

Medi-Cal Behavioral Health Corrective Action Plan (CAP)

Tuolumne

Compliance Review Date: 2/21/2023

Corrective Action Plan Fiscal Year: FY 2022-2023

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
SMHS				
<p><u>Question 1.2.7</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the BHIN No. 21-073 and Medi-Cal Manual for Intensive Care Coordination (ICC), Intensive Home-Based Services (IHBS), and Therapeutic Foster Care (TFC) Services for Medi-Cal Beneficiaries,</p>	<p>Tuolumne County will release a Request for Proposal (RFP) for Therapeutic Foster Care. From this RFP Tuolumne will evaluate all proposals, engage in a contract and begin delivering TFC services.</p>	<p>1/1/2024</p>	<p><u>TFC RFP Bids</u> – this screenshot is from OpenGov, the website used by Tuolumne County to administer RFPs. This screenshot shows no bids were received for the published TFC RFP.</p> <p><u>TFC RFP Packet</u> – this is the TFC RFP packet that was published that includes information about TFC services, protentional contract information, and</p>	



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<p>3rd Edition, January 2018. The MHP must provide TFC services to all children and youth who meet beneficiary access criteria for SMHS as medically necessary.</p> <p>DHCS deems the MHP out of compliance with the BHIN No. 21-073 and Medi-Cal Manual for Intensive Care Coordination (ICC), Intensive Home-Based Services (IHBS), and Therapeutic Foster Care Services (TFC) for Medi-Cal Beneficiaries, 3rd Edition, January 2018.</p>			<p>important dates of the RFP process.</p> <p><u>TFC RFP Questions</u> – this screenshot is from OpenGov, the website used by Tuolumne County to administer RFPs. This screenshot shows no questions were received for the published TFC RFP.</p> <p><u>TFC RFP Union Democrat Ad</u> – this is a screenshot of the website ad and a snippet of the print ad published in the local newspaper, Union Democrat, that was utilized to advertise the TFC RFP.</p>	



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Repeat deficiency Yes				
<p><u>Question 1.4.4</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with California Code of Regulations, title 9, section 1810, subdivision 435 and MHP contract, exhibit A, attachment 8, section 8(D). The MHP must certify, or use another MHP's certification documents to certify, the organizational providers that subcontract with the MHP to provide SMHS, in accordance with</p>	<p>Tuolumne County will resolve the two overdue certifications and submit evidence showing the resolution.</p>	<p>11/1/2023</p>	<p><u>Creative Alternatives Certification</u> – this is an email where Tuolumne County received the recertification documents for Creative Alternatives. The recertification is currently being processed by Department of Health Care Services and Tuolumne is awaiting final documentation.</p> <p><u>Chamberlain Youth Services - Inactive</u> – this document shows Tuolumne County as having Chamberlain's Youth Services as 'Inactive' in the Provider Information Management System as</p>	



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<p>California Code of Regulations, title 9, section 1810, subsection 435.</p> <p>DHCS deems the MHP out of compliance with California Code of Regulations, title 9, section 1810, subdivision 435 and MHP contract, exhibit A, attachment 8, section 8(D).</p>			<p>well as the completed Provider File Update form and its emailed submission to DHCS.</p>	
<p><u>Question 3.2.2</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the MHP contract, exhibit A, attachment 5, section 2(a)(1). The MHP must ensure the Quality</p>	<p>Tuolumne County will update the FY 23-24 QAPI to reflect all monitoring actives for grievances, appeals, etc. and collection of data all required elements. The work plan will be reviewed quarterly in Quality Improvement led meetings to help monitor the service delivery system and influence clinical decisions being made.</p>	<p>1/1/2024</p>	<p><u>Quality Assurance Plan (QAPI) FY 23-24</u> – the FY 23-24 QAPI includes a section for monitoring activities that include review beneficiary grievances, appeals, and expedited appeals, fair hearings, provider appeals, and clinical records review. This monitoring section can</p>	

