



October 24, 2023

THIS LETTER SENT VIA EMAIL TO: Skennelly@buttecounty.net

Mr. Scott Kennelly, LCSW, Director
Butte County Department of Behavioral Health
3217 Cohasset Rd.
Chico, CA 95973

SUBJECT: ANNUAL COUNTY COMPLIANCE SECTION DMC FINDINGS REPORT

Dear Director Kennelly:

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

The County Compliance Section (CCS) within DHCS' Audits and Investigations (A&I) conducted a review of the County's compliance with Federal and State regulations, program requirements and contractual obligations based on supporting documentation and interviews with County staff. Enclosed are the results of Butte County's Fiscal Year (FY) 2023-24 DMC compliance review. The report identifies deficiencies, advisory recommendations, and referrals for technical assistance.

Butte County is required to submit a Corrective Action Plan (CAP) addressing each compliance deficiency (CD) noted to DHCS' Medi-Cal Behavioral Health – Oversight and Monitoring Division (MCBH-OMD), County/Provider Operations and Monitoring Branch (CPOMB) Liaison by 12/26/2023. 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: Director Kennelly,

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
Jennifer Stofa, Butte County Assistant Director Clinical Services

COUNTY REVIEW INFORMATION

County:

Butte County

County Contact Name/Title:

Goldie Kretzschmar, Quality Management Administrative Analyst

County Address:

3217 Cohasset Road
Chico, CA 95973

County Phone Number/Email:

Gkretzschmar@buttecounty.net
530-891-2850

Date of Review:

9/13/2023

Lead CCM Analyst:

Katrina Beedy

Assisting CCM Analyst:

Michael Bivians

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) 2022-23 DMC Intergovernmental Agreement (IA)
 - b. State of California *Adolescent Best Practices Guidelines October 2020*
 - c. DHCS' *Perinatal Practice Guidelines FY 2018-19*
 - d. DHCS' *Minimum Quality Drug Treatment Standards (Document 2F(a))*
 - e. National Culturally and Linguistically Appropriate Services (CLAS)
 - f. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
 - g. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 9/13/2023. The following individuals were present:

- Representing DHCS:
Katrina Beedy, County Compliance Monitoring II (CCM II) Analyst
Michael Bivians, County Compliance Monitoring II Chief
Mary Shanahan, County/Provider Operations and Monitoring Branch (CPOMB) Liaison
- Representing Butte County:
Scott Kennelly, Director
Jennifer Stofa, Assistant Director
Sam Casale, Sr. Program Manager of MHSA, PIO and SPRE
Anna Thomas, Quality Management Clinician
Jacob Read, Sr. Program Manager, Clinical Services – Substance Use Treatment & Recovery Services
Emily Swearingen, Behavioral Health Education Specialist Supervisor
Julia Arenas, Behavioral Health Education Specialist Supervisor
Lauren Brown, Quality Management Clinician
Goldie Kretschmar, Quality Management Administrative Analyst
Jen Skinner, Behavioral Health Education Specialist Supervisor

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of review process
- Overview of services provided

Exit Conference:

An Exit Conference was conducted via WebEx on 9/13/2023. The following individuals were present:

- Representing DHCS:
Katrina Beedy, CCM II Analyst
Michael Bivians, CCM II Chief
Mary Shanahan, CPOMB Liaison

- Representing Butte County:
Scott Kennelly, Director
Jennifer Stofa, Assistant Director Clinical Services
Sam Casale, Sr. Program Manager of MHSA, PIO and SPRE
Anna Thomas, Quality Management Clinician
Jacob Read, Sr. Program Manager, Clinical Services – Substance Use Treatment & Recovery Services
Emily Swearingen, Behavioral Health Education Specialist Supervisor
Julia Arenas, Behavioral Health Education Specialist Supervisor
Lauren Brown, Quality Management Clinician
Goldie Kretzschmar, Quality Management Administrative Analyst
Jen Skinner, Behavioral Health Education Specialist Supervisor

During the Exit Conference, the following topics were discussed:

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

SUMMARY OF FY 2023-24 COMPLIANCE DEFICIENCIES (CD)

<u>Category</u>	<u>Number of CDs</u>
1.0 Availability of DMC Services	0
2.0 Care Coordination	0
3.0 Quality Assurance and Performance Improvement	2
4.0 Access and Information Requirements	1
5.0 Coverage and Authorization of Services	1
6.0 Beneficiary Rights and Protections	1
7.0 Program Integrity	0

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the State County Contract, Exhibit A, Attachment I A1, Part I, Section 4, B, 6 a-b each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.

