

**DHCS REPORT ON THE SUBSTANCE USE
DISORDER (SUD) AUDIT OF:
Monterey County Mental Health Plan
2024**

DEPARTMENT OF HEALTH CARE SERVICES
AUDITS AND INVESTIGATIONS
CONTRACT AND ENROLLMENT REVIEW DIVISION
BEHAVIORAL HEALTH REVIEW BRANCH

REPORT ON THE SUBSTANCE USE DISORDER (SUD) AUDIT OF

Monterey County Behavioral Health Services

2024

Contract Number: 20-10188
Drug Medi-Cal Organized Delivery
System (DMC-ODS)

Audit Period: July 1, 2022
through
June 30, 2023

Dates of Audit: April 16, 2024
through
April 26, 2024

Report Issued: August 21, 2024

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I. INTRODUCTION

Monterey County Behavioral Health Services (Plan) provides a variety of Drug Medi-Cal (DMC) services for county residents. The Plan is governed by a Board of Supervisors and contracts with the Department of Health Care Services (DHCS) for the purpose of providing DMC-ODS services for substance use treatment.

The Plan is located in Central Coast California just south of the San Francisco Bay Area. Salinas Valley extends through the heart of the county, making Monterey the third largest agricultural county in California, covering an area of 3,771 square miles.

As of June 30, 2023, the Plan had 765 Medi-Cal beneficiaries receiving DMC-ODS services and had a total of 14 active providers.

II. EXECUTIVE SUMMARY

This report presents the findings of the DHCS audit of the Plan's DMC-ODS program for the period of July 1, 2022, through June 30, 2023. The audit was conducted from April 16, 2024, through April 26, 2024. The audit consisted of document review, and interviews with Plan representatives.

An Exit Conference with the Plan was held on, August 5, 2024. The audit evaluated three categories of performance: Availability of DMC-ODS Services, Care Coordination and Quality Assurance and Performance Improvement, and Access and Information Requirements.

The prior DHCS compliance report issued on July 3, 2023, (review period July 1, 2021, through June 30, 2022) identified deficiencies incorporated in the Corrective Action Plan. This year's audit included review of documents to determine implementation and effectiveness of the Plan's corrective actions.

The summary of the findings by category follows:

Category 1 – Availability of DMC-ODS Services

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

Category 2 – Care Coordination

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.

III. SCOPE/AUDIT PROCEDURES

SCOPE

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

PROCEDURE

DHCS conducted an audit of the Plan from April 16, 2024, through April 26, 2024, for the audit period of July 1, 2022, through June 30, 2023. The audit included a review of the Plan's Contract with DHCS, its policies and procedures for providing services, evidence of procedures used to implement the policies, and verification studies of the implementation and effectiveness of the policies. Documents were reviewed and interviews were conducted with Plan representatives.

The following verification study was conducted for this audit.

Category 1 – Availability of DMC-ODS Services

No verification study was conducted.

Category 2 – Care Coordination

No verification study was conducted.

Category 3 – Quality Assurance and Performance Improvement

No verification study was conducted.

Category 4 – Access and Information Requirements

Access Line Test Calls: Two test calls requesting information about DMC-ODS were made to the Plan's statewide 24/7 toll-free number to confirm compliance with contractual requirements.