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<p>Assessment and Performance Improvement (QAPI) Work Plan includes evidence of the monitoring activities including, but not limited to, review of beneficiary grievances, appeals, expedited appeals, fair hearings, expedited fair hearings, provider appeals, and clinical records review.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A, attachment 5, section 2(a)(1).</p>			<p>be found in Section 3, Monitoring Beneficiary Satisfaction, on page 11.</p> <p><u>QIC 9.2023 Minutes</u> – these are the Quality Improvement Council minutes from September 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by administrative and clinical staff ranging from leadership to line staff, community partners, other county departments, and stakeholders.</p> <p><u>QM Committee Minutes 8.2023</u> – these are the</p>	

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			<p>Quality Management minutes from August 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by administrative and clinical staff ranging from leadership to line staff.</p> <p><u>QAPI Online Posting</u> – this is the screenshots of the FY 23-24 QAPI being posted for viewing on the Tuolumne County Behavioral Health website.</p>	
<p><u>Question 3.2.3</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the</p>	<p>Tuolumne County will update the FY 23-24 QAPI to reflect all monitoring, activities, and areas for discussion for PIPS. Tuolumne will ensure collection of data all required elements will continue their</p>	<p>1/1/2024</p>	<p><u>Quality Assurance Plan (QAPI) FY 23-24</u> – the FY 23-24 QAPI includes a section for monitoring activities that include performance improvement projects</p>	

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<p>MHP contract, exhibit A, attachment 5, section 2(a)(2). The MHP must ensure the Quality Assessment and Performance Improvement (QAPI) Work Plan includes evidence that Quality Improvement activities, including performance improvement projects, have contributed to meaningful improvement in clinical care and beneficiary service.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A,</p>	<p>monitoring of PIPs. PIPs will be reviewed, and updates will be given quarterly in Quality Improvement led meetings to help monitor the PIP.</p>		<p>that have contributed to meaningful improvement in clinical and beneficiary service. This monitoring section can be found in Section 9, Performance Improvement Projects, on page 17.</p> <p><u>QIC 9.2023 Minutes</u> – these are the Quality Improvement Council minutes from September 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by administrative and clinical staff ranging from leadership to line staff, community partners, other county departments, and stakeholders.</p>	

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attachment 5, section 2(a)(2).			<p><u>QM Committee Minutes 8.2023</u> – these are the Quality Management minutes from August 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by administrative and clinical staff ranging from leadership to line staff.</p> <p><u>QAPI Online Posting</u> – this is the screenshots of the FY 23-24 QAPI being posted for viewing on the Tuolumne County Behavioral Health website.</p>	
<p><u>Question 3.2.4</u></p> <p>The MHP did not</p>	<p>Tuolumne County will update the FY 23-24 QAPI to reflect a description of completed</p>	<p>1/1/2024</p>	<p><u>Quality Assurance Plan (QAPI) FY 23-24</u> – the FY 23-24 QAPI includes</p>	



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<p>furnish evidence to demonstrate compliance with the MHP contract, exhibit A, attachment 5, section 2(a)(3). The MHP must ensure the Quality Assessment and Performance Improvement (QAPI) Work Plan includes a description of completed and in-process Quality Assessment and Performance Improvement activities including the below requirements:</p> <ol style="list-style-type: none"> 1. Monitoring efforts for previously identified issues, 	<p>and in-process Quality Assessment and Performance Improvement activities including the below requirements:</p> <ol style="list-style-type: none"> 1. Monitoring efforts for previously identified issues, including tracking issues over time. 2. Objectives, scope, and planned QAPI activities for each year. 3. Targeted areas of improvement or change in service delivery or program design. <p>Tuolumne County will continue their monitoring of activities and collecting of data. The work plan data and activities will then be reviewed quarterly in Quality Improvement led meetings to help monitor the service delivery system and influence clinical decisions being made.</p>		<p>a section for monitoring activities that include activities including monitoring efforts for previously identified issues and targeted areas of improvement or change in service delivery or program design. This monitoring efforts for previously identified issues can be found on pages 10, 13, and 17. These sections include monitoring the toll-free 24/7 telephone line in which Tuolumne County Behavioral Health received a Corrective Action Plan item from the FY 22-23 Triennial Audit. These sections include monitoring medication practices in which Tuolumne County Behavioral Health has received an External</p>	

