Program Manager II, AOABH
Juan Corral, Division Manager-Contracts and Procurement Services
Sarah Nguyen Behavioral Health Clinician II/Contract Monitor, CYPBH
C. Scott Huffman, BHS Assoc. Medical Director DMC-ODS
Carolyn Secrist, Program Supervisor II

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of the monitoring process
- Orange County overview of services

Exit Conference:

An Exit Conference was conducted via WebEx on 7/12/2021. The following individuals were present:

- Representing DHCS:
Becky Counter, AGPA
Natalia Krasnodemsky, AGPA
Kathryn Sears, SSMI

- Representing Orange County:
Glenda Aguilar, Program Manager II, AOABH
Elizabeth Bausman, Admin. Manager I, AQIS
Wendy Elliott, Service Chief II, AOABH
April Jannise, Admin. Manager II, AQIS
Ian Kemmer, Director, AQIS
Alicia Lemire, Admin. Manager II, CYBH
Azahar Lopez, Admin. Manager II, AQIS
Chiyo Matsubayashi, Service Chief II, AQIS
Bill Norsetter, Admin. Manager II, Procurement/Contract Services
April Thornton, Program Manager II, AOABH
Annette Tran, Admin Manager II, CYBH
Juan Corral, Division Manager-Contracts and Procurement Services

During the Exit Conference, the following topics were discussed:

- Review of compliance deficiencies
- Follow-up deadlines

SUMMARY OF FY 2020-21 COMPLIANCE DEFICIENCIES (CD)

<u>Section</u>	<u>Number of CD's</u>
1.0 Administration	1
2.0 Prevention	0
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	0
5.0 Data/CalOMS	1
6.0 Program Integrity	1
7.0 Fiscal	0

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the SABG County Application, Enclosure 1, Part I, Section 3, B, 5-8 each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.

Please provide the following within the completed FY 2020-21 CAP:

- a) A statement of the CD.
- b) A list of action steps to be taken to correct the CD.
- c) A date of completion for each CD.
- d) The name of the person who will be responsible for corrections and ongoing compliance.

The PMFS analyst will monitor progress of the CAP completion.

Category 1: ADMINISTRATION

A review of the County's Maintenance of Records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD: 1.5.2:

SABG Application Enclosure 2, II, 2

1. Hatch Act

County agrees to comply with the provisions of the Hatch Act (USC, Title 5, Part III, Subpart F., Chapter 73, Subchapter III), which limit the political activities of employees whose principal employment activities are funded in whole or in part with federal funds.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically the Hatch Act.

Category 5: DATA/CALOMS

A review of data submissions via CalOMS was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD: 5.1.2:

SABG Application, Enclosure 2, III, 2, C-F

2. California Outcomes Measurement System for Treatment (CalOMS-Tx)

The CalOMS-Tx business rules and requirements are:

- C. Electronic submission of CalOMS-Tx data shall be submitted by County within 45 days from the end of the last day of the report month.
- D. County shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (<https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx>) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS Tx data collection.
- E. County shall submit CalOMS-Tx admission, discharge, annual update, resubmissions of records containing errors or in need of correction, and “provider no activity” report records in an electronic format approved by DHCS.
- F. County shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method, as identified online at:
<https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx>

Findings: The County’s Open Admissions Report is not in compliance.

Category 6: PROGRAM INTEGRITY

A review of the SABG monitoring, privacy, and program integrity was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 6.1.3:

SABG Application Enclosure 2, I, 3, A, 1, a-e

1. County's performance under the County Performance Contract and the SABG County Application shall be monitored by DHCS during the term of the County Performance Contract. Monitoring criteria shall include, but not be limited to:
 - a. Whether the quantity of work or services being performed conforms to Enclosure 3.
 - b. Whether the County has established and is monitoring appropriate quality standards.
 - c. Whether the County is abiding by all the terms and requirements of this Contract.
 - d. Whether the County is abiding by the terms of the Perinatal Practice Guidelines.
 - e. Whether the County conducted annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. County shall submit copy of its monitoring and audit reports to DHCS within two weeks of issuance. Reports shall be sent by secure, encrypted e-mail to:

SUDCountyReports@dhcs.ca.gov or

Audits and Investigations Division
Medical Review Branch
Department of Health Care Services
PO Box 997413, MS-2703
Sacramento, CA 95899-7413

Findings: The County monitored 17 of 25 SABG funded providers and submitted audits reports of these annual reviews to DHCS.

- The County submitted 15 of the 17 annual monitoring reports secure and encrypted to DHCS.
- The County submitted one (1) of 17 annual monitoring reports within two weeks of completion to DHCS.

TECHNICAL ASSISTANCE

Orange County is requesting Technical Assistance (TA) in CalOMS-TX and DATAR.

CalOMS-Tx and DATAR:

Orange County stated they need help cleaning up the database from thousands of CalOMS-Treatment (Tx) entries by providers that were not connected with the County at the time the missing records should have been submitted. County states they have sent technical assistance (T/A) requests but have not received a response. The County is also requesting assistance with the DATAR portal.