Please provide the following within the completed FY 2023-24 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 CPOMB analyst will monitor progress of the CAP completion.

Category 3: QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT

A review of the County's Quality Assurance and Performance Improvement program was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiencies were identified:

COMPLIANCE DEFICIENCIES:

CD 3.1.4:

DMC Contract, Exhibit A, Attachment I, Part I, Section 4 Monitoring, B, 5, a

The Contractor shall notify DHCS' Data Management, Reporting, and Evaluation Section by email at DHCSMPF@dhcs.ca.gov of the termination of any contract with a subcontractor, and the basis for termination of the contract, within five business days of the termination.

Findings: The County did not provide evidence it notifies DHCS by email at DHCSMPF@dhcs.ca.gov regarding the termination of any contract with a subcontractor, and the basis for termination of the contract, within five business days of the termination.

CD 3.2.3:

DMC Contract, Exhibit A, Attachment I, Part I, Section 3 DMC Certification and Continued Certification, A, 4, c

The Contractor's subcontracts shall require that providers comply with the following regulations and guidelines, including, but not limited to: Minimum Quality Treatment Standards, (Document 2F(a))

Minimum Quality Drug Treatment Standards Document 2F(a), A, 3 a-j

Written code of conduct for employees and volunteers/interns shall be established which addresses at least the following:

- a. Use of drugs and/or alcohol;
- b. Prohibition of social/business relationship with beneficiary's or their family members

- for personal gain;
- c. Prohibition of sexual contact with beneficiary's;
 - d. Conflict of interest;
 - e. Providing services beyond scope;
 - f. Discrimination against beneficiary's or staff;
 - g. Verbally, physically, or sexually harassing, threatening, or abusing beneficiary's, family members or other staff;
 - h. Protection beneficiary confidentiality;
 - i. The elements found in the code of conduct(s) for the certifying organization(s) the program's counselors are certified under; and
 - j. Cooperate with complaint investigations.

Findings: The County did not provide evidence it ensures staff sign a Code of Conduct that includes all required elements according to the Minimum Quality Drug Treatment Standards. The following required elements are missing, specifically:

- Use of drugs and/or alcohol.
- Prohibition of social/business relationship with clients or their family members for personal gain.
- Prohibition of sexual contact with beneficiaries.
- Providing services beyond scope.
- The elements found in the code of conduct(s) for the certifying organization(s) the program's counselors are certified under.

Category 4: ACCESS AND INFORMATION REQUIREMENTS

A review of the County's Access and Information Requirements was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiency was identified:

COMPLIANCE DEFICIENCY:

CD 4.1.1:

DMC Contract, Exhibit A, Attachment I, Part II General, S

Nondiscrimination Notice, Nondiscrimination Statement, and Taglines (45 C.F.R. § 92.8)

1. The Contractor shall post a DHCS-approved nondiscrimination notice and language taglines in at least the top 16 non-English languages in the State (as determined by DHCS), as well as large print, explaining the availability of free language assistance services, including written translation and oral interpretation to understand the information provided, and the toll-free and TTY/TOY telephone number of the Contractor's member/customer service unit, as follows:
 - a) In all conspicuous physical locations where the Contractor interacts with the public.
 - b) In a conspicuous location on the Contractor's website that is accessible on the Contractor's home page, and in a manner that allows beneficiaries and prospective beneficiaries to easily locate the information.
 - c) In all significant communications and significant publications targeted to beneficiaries, enrollees, applicants, and members of the public, except for significant publications and significant communications that are small-sized, such as postcards and tri-fold brochures.
2. The Contractor shall post a DHCS-approved nondiscrimination statement and language taglines in at least the top two non-English languages in the State (as determined by DHCS), explaining the availability of free language assistance services, and the toll-free and TTY/TOY telephone number of the Contractor's member/customer service unit, as follows:
 - a) In all significant publications and significant communications that are small-sized, such as postcards and tri-fold brochures.
3. The Contractor's nondiscrimination notice, nondiscrimination statement, and language taglines must be in a conspicuously visible font size no smaller than 12 points. Any large print tagline required must be in a font size no smaller than 18 point and must include information on how to request auxiliary aids and services,

including the provision of the materials in alternative formats.

