

**COUNTY MENTAL HEALTH PLAN (MHP) ATTESTATION  
FISCAL YEAR (FY) 2021/2022**

The MHP must complete this attestation as a part of the Ongoing Compliance Monitoring (OCM) review of the MHP. The MHP Chief Executive Officer (CEO)/Chief Financial Officer (CFO) or an individual who reports directly to the CEO/CFO with delegated authority to sign for the CEO/CFO, must sign the attestation to certify the MHP’s compliance with the requirements specified herein.

Instructions:

For each of the thirteen (13) requirements specified in the Attestation, the MHP must:

- Provide the required information for each item by listing the policy, procedure, or supporting evidence the MHP reviewed to verify compliance with the requirement.
- Specify the title of the document (e.g., policy and procedure), document number (if any), and the effective date(s). If additional space is needed, please attach a separate document with the additional information.

The CEO/CFO (or Designee) must sign the Attestation below, as well as sign and date each element to certify the MHP’s compliance with the requirement.

If the MHP is not able to verify compliance with the requirement, the MHP must submit a Corrective Action Plan (CAP) addressing any areas of non-compliance.

(42 C.F.R. § 438.606; Welf. & Inst. Code § 14197.7(d))

**ATTESTATION**

I, CEO/CFO (or Designee) of the \_\_\_\_\_ County Mental Health Plan hereby attest to the County’s compliance with the federal and state laws and regulations, as well as the contract between the MHP and California Department of Health Care Services (DHCS), included in this Attestation. I certify, under penalty of perjury that, based on my best information, knowledge, and belief, and to the extent indicated below, or in any required CAP, the MHP is currently in compliance with the specified requirements, and the information below is accurate, complete, and truthful. The MHP will provide to DHCS, upon request, the supporting documentation and records. I am aware that the documents and records may be requested at any time, including during or after an onsite review.

Mental Health Plan CEO/CFO (or Designee): \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Title: \_\_\_\_\_

County Name/Address: \_\_\_\_\_

1. The MHP must provide DHCS issued Medi-Cal Services for Children and Young Adults: Early & Periodic Screening, Diagnostic & Treatment brochure, which includes information about accessing Therapeutic Behavioral Services, to Medi-Cal beneficiaries under 21 years of age and their representative in the following circumstances: at the time of admission to a Skilled Nursing Facility with a Specialized Treatment Program for the mentally disordered; at the time of admission to a Mental Health Rehabilitation Center that has been designated as an Institution for Mental Diseases; at the time of placement in a Rate Classification Level (RCL) 13-14 foster care group home or Short Term Residential Therapeutic Program; and at the time of placement in an RCL 12 foster care group home when the MHP is involved in the placement. (CCR, title 9, § 1810.310(a)(2)(A) and (B); DMH Letter No. 01-07, DMH Letter No. 04-04; DMH Letter No. 04-11; DMH IN No. 08-38; MHP Contract)

Document Name	Document #	Effective Date

\_\_\_\_\_ Signature of MHP CEO/CFO (or Designee) \_\_\_\_\_ Date

2. The MHP shall inform DHCS whether it has been accredited by a private independent accrediting entity. (42 C.F.R. § 438.332(a).) If the MHP has received accreditation by a private independent accrediting entity, the Contractor shall authorize the private independent accrediting entity to provide DHCS a copy of its most recent accreditation review, including:

1. Its accreditation status, survey type, and level (as applicable);
2. Accreditation results, including recommended actions or improvements, corrective action plans, and summaries of findings; and
3. The expiration date of the accreditation. (42 C.F.R. § 438.332(b).)

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3. The MHP shall comply with the conflict of interest safeguards described in Title 42 Code of Federal Regulations (C.F.R.) part 438.58 and the prohibitions described in section 1902(a)(4)(C) of the Act. (42 C.F.R. § 438.3(f)(2).)

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4. The MHPs officers and employees shall not have a financial interest in this Contract or a subcontract of this Contract made by them in their official capacity, or by any body or board of which they are members unless the interest is remote. (Gov. Code §§ 1090, 1091; 42 C.F.R. § 438.3(f)(2).)

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5. The MHP shall not utilize in the performance of this Contract any State officer or employee in the State civil service or other appointed State official unless the employment, activity, or enterprise is required as a condition of the officer’s or employee’s regular State employment. (Pub. Con. Code § 10410; 42 C.F.R. § 438.3(f)(2).) The MHP shall submit documentation to DHCS of employees (current and former State employees) who may present a conflict of interest. (MHP Contract, Ex. A, Att. 1, sections 2.D. and 6.D.1.)

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6. Federal Financial Participation is not available for any amount furnished to an excluded individual or entity, or at the direction of a physician during the period of exclusion when the person providing the service knew or had reason to know of the exclusion, or to an individual or entity when DHCS failed to suspend payments during an investigation of a credible allegation of fraud. (42 U.S.C. § 1396b(i)(2); MHP Contract, Ex. A, Att. 3, section 3.A.)

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7. The MHP or an affiliate, vendor, contractor, or subcontractor of the Contractor shall not submit a claim to, or demand or otherwise collect reimbursement from, the beneficiary or persons acting on behalf of the beneficiary for any specialty mental health or related administrative services provided under this contract, except to collect other health insurance coverage, share of cost, and co-payments. (CCR, tit. 9, § 1810.365(a); MHP Contract, Ex. A, Att. 3, section 9.A.)

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8. The MHP must ensure that it contracts with disproportionate share and traditional hospitals when the hospital meets selection criteria unless the MHP has obtained an exemption. (CCR, tit. 9, § 1810.430(a),(b), and (c); 42 C.F.R. §§ 438.66(b).)

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9. The MHP must ensure that the Fee-for-Service/Medi-Cal contract hospital rates negotiated by the MHP are submitted each state fiscal year. (CCR, tit. 9, § 1810.375(c);42 C.F.R. §438.66(b).)

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10. The County must submit Client and Service Information (CSI) System data, including but not limited to, client demographics and descriptions of services provided to each client. The CSI data shall be submitted no later than 60 days after the end of the month in which the services were provided. (CCR, tit. 9, § 3530.10; 42 C.F.R. § 438.242; MHP Contract, Ex. A, Att. 4, sections 1 and 2.)

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11. The MHP must deposit its local matching funds per the schedule developed by DHCS. If the county elects not to apply Maintenance of Effort funds, the MHP must be in compliance with Welfare & Institutions Code (W&I), section 17608.05(c) prohibiting the county from using the loss of these funds for realignment purposes. (W&I, §§ 5651(b) and 17608.05.)

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12. The MHP may not decrease the proportion of its funding expended for children’s services below the proportion expended in the 1983-1984 fiscal year unless a determination has been made by the governing body in a noticed public hearing that the need for new or expanded services to persons under age 18 has significantly decreased. (W&I Code, §§ 5651(b) and 5704.5(b);.)

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13. The MHP must allocate (for services to persons under age 18) 50% of any new funding received for new or expanded mental health programs until the amount expended for mental health services to persons under age 18 equals not less than 25% of the county’s gross budget for mental health or not less than the percentage of persons under age 18 in the total county population, whichever percentage is less. (W&I, §§ 5651(b) and 5704.6.)

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