

State of California—Health and Human Services Agency Department of Health Care Services



September 3, 2020

Sent via e-mail to: pgreene@co.shasta.ca.us

Paige Greene, Branch Director Health and Human Services Agency 2640 Breslauer Way Redding, CA 96001

SUBJECT: Annual County Compliance Unit Report

Dear Director Greene,

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Shasta County.

The County Compliance Unit (CCU) 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 instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Shasta County's State Fiscal Year 2019-20 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Shasta County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 10/5/2020. Please use the enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions, please contact me.at Emanuel.hernandez@dhcs.ca.gov Sincerely,

Emanuel Hernandez (916) 713-8667

> Audits and Investigations Division Medical Review Branch Behavioral Health Compliance Section County Compliance Unit 1500 Capitol Ave., MS 2305 Sacramento, CA 95814 http://www.dhcs.ca.gov

Distribution:

To: Director Greene,

CC: Mateo Hernandez, Audits and Investigations, Medical Review Branch Acting Chief Lanette Castleman, Audits and Investigations, Behavioral Health Compliance Section Chief Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief Janet Rudnick, Audits and Investigations, Provider Compliance Unit Chief Tracie Walker, Community Services Division, Community Support Branch Chief Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief Katrina Cox, Community Services Division, Prevention Services Section Chief Jessica Fielding, Community Services Division, Family Services Unit Chief Angelina Azevedo, Community Services Division, Prevention Services Unit Chief Denise Galvez, Community Services Division, Youth Services Section Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County and Provider Monitoring Unit Katie Cassidy, Shasta County Adult Services Program Manager

Lead CCU Analyst:	Date of Review:
Emanuel Hernandez	July 2020
Assisting CCU Analyst(s):	
N/A	
County:	County Address:
Shasta	2640 Breslauer Way
	Redding, CA 96001
County Contact Name/Title:	County Phone Number/Email:
Katie Čassidy, Shasta County Adult	530-225-5900
Services Program Manager	kcassidy@co.shasta.ca.us
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Report Prepared by:	Report Approved by:
Emanuel Hernandez	Lanette Castleman

REVIEW SCOPE

- I. Regulations:
 - a. California Code of Regulations, Title 22, section 51341.1 Drug Medi-Cal Substance Use Disorder Services
 - b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
 - c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
 - d. Health and Safety Code, Division 10.5, Section 11750 11970: Alcohol and Drug Programs
- II. Program Requirements:
 - State Fiscal Year (SFY) 2019-20 State County Contract, herein referred to as State County Contract
 - b. State of California Youth Treatment Guidelines Revised August 2002
 - c. DHCS Perinatal Practice Guidelines FY 2018-19
 - d. National Culturally and Linguistically Appropriate Services (CLAS)
 - e. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices

SUMMARY OF SFY 2019-20 COMPLIANCE DEFICIENCIES (CD)

Section: Number of CD's:

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1.0 Administration	2
2.0 SABG Monitoring	1
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	0
5.0 Primary Prevention	0
6.0 Cultural Competence	1
7.0 CalOMS and DATAR	3
8.0 Privacy and Information Security	0
9.0 Fiscal	0
10.0 Previous CAP	0

CORRECTIVE ACTION PLAN

Pursuant to the State County Contract, Exhibit A, Attachment I A2, Part I, Section 3, B, 5-8 each compliance deficiency (CD) identified must be addressed via a Corrective Action Plan (CAP). The CAP is due within thirty (30) calendar days of the date of this monitoring report.

Please provide the following within the completed SFY 2019-20 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 PMFS analyst will monitor progress of the CAP completion.

1.0 ADMINISTRATION

A review of the County's Organizational Chart, subcontracted contracts, and policies and procedures was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards, or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 1.6:

SABG State-County Contract, Exhibit A, Attachment I A2, Part I, Section 1, B, 3, b

- 3. As a subrecipient, the Contractor shall:
 - b. Comply with federal statutes, regulations, including 45 CFR Part 75, and terms and conditions of the SABG grant.

45 CFR 75.329(f) (1-4)

- (f) Procurement by noncompetitive proposals. Procurement by noncompetitive proposals is procurement through solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:
 - (1) The item is available only from a single source;
 - (2) The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;
 - (3) The HHS awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; or
 - (4) After solicitation of a number of sources, competition is determined inadequate.

45 CFR 75.333(b) (1)

- (b) The non-Federal entity must make available upon request, for the HHS awarding agency or pass-through entity pre-procurement review, procurement documents, such as requests for proposals or invitations for bids, or independent cost estimates, when:
 - (1) The non-Federal entity's procurement procedures or operation fails to comply with the procurement standards in this part;

Findings: The County did not demonstrate County compliance with procurement by noncompetitive proposal requirements for new service providers.