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<p>including tracking issues over time.</p> <p>2. Objectives, scope, and planned QAPI activities for each year.</p> <p>3. Targeted areas of improvement or change in service delivery or program design.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A, attachment 5, section 2(a)(3).</p>			<p>Quality Review Organization (EQRO) Audit feedback on. These sections include monitoring performance improvement projects in which Tuolumne County Behavioral Health did not have two active ones during the last EQRO audit. Section 4, Monitoring the Service Delivery System for Meaningful Clinical and Ethical Issues, page 12, and Section 8, Monitoring Mental Health Needs in Specific Cultural Groups, page 16, includes goals related to targeting areas of improvement or change in service delivery.</p> <p><u>QIC 9.2023 Minutes</u> – these are the Quality</p>	

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			<p>Improvement Council minutes from September 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by administrative and clinical staff ranging from leadership to line staff, community partners, other county departments, and stakeholders.</p> <p><u>QM Committee Minutes 8.2023</u> – these are the Quality Management minutes from August 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by</p>	

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			<p>administrative and clinical staff ranging from leadership to line staff.</p> <p><u>QAPI Online Posting</u> – this is the screenshots of the FY 23-24 QAPI being posted for viewing on the Tuolumne County Behavioral Health website.</p>	
<p><u>Question 3.2.6</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the MHP contract, exhibit A, attachment 5, section 2(a)(5). The MHP must ensure the Quality Assessment and Performance</p>	<p>Tuolumne County will update the FY 23-24 QAPI to reflect all monitoring, activities, and areas for discussion for cultural competence and linguistic competence. Tuolumne County will continue their monitoring of activities and collecting of data. The work plan data will then be reviewed quarterly in Quality Improvement led meetings to help monitor compliance with the requirements for cultural</p>	<p>1/1/2024</p>	<p><u>Quality Assurance Plan (QAPI) FY 23-24</u> – the FY 23-24 QAPI includes a section for monitoring activities that include performance improvement projects that have contributed to meaningful improvement in clinical and beneficiary service. This monitoring section can be found in Section 8, Monitoring Mental Health Needs in</p>	

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<p>Improvement (QAPI) Work Plan includes evidence of compliance with the requirements for cultural competence and linguistic competence.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A, attachment 5, section 2(a)(5).</p>	<p>competence and linguistic competence.</p>		<p>Specific Cultural Groups, page 16. Additionally, in Section 2, Monitoring Timely Access for Routine and Urgent Service Needs, page 10, there is monitoring to ensure beneficiaries can call the MHP and receive information in the language of their choice on how to access emergency and routine mental health services.</p> <p><u>QIC 9.2023 Minutes</u> – these are the Quality Improvement Council minutes from September 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by</p>	

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			<p>administrative and clinical staff ranging from leadership to line staff, community partners, other county departments, and stakeholders.</p> <p><u>QM Committee Minutes 8.2023</u> – these are the Quality Management minutes from August 2023 in which the FY 23-24 QAPI was presented to attendees for feedback, review, and approval. This meeting is attended by administrative and clinical staff ranging from leadership to line staff.</p> <p><u>QAPI Online Posting</u> – this is the screenshots of the FY 23-24 QAPI</p>	

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			being posted for viewing on the Tuolumne County Behavioral Health website.	
<p><u>Question 3.5.1</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the MHP contract, exhibit A, attachment 5, section 6(A); Code of Federal Regulations, title 42, section 438, subdivision 236(b); and California Code of Regulations, title 9, section 1810, subdivision 326. The MHP must have practice guidelines, which meet the</p>	<p>Tuolumne County will create practice guidelines.</p>	<p>2/1/2024</p>	<p><u>TCBH Clinical Practice Guidelines</u> – this is the adopted practice guidelines for Tuolumne County Behavioral Health. The practice guidelines were created in consensus by a group of clinical and administrative professionals including TCBH licensed clinical deputy director, the compliance officer, and senior quality management staff. The practice guidelines consider the needs of the beneficiaries. The practice guidelines include sections on utilization management (beginning on page 43), beneficiary education</p>	

