

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



GAVIN NEWSOM GOVERNOR

August 19, 2020

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

Jeffery A. Nagel, PHD, Director of Operations Orange County Substance Use Disorder Administrator 405 W. 5<sup>th</sup> Street Suite 700 Santa Ana, CA 92701

SUBJECT: Annual County Compliance Unit 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 State Fiscal Year 2019-20 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 9/21/2020. Please use enclosed CAP plan form when completing the CAP. CAP and supporting documentation to be e-mailed to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions regarding this report, please contact me.

Sincerely,

Emanuel Hernandez (916) 713-8667 emanuel.hernandez@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 http://www.dhcs.ca.gov

Distribution:

- To: Director Nagel, PHD, Director of Operations
- CC: Mateo Hernandez, Audits and Investigations, Medical Review Branch Acting Chief Lanette Castleman, Audits and Investigations, Behavioral Health Compliance Section Chief Mayumi Hata, Audits and Investigations, County Compliance Unit Chief Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief Janet Rudnick, Audits and Investigations, Provider Compliance Unit Chief Tracie Walker, Community Services Division, Community Support Branch Chief Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief Katrina Cox, Community Services Division, Prevention Services Section Chief Jessica Fielding, Community Services Division, Family Services Unit Chief Angelina Azevedo, Community Services Division, Prevention Services Unit Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County and Provider Monitoring Unit Azahar Lopez, PsyD, Orange County Substance Use Disorder Support Manager

Lead CCU Analyst:	Date of Review:
Emanuel Hernandez	May 2020
Assisting CCU Analyst(s): N/A	
County: Orange County	County Address: 405 West 5 <sup>th</sup> Street Santa Ana, CA 92701
County Contact Name/Title:	County Phone Number/Email:
Azahar Lopez, PsyD, SUD Support	714-796-0208
Manager	azlopez@ochca.com
Report Prepared by:	Report Approved by:
Emanuel Hernandez	Mayumi Hata

# 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. State Fiscal Year (SFY) 2019-20 State County Contract, herein referred to as State County Contract
  - 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

# SUMMARY OF SFY 2019-20 COMPLIANCE DEFICIENCIES (CD)

Section:	Number of CD's:
1.0 Administration	0
2.0 SABG Monitoring	1
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	0
5.0 Primary Prevention	0
6.0 Cultural Competence	0
7.0 CalOMS and DATAR	3
8.0 Privacy and Information Security	0
9.0 Fiscal	0
10.0 Previous CAP	4

## CORRECTIVE ACTION PLAN

Pursuant to the State County Contract, Exhibit A, Attachment I A2, Part I, Section 3, B, 5-8 each compliance deficiency (CD) identified must be addressed via a Corrective Action Plan (CAP). The CAP is due within thirty (30) calendar days of the date of this monitoring report.

Please provide the following within the completed SFY 2019-20 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.

# 2.0 SABG MONITORING

The following deficiency in the SABG monitoring requirements was identified:

### COMPLIANCE DEFICIENCY:

#### CD 2.12:

SABG State-County Contract Exhibit A, Attachment I A2, Part I, Section 3, A, 1, e

- 1. Contractor's performance under this Exhibit A, Attachment I, Part I, shall be monitored by DHCS during the term of this Contract.
  - e. Whether the Contractor conducted annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. Contractor shall submit copy of its monitoring and audit reports to DHCS within two weeks of issuance. Reports shall be sent by secure, encrypted email to:

SUDCountyReports@dhcs.ca.gov or

Substance Use Disorder-Program, Policy, and Fiscal Division Performance Management Branch Department of Health Care Services PO Box 997413, MS-2627 Sacramento, CA 95899-7413

**Finding:** The County indicated seven (7) SABG monitoring reports were sent to DHCS for SFY 2019-20. The County did monitor seven (7) of twenty one (21) providers for SABG programmatic and fiscal requirements. The County did submit five (5) of seven (7) SABG programmatic and fiscal monitoring reports to DHCS within two weeks of report issuance. The County did submit seven (7) of seven (7) SABG programmatic and fiscal monitoring reports secure and encrypted.

### 7.0 CALIFORNIA OUTCOMES MEASUREMENT SYSTEM TREATMENT (CalOMS Tx)

# AND DRUG AND ALCOHOL TREATMENT ACCESS REPORT (DATAR)

The following deficiencies in CalOMS and DATAR regulations, standards, or protocol requirements were identified:

#### COMPLIANCE DEFICIENCIES:

#### CD 7.34.a:

State-County Contract, Exhibit A, Attachment I A2, Part III, B, 3-6

- 3. Electronic submission of CalOMS-Tx data shall be submitted by Contractor within 45 days from the end of the last day of the report month.
- Contractor shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (Document 3J) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS-Tx data collection.
- 5. Contractor 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.
- 6. Contractor shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS identified in Document 3S for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method.

#### State-County Contract, Exhibit A, Attachment I A2, Part III, E, 3

 The Contractor shall ensure that all DATAR reports are submitted by either Contractoroperated treatment services and by each subcontracted treatment provider to DHCS by the 10<sup>th</sup> of the month following the report activity month.

Finding: The County's Open Provider report is not current.

State-County Contract, Exhibit A, Attachment I A2, Part III, B, 3-6

- 3. Electronic submission of CalOMS-Tx data shall be submitted by Contractor within 45 days from the end of the last day of the report month.
- Contractor shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (Document 3J) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS-Tx data collection.
- 5. Contractor 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.
- 6. Contractor shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS identified in Document 3S for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method.

