

DHCS AUDITS AND INVESTIGATIONS
CONTRACT AND ENROLLMENT REVIEW DIVISION
SAN DIEGO SECTION
**REPORT ON THE SUBSTANCE USE DISORDER
(SUD) AUDIT OF MADERA COUNTY
BEHAVIORAL HEALTH PLAN
FISCAL YEAR 2024-25**

Contract Number: 23-30095

Contract Type: Drug Medi-Cal (DMC)

Audit Period: July 1 , 2023 — June 30, 2024

Dates of Audit: October 29, 2024 — November 8 , 2024

Report Issued: March 3 , 2025

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I. INTRODUCTION

Madera County Behavioral Health Plan (Plan) is governed by a Board of Supervisors and contracts with the Department of Health Care Services (DHCS) for the purpose of providing substance use disorder services to county residents.

Madera County is located in the Central Valley of California. The Plan provides services within the unincorporated county and in three cities: Madera, Chowchilla, and Oakhurst.

As of November 2024, the Plan had a total of 2,232 members receiving services and a total of 80 active providers.

II. EXECUTIVE SUMMARY

This report presents the audit findings of the DHCS audit for the period of July 1, 2023, through June 30, 2024. The audit was conducted from October 29, 2024, through November 8, 2024. The audit consisted of documentation review and interviews with the Plan's representatives.

An Exit Conference with the Plan was held on February 12, 2025. Prior to the Exit Conference, the Plan received a report of the preliminary findings. The report reflects the evaluation of all relevant information during the audit. There were no areas of noncompliance found in this review.

The audit evaluated five categories of performance: Availability of Drug Medi-Cal (DMC) Services, Quality Assurance and Performance Improvement, Access and Information Requirements, Beneficiary Rights and Protection, and Program Integrity.

The summary of the findings by category follows:

Category 1 – Availability of Drug Medi-Cal Services

There were no findings noted for this category during the audit period.

Category 3 – Quality Assurance and Performance Improvement

There were no findings noted for this category during the audit period.

Category 4 – Access and Information Requirements

There were no findings noted for this category during the audit period.

Category 6 – Beneficiary Rights and Protection

There were no findings noted for this category during the audit period.

Category 7 – Program Integrity

There were no findings noted for this category during the audit period.

III. SCOPE/AUDIT PROCEDURES

SCOPE

The DHCS, Contract and Enrollment Review Division conducted the audit to ascertain that medically necessary services provided to Plan members comply with federal and state laws, Medi-Cal regulations and guidelines, and the State's DMC Contract.

PROCEDURE

DHCS conducted an audit of the Plan from October 29, 2024, through November 8, 2024, for the audit period of July 1, 2023, through June 30, 2024. The audit included a review of the Plan's policies for providing services, procedures to implement these policies, and the process to determine whether these policies were effective.

Documents were reviewed and interviews were conducted with Plan representatives.

No verification studies were conducted for the audit review.