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<p>requirements of the MHP Contract.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A, attachment 5, section 6(A); Code of Federal Regulations, title 42, section 438, subdivision 236(b); and California Code of Regulations, title 9, section 1810, subdivision 326.</p>			<p>(beginning on page 9), and coverage of services (beginning on page 9).</p>	
<p><u>Question 3.5.2</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the MHP contract, exhibit A,</p>	<p>Tuolumne County will create practice guidelines and will disseminate practice guidelines to all affected providers. Practice guidelines will become available upon request to current and potential beneficiaries.</p>	<p>2/1/2024</p>	<p><u>TCBH Clinical Practice Guidelines Email Notification</u> – this is the email sent out to all TCBH providers notifying them of the adopted practice guidelines.</p>	

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<p>attachment 5, section 6(c); Code of Federal Regulations, title 42, section 438, subdivision 236(c); and California Code of Regulations, title 9, section 1810, subdivision 326. The MHP must disseminate the guidelines to all affected providers and, upon request, to beneficiaries and potential beneficiaries.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A, attachment 5, section 6(c); Code of Federal</p>			<p><u>TCBH Website with Practice Guidelines</u> – this screenshot taken of the Tuolumne County Behavioral Health website shows they have been posted on the website for easy accessibility by all providers and beneficiaries.</p>	

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Regulations, title 42, section 438, subdivision 236(c); and California Code of Regulations, title 9, section 1810, subdivision 326.				
<p><u>Question 3.5.3</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with the MHP contract, exhibit A, attachment 5, section 6(D); Code of Federal Regulations, title 42, section 438, subdivision 236(d); and California Code of Regulations, title 9, section 1810, subdivision 326.</p>	Tuolumne County will create practice guidelines that can assure decisions for utilization management, beneficiary education, coverage of services, and any other area to which the guidelines apply are consistent with the guidelines adopted.	2/1/2024	<u>TCBH Clinical Practice Guidelines</u> – this is the adopted practice guidelines for Tuolumne County Behavioral Health. The practice guidelines were created in consensus by a group of clinical and administrative professionals including TCBH licensed clinical deputy director, the compliance officer, and senior quality management staff. The practice guidelines consider the needs of the beneficiaries. The practice guidelines	

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<p>The MHP must take steps to assure that decisions for utilization management, beneficiary education, coverage of services, and any other area to which the guidelines apply are consistent with the guidelines adopted.</p> <p>DHCS deems the MHP out of compliance with the MHP contract, exhibit A, attachment 5, section 6(D); Code of Federal Regulations, title 42, section 438, subdivision 236(d); and California</p>			<p>include sections on utilization management (beginning on page 43), beneficiary education (beginning on page 9), and coverage of services (beginning on page 9).</p>	

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Code of Regulations, title 9, section 1810, subdivision 326.				
<p><u>Question 4.2.2</u></p> <p>DHCS' review team made seven (7) calls to test the MHP's statewide 24/7 toll-free number. The seven (7) test calls must demonstrate compliance with California Code of Regulations, title 9, chapter 11, section 1810, subdivision 405(d) and 410(e)(1). The toll-free telephone number provides information to beneficiaries to the below listed requirements:</p>	<p>Tuolumne County will perform one test call from each of the four categories once every thirty days for the next ninety days. All results from test calls will be shared monthly during the Quality Management Committee meeting for discussion and quality improvement purposes.</p>	<p>11/1/2024</p>	<p><u>August-October 2023 Test Call Report</u> – this test call report includes all the test calls completed during August, September, and October 2023. It shows the amount of test calls performed as well as the count that met standard and compliance rate.</p> <p><u>August-October 2023 Test Calls</u> – these are the tracking forms for each test call completed during August, September, and October 2023. The tracking forms includes all pertinent test call information including the</p>	

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<ol style="list-style-type: none"> 1. The MHP provides a statewide, toll-free telephone number 24 hours a day, seven days per week, with language capability in all languages spoken by beneficiaries of the county. 2. The toll-free telephone number provides information to beneficiaries about how to access specialty mental health services, including specialty mental health services 			<p>test call scenario, time and date, and the logging of the call.</p> <p><u>QIC 8.2023 Minutes</u> – these are the Quality Improvement Council minutes from August 2023. Why and how we do tests calls were reviewed with members in attendance. QIC is attended by Tuolumne County staff, community stakeholders, Behavioral Health Advisory Board members, and staff of other departments/nonprofits in Tuolumne County.</p> <p><u>QM Committee Minutes 10.2023</u> – these are the Quality Management Committee minutes</p>	

