

Medi-Cal Behavioral Health Corrective Action Plan (CAP)

LOS ANGELES

Compliance Review Dates: October 7-17, 2025

Corrective Action Plan Fiscal Year: 2025-2026

SMHS

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
4.4.1 Telehealth Requirements The Plan did not ensure that all providers explained and documented all required elements listed in BHIN 23-018 when collecting member telehealth consents prior to the delivery of telehealth services.	1. Update Policy 308.01 Telehealth and Telephone Services 2. Update Chart Review Tool 3. Update the QA/QI Annual Monitoring process to ensure consent requirements are met	October 1, 2026	1. Updated Policy 308.01 Telehealth and Telephone Services 2. Updated Chart Review Tool 3. Updated QA/QI Annual Monitoring report	

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5.2.1 Concurrent Review of Psychiatric Services: Psychiatric Health Facility Services The Plan did not ensure that concurrent review for continued stay of PHF services authorization was based on the individual's medical necessity.	1. Update Policy 400.02 Authorization of Services 2. Update authorization review functionality 3. Assess staffing resources and hire to support compliance with authorization review timeframes	October 1, 2026	1. Updated Policy 400.02 Authorization of Services 2. Documentation of EHR system changes supporting the transition from weekly auto-approval to daily authorization decisions 3. Documentation of additional personnel	
5.2.2 Concurrent Review of Psychiatric Services: Fee-for-Service (FFS)/Medi-Cal Hospitals	1. Update Policy 400.02 Authorization of Services 2. Update authorization review functionality 3. Assess staffing resources and hire to	October 1, 2026	1. Updated Policy 400.02 Authorization of Services 2. Screenshots or documentation of authorization	

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The Plan did not issue a decision on an FFS hospital's continued-stay authorization request within 24 hours of receipt of the request.	support compliance with authorization review timeframes		review/system enhancements (RealTime Receipt) 3. Documentation of additional personnel	
5.2.3 Concurrent Review of Psychiatric Services: Short-Doyle/Medi-Cal Hospital The Plan did not establish a concurrent review authorization process for Short-Doyle hospitals.	1. Update Policy 400.02 Authorization of Services 2. Update authorization review functionality	October 1, 2026	1. Updated Policy 400.02 Authorization of Services 2. Documentation of concurrent review processes	
6.1.1 Grievance Acknowledgment Letters	1. Update electronic grievance tracking functionality	October 1, 2026	1. Grievance tracking documentation	

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The Plan did not ensure that written letters of acknowledgment was provided to members within five calendar days of receipt.				
6.2.1 Grievance Tracking The Plan did not ensure grievances were logged within one working day of the date of receipt of the grievance.	1. Update Policy 200.04 Beneficiary Problem Resolution Process 2. Update electronic grievance tracking functionality	October 1, 2026	1. Updated Policy 200.04 Beneficiary Problem Resolution Process 2. Grievance tracking documentation	
6.3.1 Resolution Timeliness and NOABD Notifications The Plan did not ensure that	1. Update electronic grievance tracking	October 1, 2026	1. Updated electronic health record system tracking and grievance	

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grievances were resolved within 90 calendar days from the date received and failed to provide the members with a NOABD when failure to act within timeframes.			aging functionality, including 91+ day tracking features	

Submitted by: Jennifer Hallman

Date: 6/26/2026

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