

Medi-Cal Behavioral Health Corrective Action Plan (CAP)

Mono

Compliance Review Date: 12/23/2024

Corrective Action Plan Fiscal Year: FY 24/25

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
2.1.1 - Finding: The Plan did not ensure to coordinate services furnished to beneficiaries with its managed care organizations.	MCBH will establish a referral tracking system, conduct care coordination sessions to the regularly scheduled quarterly meetings with MCOs, and assign a single point of contact (SPOC) for communication. These actions will improve referral processes, collaboration, and service accessibility while ensuring compliance with contract and regulatory requirements.	<ul style="list-style-type: none">Referral log will be completed by March 28, 2025Include a standing agenda item on referral and care coordination for the next Quarterly Meeting with MCPs and ensure its inclusion in all subsequent meetings; implementation will be no later than by	Referral Tracking <ul style="list-style-type: none">A referral log showing documented referrals, dates, MCO responses, and outcomes. Quarterly Coordination Meetings with MCOs: <ul style="list-style-type: none">Meeting agendas, attendance records, and minutes documenting discussions on referrals and	

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		the end of Q2 2025 (or July 1, 2025)	coordination.	
4.2.1 - The Plan did not ensure its 24/7 Access Line provided required information regarding how to treat a member's urgent condition.	<p>Standardize Urgent Condition Responses</p> <ul style="list-style-type: none"> Implement a scripted response protocol for urgent conditions. Update Policy 22-013 to include clear procedures. Monitor calls to ensure compliance. <p>Enhance Staff Training</p> <ul style="list-style-type: none"> Train all staff involved in call-handling on the scripted response protocol for urgent conditions. Train all staff involved in call-handling on the updated Policy 22-013. Identify needs for further training from test call results. 	<ul style="list-style-type: none"> Staff acknowledgments confirming receipt and understanding of the protocol will be procured by April 21, 2025 Policy 22-013 will be updated with the scripted response protocol by April 21, 2025 Call audit reports showing adherence to the scripted response will be collected beginning with the test calls no later than May 31, 	<p>Scripted Response Protocol Implementation</p> <ul style="list-style-type: none"> Staff acknowledgment forms confirming receipt and understanding of the protocol. <p>Updated Policy 22-013</p> <ul style="list-style-type: none"> Revised Policy 22-013 with clear urgent condition response procedures. committee. <p>Call Monitoring for Compliance</p> <ul style="list-style-type: none"> Call audit reports 	

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		2025. <ul style="list-style-type: none"> • QA review of operator performance will be reflected in the MCBH Performance Evaluation report for the QIC beginning with the April QIC agenda and all ensuing agendas, no later than May 31, 2025. 	showing adherence to the scripted response protocol. <ul style="list-style-type: none"> • Quality assurance review summaries assessing operator performance. 	
5.2.1 - The Plan did not conduct concurrent review of members for psychiatric inpatient hospital	<ul style="list-style-type: none"> • Revise policy 21-005 to include crisis team responsibility during follow-up calls to inpatient facilities to instruct hospital personnel to submit daily treatment records to MCBH. • Designate MCBH QA team to review inpatient tracking 	<ul style="list-style-type: none"> • The revision of policy 21-005, the final draft of the inpatient tracking log, and email communications with partner hospitals will be completed by April 30, 2025. 	<ul style="list-style-type: none"> • Revised policy 21-005 • Inpatient Tracking log • Copies of email correspondences with listed facilities re-establishing 	

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services.	log for admissions, discharges, and concurrent reviews to ensure timely receipt of medical records. <ul style="list-style-type: none"> Re-establish concurrent review expectations as specified in policy 21-005 with partner hospitals at Bakersfield Behavioral, Carson Tahoe Regional, Good Samaritan, and Reno Behavioral Health 		concurrent review expectations.	

Submitted by: Jimmy Lee, MSN, RN

Date: 2/19/2025

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