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<p>required to assess whether medical necessity criteria are met.</p> <p>3. The toll-free telephone number provides information to beneficiaries about services needed to treat a beneficiary's urgent condition.</p> <p>4. The toll-free telephone number provides information to the beneficiaries about how to use the beneficiary problem resolution and fair hearing</p>			<p>from October 2023. Why and how we do tests calls were reviewed with members in attendance. The CAP item was discussed as well as the steps being taken to resolve the item. The reason why test calls may not meet compliance was explained so leadership could take it back to their teams for educational purposes. QM Committee is attended by Tuolumne County Behavioral Health. leadership and staff representing each team within the department.</p> <p><u>Tuolumne County 24 7 Access Line Test Call Report Form August-October 2023</u> – this</p>	

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<p>processes.</p> <p>Based on the test calls, DHCS deems the MHP <i>partial compliance</i> with California Code of Regulations, title 9, chapter 11, section 1810, subdivision 405(d) and 410(e)(1).</p> <p>Repeat deficiency Yes</p>			<p>excel is the DHCS quarterly submission form. Each test call is logged within the excel in order to show the compliance rating.</p>	
<p><u>Question 5.2.1</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with BHIN No. 22-017; California Code of Regulations, title 9, section 1810, subdivision 440(b); and Code of</p>	<p>Tuolumne County will update the Concurrent Review Procedure and create a Concurrent Review Form. The review form will reflect clearly defined evidence of UM in accordance with BHIN 22-017. The created form will be launched through the EHR and require a clinical (LPHA) designee to sign off and approve.</p>	<p>12/1/2023</p>	<p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document provides Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) information on admission notifications</p>	

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<p>Federal Regulations, title 42, section 438, subdivision 210(a)(4), (b)(1),(2). The MHPs are required to operate a utilization management (UM) program that ensures beneficiaries have appropriate access to SMHS. The UM program must evaluate medical necessity, appropriateness and efficiency of services provided to Medi-Cal beneficiaries prospectively, such as through prior or concurrent authorization review procedures.</p>			<p>and initial authorization requests required documents and concurrent review. This document is posted on the Tuolumne County Behavioral Health website.</p> <p><u>Concurrent Review Procedure</u> – this procedure provides a standard process for Tuolumne County Behavioral Health for the concurrent review of inpatient psychiatric hospital placement documentation in order to provide authorization for the hospitalization stay. The procedure lays out how Tuolumne County Behavioral Health will evaluate notes and information received in order to</p>	

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<p>DHCS deems the MHP out of compliance with BHIN No. 22-017; California Code of Regulations, title 9, section 1810, subdivision 440(b); and Code of Federal Regulations, title 42, section 438, subdivision 210(a)(4), (b)(1),(2).</p>			<p>determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Concurrent Review Worksheet</u> – this fillable worksheet is completed by Tuolumne County Behavioral Health and signed off and approved by a clinical (LPHA) designee. The worksheet is used for inpatient mental health and concurrent review authorization. It includes evaluating notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p>	

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			<p><u>Tuolumne Concurrent Review Tracker</u> – this is the tracker created in order to track authorization requests through the utilization management/concurrent review process.</p>	
<p><u>Question 5.2.2</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with BHIN 22-017; Code of Federal Regulations, title 42, section 438, subdivision 210(b)(1); and California Code of Regulations, title 9, section 1810, subdivision 440(b)(2)(i-ii). The MHP must establish and</p>	<p>Tuolumne County will create UM criteria in accordance with BHIN 22-017. Tuolumne County will establish and implement written policies and procedures for the authorization of psychiatric inpatient hospital services. The criteria will be created in partnership with Behavioral Health’s licensed clinical staff, including the Medical Director, and organizational providers.</p>	<p>12/1/2023</p>	<p><u>Beneficiary Handbook 2024</u> – this is the updated Tuolumne County Beneficiary Handbook for 2024. Beginning on page 19 it explains how to obtain benefits, including any requirements for service authorizations and/or referrals for specialty mental health services.</p> <p><u>Business Administration Meeting (BAM) Agenda 11.30.23</u> – this is the agenda from November 30, 2023 Business Administration Meeting</p>	