Findings: The County did not provide evidence it posted a DHCS-approved nondiscrimination notice and language taglines in at least the top 16 non-English languages in the State, as well as large print, explaining the availability of free language assistance services, including written translation and oral interpretation to understand the information provided, and the toll-free and TTY/TOY telephone number of the Contractor's member/customer service unit in all conspicuous physical locations where the Contractor interacts with the public.

Category 5: COVERAGE AND AUTHORIZATION OF SERVICES

A review of the County's Coverage and Authorization of Services was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiency was identified:

COMPLIANCE DEFICIENCY:

CD 5.2.5:

BHIN 22-070

NOABD "Your Rights" Attachment

The "Your Rights" attachment is a new form that informs beneficiaries of critical appeal and State hearing rights. There are two types of "Your Rights" attachments. One accompanies the NOABD and the other accompanies the NAR. These attachments must be sent to beneficiaries with each NOABD or NAR.

Effective January 1, 2023, Counties shall utilize the revised NOABD templates and corresponding "Your Rights" attachments included in this BHIN, or the electronic equivalents of these templates and attachments generated from the County's Electronic Health Record System. The corresponding "Your Rights" attachments must be included when issuing a NOABD to a beneficiary. Counties shall not make any changes to the NOABD templates or "Your Rights" attachments without prior review and approval from DHCS, except to insert information specific to beneficiaries as required.

The "NOABD Your Rights" attachment provides beneficiaries with the following required information pertaining to NOABD:

1. The beneficiary's or provider's right to request an internal appeal with the County within 60 calendar days from the date on the NOABD;
 2. The beneficiary's right to request a State hearing only after filing an appeal with the Plan and receiving a notice that the ABD has been upheld;
 3. The beneficiary's right to request a State hearing if the County fails to send a resolution notice in response to the appeal within the required timeframe;
 4. Procedures for exercising the beneficiary's rights to request an appeal;
 5. Circumstances under which an expedited review is available and how to request it;
- and,

6. The beneficiary's right to have benefits continue pending resolution of the appeal and how to request continuation of benefits.

Findings: The County did not provide evidence it utilizes the revised NOABD templates and corresponding "Your Rights" attachments included in BHIN 22-070.

Category 6: BENEFICIARY RIGHTS AND PROTECTIONS

A review of the County's Beneficiary Rights and Protections was conducted to ensure compliance with applicable Federal and State regulations, program requirements and contractual obligations. The following deficiency was identified:

COMPLIANCE DEFICIENCY:

CD 6.4.14:

BHIN 22-070

The NAR "Your Rights" attachment provides beneficiaries with the following required information pertaining to NAR:

1. The beneficiary's right to request a State hearing no later than 120 calendar days from the date of the Plan's written appeal resolution and instructions on how to request a State hearing; and,
2. The beneficiary's right to request and receive continuation of benefits while the State hearing is pending and instructions on how to request continuation of benefits, including the timeframe in which the request shall be made (i.e., within ten days from the date the letter was post-marked or delivered to the beneficiary).

Counties shall use the appropriate NAR form and "Your Rights" attachments contained in this BHIN to notify beneficiaries of their rights.

Findings: The County did not provide evidence it utilizes the revised NAR templates and corresponding "Your Rights" attachments included in BHIN 22-070.

TECHNICAL ASSISTANCE

DHCS' CCM II Analyst will make referrals to the CPOMB County Liaison for training and/or technical assistance in the areas identified below:

Quality Assurance and Performance Improvement: Requirements regarding the reporting of capacity issues to DHCS for providers not receiving DMC or SABG funding.