## **Medi-Cal Behavioral Health Corrective Action Plan (CAP)**

## **KERN**

**Compliance Review Date: 6/17/2025** 

**Corrective Action Plan Fiscal Year: Fiscal Year 2024-25** 

## **SMHS**

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
5.2.1 Concurrent	1. Authorization process as	1. Authorization of	1. Initial and	
Review of Adult	outlined in Policy 5.1.19	ART services	Reauthorization	
Residential	includes the submission of	implemented: July	request forms	
Treatment	authorization requests for	1 <sup>st</sup> , 2025	and associated	
	services by the Long-Term	2. Tracking and	email	
Finding: The Plan	Care Team once placement	monitoring of ART	correspondence	
did not conduct	is determined for	authorization	2. Service	
concurrent reviews	discharging hospital	requests	Authorization	
to authorize or re-	patients.	implemented: July	Requests	
authorize medically	2. Concurrent review of	1 <sup>st</sup> , 2025	Database	
necessary ART	documentation is	3. Monthly	3. Monthly ART	
services.	completed by the	coordination	meeting	
	Authorizations team to	meeting	minutes	
	determine continued need	implemented:		
	for services.	August 20 <sup>th</sup> , 2025		
	3. Reauthorization request			



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	reviews will coincide with scheduled IDT's quarterly  4. Monthly meetings between the Long Term Care team and Authorizations will be held to monitor current clients on the ART roster, discuss pending/potential reauthorization dates, discuss identification and review needed verification of any new ART facilities of which KernBHRS clients are placed.  5. Initial and Reauthorization Requests records are maintained in the Authorization Request Database.			

Submitted by: KernBHRS Date: 11/24/2025

**Title: Donna Robinson, QID Quality Monitoring Team Supervisor** 