CD 1.8:

S. Byrd Anti-Lobbying Amendment (31 USC 1352)
Contractor certifies that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 USC 1352. Contractor shall also disclose to DHCS any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

SABG State-County Contract Exhibit A, Attachment I A2, Part II, Y

Y. Subcontract Provisions Contractor shall include all of the foregoing Part II general provisions in all of its subcontracts.

Findings: The County did not demonstrate all of the foregoing SABG State-County Contract Exhibit A, Attachment I A2, Part II general provisions are included in all executed subcontracts, including the Byrd Anti-Lobbying Amendment.

2.0 SABG MONITORING

The following deficiency in the SABG monitoring requirements was identified:

COMPLIANCE DEFICIENCY:

CD 2.12:

SABG State-County Contract Exhibit A, Attachment I A2, Part I, Section 3, A, 1, e

- 1. Contractor's performance under this Exhibit A, Attachment I, Part I, shall be monitored by DHCS during the term of this Contract.
 - e. Whether the Contractor conducted annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. Contractor shall submit copy of its monitoring and audit reports to DHCS within two weeks of issuance. Reports shall be sent by secure, encrypted email to:

SUDCountyReports@dhcs.ca.gov or

Substance Use Disorder-Program, Policy, and Fiscal Division Performance Management Branch Department of Health Care Services PO Box 997413, MS-2627 Sacramento. CA 95899-7413

Findings: The County did not monitor all county and subcontracted providers for compliance with SABG programmatic and fiscal requirements. Specifically:

- For SFY 2018-2019 the County monitored six (6) of nine (9) County and subcontracted providers for SABG programmatic and fiscal requirements, and submitted reports of these monitoring reviews to DHCS.
- The County submitted only one (1) of six (6) SABG programmatic and fiscal monitoring reports secure and encrypted.
- None of the six (6) reports were submitted to DHCS within two weeks of report issuance.

6.0 CULTURAL COMPETENCE

The following deficiency in Cultural Competence regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 6.32:

SABG State-County Contract Exhibit A, Attachment I A2, Part II, O

O. Tribal Communities and Organizations

Contractor shall regularly assess (e.g. review population information available through Census, compare to information obtained in the California Outcome Measurement System for Treatment (CalOMS-Tx) to determine whether the population is being reached, survey Tribal representatives for insight in potential barriers), the substance use service needs of the American Indian/Alaskan Native (Al/AN) population within the County geographic area, and shall engage in regular and meaningful consultation and collaboration with elected officials of the tribe, Rancheria, or their designee for the purpose of identifying issues/barriers to service delivery and improvement of the quality, effectiveness, and accessibility of services available to Al/NA communities within the County.

Finding: The County did not demonstrate efforts to engage in regular and meaningful consultation and collaboration with Tribal or Rancheria officials of the American Indian/Alaskan Native communities within the County.

7.0 CALIFORNIA OUTCOMES MEASUREMENT SYSTEM TREATMENT (CaIOMS-Tx) AND DRUG AND ALCOHOL TREATMENT ACCESS REPORT (DATAR)

The following deficiencies in CalOMS-TX and DATAR regulations, standards, or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 7.34.a:

State-County Contract, Exhibit A, Attachment I A2, Part III, B, 3-6

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

State-County Contract, Exhibit A, Attachment I A2, Part III, E, 3

3. The Contractor shall ensure that all DATAR reports are submitted by either Contractoroperated treatment services and by each subcontracted treatment provider to DHCS by the 10th of the month following the report activity month.

Finding: The County's Open Provider report is not current.

State-County Contract, Exhibit A, Attachment I A2, Part III, B, 3-6

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

State-County Contract, Exhibit A, Attachment I A2, Part III, E, 3

3. The Contractor shall ensure that all DATAR reports are submitted by either Contractoroperated treatment services and by each subcontracted treatment provider to DHCS by the 10th of the month following the report activity month.

Finding: The County's Open Admission report is not current.

CD 7.34.c:

State-County Contract, Exhibit A, Attachment I A2, Part III, B, 3-6

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

State-County Contract, Exhibit A, Attachment I A2, Part III, E, 3

3. The Contractor shall ensure that all DATAR reports are submitted by either Contractoroperated treatment services and by each subcontracted treatment provider to DHCS by the 10th of the month following the report activity month.

Finding: The County's DATAR report is not current.

TECHNICAL ASSISTANCE

Shasta County did not request any technical assistance for SFY 2019-20