



May 25, 2023

THIS LETTER SENT VIA EMAIL TO: Jayme.Bottke@tchsa.net

Ms. Jayme Bottke, Interim Director
Tehama County Health Services Agency
PO Box 400
Red Bluff, CA 96080

SUBJECT: ANNUAL COUNTY COMPLIANCE SECTION DMC FINDINGS REPORT

Dear Interim Director Bottke:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Drug Medi-Cal (DMC) Contract operated by Tehama County.

The County Compliance Section (CCS) 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 protocol, discussion with County staff, and supporting documentation provided by the County. Enclosed are the results of Tehama County's Fiscal Year (FY) 2022-23 DMC compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Tehama County is required to submit a Corrective Action Plan (CAP) addressing each compliance deficiency (CD) to the Medi-Cal Behavioral Health – Oversight and Monitoring Division (MCBH-OMD), County/Provider Operations and Monitoring Branch (CPOMB) Liaison by 7/25/2023. Please use the enclosed CAP form to submit the completed CAP and supporting documentation via the MOVEit Secure Managed File Transfer System. For instructions on how to submit to the correct MOVEit folder, email MCBHOmdMonitoring@dhcs.ca.gov.

If you have any questions, please contact me at michael.bivians@dhcs.ca.gov.

Sincerely,

Michael Bivians | Unit Chief

Distribution:

To: Interim Director Bottke,

Cc: Mateo Hernandez, Audits and Investigations, Contract and Enrollment Review Division Chief
Catherine Hicks, Audits and Investigations, Behavioral Health Review Branch Chief
Ayesha Smith, Audits and Investigations, County Compliance Section Chief
Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief
Cindy Berger, Audits and Investigations, Provider Compliance Section Chief
Sergio Lopez, County/Provider Operations and Monitoring Section I Chief
Tony Nguyen, County/Provider Operations and Monitoring Section II Chief
MCBHOMDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch
Alexis Ross, Tehama County Assistance Executive Director
Denise Norwood, Tehama County Drug/Alcohol Director
Melissa Williams, Tehama County Business Operations Supervisor
Brian Emery, Tehama County Drug/Alcohol Supervisor
Melissa Field, Tehama County Compliance Officer

COUNTY REVIEW INFORMATION

County:
Tehama

County Contact Name/Title:
Denise Norwood, Drug/Alcohol Director

County Address:
PO Box 400
Red Bluff, CA 96080

County Phone Number/Email:
(530) 527-7893
Denise.Norwood@tchsa.net

Date of Review:
3/21/2023

Lead CCM Analyst:
Michael Bivians

Assisting CCM Analyst:
N/A

Report Prepared by:
Michael Bivians

Report Approved by:
Ayesha Smith

REVIEW SCOPE

- I. Regulations:
 - a. California Code of Regulations, Title 22, section 51341.1, 51490.1 and 51516.1 – Drug Medi-Cal Substance Use Disorder Services
 - b. California Code of Regulations, Title 9, Division 4: Department of Alcohol and Drug Programs
 - c. Health and Safety Code, Division 10.5, Section 11750 – 11970: Alcohol and Drug Programs
 - d. Welfare and Institutions Code, Division 9, Part 3, Chapter 7, Sections 14000, et seq.; 14100.2, 14021, 14021.51-14021.53, 14021.6, and 14124.20-14124.25, 14184.402, 14059.5: Basic Health Care – Drug Medi-Cal Treatment Program

- II. Program Requirements:
 - a. Fiscal Year (FY) 2021-22 State-County Contract, herein referred to as State County Contract
 - b. Fiscal Year (FY) 2022-23 State-County Contract, herein referred to as State County Contract
 - c. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
 - d. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 3/21/2023. The following individuals were present:

- Representing DHCS:
Michael Bivians, County Compliance Monitoring II (CCM II) Chief
Cristina Whitlock, County/Provider Operations and Monitoring Branch (CPOMB) Liaison
- Representing Tehama County:
Alexis Ross, Assistant Executive Director
Denise Norwood, Drug/Alcohol Director
Melissa Williams, Business Operations Supervisor
Brian Emery, Drug/Alcohol Supervisor
Melissa Field, Compliance Officer

During the Entrance Conference, the following topics were discussed:

- Introductions
- DHCS overview of review process
- Tehama County overview of services provided

Exit Conference:

An Exit Conference was conducted via WebEx on 3/21/2023. The following individuals were present:

- Representing DHCS:
Michael Bivians, CCM II Chief
Cristina Whitlock, CPOMB Liaison

- Representing Tehama County:
Alexis Ross, Assistant Executive Director
Denise Norwood, Drug/Alcohol Director
Melissa Williams, Business Operations Supervisor
Brian Emery, Drug/Alcohol Supervisor
Melissa Field, Compliance Officer

During the Exit Conference, the following topics were discussed:

- Submitting follow-up evidence
- Due date for evidence submission

SUMMARY OF FY 2022-23 COMPLIANCE DEFICIENCIES (CD)