### State-County Contract, Exhibit A, Attachment I A2, Part III, E, 3

3. The Contractor shall ensure that all DATAR reports are submitted by either Contractoroperated treatment services and by each subcontracted treatment provider to DHCS by the 10<sup>th</sup> of the month following the report activity month.

Finding: The County's Open Admission report is not current.

### CD 7.34.c:

State-County Contract, Exhibit A, Attachment I A2, Part III, B, 3-6

- 3. Electronic submission of CalOMS-Tx data shall be submitted by Contractor within 45 days from the end of the last day of the report month.
- 4. Contractor shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (Document 3J) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS-Tx data collection.
- 5. Contractor 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.
- 6. Contractor shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS identified in Document 3S for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method.

State-County Contract, Exhibit A, Attachment I A2, Part III, E, 3

 The Contractor shall ensure that all DATAR reports are submitted by either Contractoroperated treatment services and by each subcontracted treatment provider to DHCS by the 10<sup>th</sup> of the month following the report activity month.

**Finding:** The County's DATAR report is not current.

### 10.0 PREVIOUS CAP(s)

During the SFY 2019-20 review, the following CAP with CD was discussed and are still outstanding.

### CD 10.39:

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 3, B, 8

If the Contractor does not submit a CAP, or, does not implement the approved CAP
provisions within the designated timeline, then DHCS may withhold funds until the
Contractor is in compliance. DHCS shall inform the Contractor when funds will be withheld.

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 1, B, 3, b

- 3. As a subrecipient, the Contractor shall:
  - b. Comply with federal statutes, regulations, including 45 CFR Part 75, and terms and conditions of the SABG grant.

### 45 CFR 75.514(e)

Audit follow-up.

(e) The auditor must follow-up on prior audit findings, perform procedures to assess the reasonableness of the summary schedule of prior audit findings prepared by the auditee in accordance with § 75.511(b), and report, as a current year audit finding, when the auditor concludes that the summary schedule of prior audit findings materially misrepresents the status of any prior audit finding. The auditor must perform audit follow-up procedures regardless of whether a prior audit finding relates to a major program in the current year.

**Finding:** The County did not demonstrate compliance with requirements to implement the approved CAP deficiency provision in a timely manner, SFY 2018-19, CD 2.9 SABG programmatic and fiscal monitoring.

#### CD 10.40:

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 3, B, 8

If the Contractor does not submit a CAP, or, does not implement the approved CAP provisions within the designated timeline, then DHCS may withhold funds until the Contractor is in compliance. DHCS shall inform the Contractor when funds will be withheld.

### SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 1, B, 3, b

- 3. As a subrecipient, the Contractor shall:
  - b. Comply with federal statutes, regulations, including 45 CFR Part 75, and terms and conditions of the SABG grant.

#### 45 CFR 75.514(e)

Audit follow-up.

(e) The auditor must follow-up on prior audit findings, perform procedures to assess the reasonableness of the summary schedule of prior audit findings prepared by the auditee in accordance with § 75.511(b), and report, as a current year audit finding, when the auditor concludes that the summary schedule of prior audit findings materially misrepresents the status of any prior audit finding. The auditor must perform audit follow-up procedures regardless of whether a prior audit finding relates to a major program in the current year.

**Finding:** The County did not demonstrate compliance with requirements to implement the approved CAP deficiency provision in a timely manner, SFY 2018-19, CD 2.15 SABG monitoring reports.

### CD 10.42:

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 3, B, 8

If the Contractor does not submit a CAP, or, does not implement the approved CAP
provisions within the designated timeline, then DHCS may withhold funds until the
Contractor is in compliance. DHCS shall inform the Contractor when funds will be withheld.

### SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 1, B, 3, b

- 4. As a subrecipient, the Contractor shall:
  - c. Comply with federal statutes, regulations, including 45 CFR Part 75, and terms and conditions of the SABG grant.

### 45 CFR 75.514(e)

Audit follow-up.

(f) The auditor must follow-up on prior audit findings, perform procedures to assess the reasonableness of the summary schedule of prior audit findings prepared by the auditee in accordance with § 75.511(b), and report, as a current year audit finding, when the auditor concludes that the summary schedule of prior audit findings materially misrepresents the status of any prior audit finding. The auditor must perform audit follow-up procedures regardless of whether a prior audit finding relates to a major program in the current year.

**Finding:** The County did not demonstrate compliance with requirements to implement the approved CAP deficiency provision in a timely manner, SFY 2018-19, CD 7.34.b Open Providers Report.

### CD 10.43:

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 3, B, 8

10. If the Contractor does not submit a CAP, or, does not implement the approved CAP provisions within the designated timeline, then DHCS may withhold funds until the Contractor is in compliance. DHCS shall inform the Contractor when funds will be withheld.

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 1, B, 3, b

- 5. As a subrecipient, the Contractor shall:
  - d. Comply with federal statutes, regulations, including 45 CFR Part 75, and terms and conditions of the SABG grant.

#### 45 CFR 75.514(e)

Audit follow-up.

(g) The auditor must follow-up on prior audit findings, perform procedures to assess the reasonableness of the summary schedule of prior audit findings prepared by the auditee in accordance with § 75.511(b), and report, as a current year audit finding, when the auditor concludes that the summary schedule of prior audit findings materially misrepresents the status of any prior audit finding. The auditor must perform audit follow-up procedures regardless of whether a prior audit finding relates to a major program in the current year.

**Finding:** The County did not demonstrate compliance with requirements to implement the approved CAP deficiency provision in a timely manner, SFY 2018-19, CD 7.34.c DATAR reports.

### TECHNICAL ASSISTANCE

The County did not request technical assistance.