<u>Section</u>	<u>Number of CDs</u>
1.0 Administration	0
2.0 Program Integrity	1
3.0 Perinatal Practice Guidelines	1
4.0 Youth Services	1
5.0 Reporting Requirements	2

Category 2: PROGRAM INTEGRITY

A review of the County's program integrity was conducted to ensure compliance with applicable regulations, and standards. The following DMC deficiency in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 2.3:

DMC Contract, Exhibit A, Attachment I A1, Part II, T, 1-3

T. Discrimination Grievances

1. The Contractor shall designate a Discrimination Grievance Coordinator who is responsible for ensuring compliance with federal and state nondiscrimination requirements and investigating Discrimination Grievances related to any action that would be prohibited by, or out of compliance with, federal or state nondiscrimination law.
2. The Contractor shall adopt Discrimination Grievance procedures that ensure the prompt and equitable resolution of discrimination-related complaints. The Contractor shall not require a beneficiary to file a Discrimination Grievance with the Contractor before filing the grievance directly with DHCS Office of Civil Rights and the U.S. Health and Human Services Office for Civil Rights.
3. The Discrimination Grievance Coordinator shall be available to:
 - a) Answer questions and provide appropriate assistance to the Contractor staff and members regarding the Contractor's state and federal nondiscrimination legal obligations.
 - b) Advise the Contractor about nondiscrimination best practices and accommodating persons with disabilities.
 - c) Investigate and process any Americans with Disabilities Act, Section 504 of the Rehabilitation Act, section 1557 of the Affordable Care Act, and/or Gov. Code section 11135 grievances received by the Contractor.

Findings: The County did not provide evidence of compliance demonstrating the requirements involving Discrimination Grievances are met, specifically:

- Notification that beneficiaries may file a Discrimination Grievance with DHCS' Office of Civil Rights and the U.S. Health and Human Services Office for Civil Rights before filing with the County.

Category 3: PERINATAL PRACTICE GUIDELINES

A review of the County's Perinatal Practice Guidelines was conducted to ensure compliance with applicable regulations, and standards. The following DMC deficiency in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 3.3:

DMC Contract, Exhibit A, Attachment I A1, Part II, I

I. Perinatal Practice Guidelines

The Contractor will follow the guidelines in Document 1G, "Perinatal Practice Guidelines," in developing and implementing perinatal treatment and recovery programs funded under this Exhibit, until new Perinatal Practice Guidelines are established and adopted. No formal amendment of this Contract is required for new guidelines to be incorporated into this Contract.

DMC Contract, Exhibit A, Attachment I A1, Part II, Q

Q. Subcontract Provisions

The Contractor shall include the foregoing Part II general provisions in all of its subcontracts.

Findings: The County did not provide evidence demonstrating that all of the foregoing State County Contract Exhibit A, Attachment I, Part II general provisions are included in all executed subcontracts, including the Perinatal Practice Guidelines provision.

Category 4: YOUTH SERVICES

A review of the County's Youth Services was conducted to ensure compliance with applicable regulations, and standards. The following DMC deficiency in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 4.3:

DMC Contract, Exhibit A, Attachment I A1, Part II, J

J. Youth Treatment Guidelines

The Contractor will follow the guidelines in Document 1V, "Youth Treatment Guidelines," in developing and implementing youth treatment programs funded under this Exhibit, until new Youth Treatment Guidelines are established and adopted. No formal amendment of this Contract is required for new guidelines to be incorporated into this Contract.

DMC Contract, Exhibit A, Attachment I A1, Part II, Q

Q. Subcontract Provisions

The Contractor shall include the foregoing Part II general provisions in all of its subcontracts.

Findings: The County did not provide evidence demonstrating that all of the foregoing State County Contract Exhibit A, Attachment I, Part II general provisions are included in all executed subcontracts, including the Youth Treatment Guidelines (Adolescent Best Practices Guidelines) provision.

Category 5: REPORTING REQUIREMENTS

A review of the County's reporting requirements was conducted to ensure compliance with applicable regulations, and standards. The following DMC deficiencies in regulations, standards, or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 5.1:

DMC Contract, Exhibit A, Attachment I A1, Part III; C, 3-6

3. Electronic submission of CalOMS-Tx data shall be submitted by the Contractor within 45 days from the end of the last day of the report month.
4. The 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. The 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. The 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.

Findings: The County's Open Admissions Report is out of compliance.

CD 5.2:

DMC Contract, Exhibit A, Attachment I A1, Part III; C, 3-6

7. Electronic submission of CalOMS-Tx data shall be submitted by the Contractor within 45 days from the end of the last day of the report month.
8. The 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.
9. The 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.
10. The 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.

Findings: The County's Open Providers Report is out of compliance.

TECHNICAL ASSISTANCE

DHCS' CCM II reviewer made a referral on 3/22/2023 to the DHCS CPOMB County Liaison for technical assistance in the areas identified below:

Reporting Requirements: CalOMS Open Admission reporting of annual updates and Open Provider reporting for Provider No Activity notifications.