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<p>implement written policies and procedures for the authorization of psychiatric inpatient hospital services in accordance with BHIN 22-017 and shall have mechanisms in effect to ensure consistent application of review criteria for authorization decisions and shall consult with the requesting provider when appropriate. Authorization procedures and utilization management criteria shall:</p> <ol style="list-style-type: none"> 1. Be based on medical necessity and 			<p>where the Concurrent Review Procedure and Worksheet documents were presented for staff review and input. The Business Administration Meeting is chaired by the Business and Operations Staff Analyst and attended by staff from all teams at Tuolumne County Behavioral Health so there is representation from administration, which include Business Operations, Billing, Fiscal, and Quality Management, and clinical, which includes Children's, Adults, Crisis, and Full-Service Partnership. Staff submit agenda items for the meeting in order to receive review and input from various teams and knowledge basis.</p>	

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<p>consistent with current evidence-based clinical practice guidelines, principles, and processes</p> <p>2. Be developed with involvement from network providers, including, but not limited to, hospitals, organizational providers, and licensed mental health professionals acting within their respective scopes of practice</p> <p>3. Be evaluated, and updated as necessary, and</p>			<p>Topics include, but are not limited to, E.H.R. documentation, policies, procedures, implementation of new procedures, updating of existing procedures, and form updates.</p> <p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document provides Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) information on admission notifications and initial authorization requests required documents and concurrent review. This document is posted on the Tuolumne County</p>	

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<p>at least annually, and be disclosed to the MHP's beneficiaries and network providers.</p> <p>DHCS deems the MHP out of compliance with BHIN 22-017; Code of Federal Regulations, title 42, section 438, subdivision 210(b)(1); California Code of Regulations, title 9, section 1810, subdivision 440(b)(2)(i-ii).</p>			<p>Behavioral Health website.</p> <p><u>Concurrent Review Notification</u> – this is notification letter sent to all contracted and used Psychiatric Hospitals and Kings View. The letter was sent with the Concurrent Review Procedure, Concurrent Review Worksheet, and the Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines document to notify them of the created documents and the authorization and concurrent review process moving forward. The notification tells providers of all</p>	

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			<p>services that require prior authorization or concurrent authorization and makes them aware of the procedures and timeframes necessary to obtain authorization for these services.</p> <p><u>Concurrent Review Procedure</u> – this procedure provides a standard process for Tuolumne County Behavioral Health for the concurrent review of inpatient psychiatric hospital placement documentation in order to provide authorization for the hospitalization stay. The procedure lays out how Tuolumne County Behavioral Health will evaluate notes and information received in order to</p>	

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			<p>determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Concurrent Review Worksheet</u> – this fillable worksheet is completed by Tuolumne County Behavioral Health and signed off and approved by a clinical (LPHA) designee. The worksheet is used for inpatient mental health and concurrent review authorization. It includes evaluating notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p>	

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			<p><u>Tuolumne Concurrent Review Tracker</u> – this is the tracker created in order to track authorization requests through the utilization management/concurrent review process.</p> <p><u>UM Criteria & Concurrent Review Meetings</u> – this shows all the meetings that took place between Tuolumne County Behavioral Health staff and partners in the creation of the Concurrent Review Procedure and Worksheet documents. The meetings took place over the course of four months and included Tuolumne County Behavioral Health administrative</p>	

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			<p>and clinical staff and other partners.</p> <p><u>Website Posting</u> – this document contains screenshots showing concurrent review and authorization documents are posted on the Tuolumne County Behavioral Health website.</p>	
<p><u>Question 5.2.4</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with BHIN 22-017 and Code of Federal Regulations, title 42, section 438, subdivision 10(g)(2)(iv). The MHP must comply with the following</p>	<p>Tuolumne County will send finalized policies and procedures and criteria to DHCS, all contracted hospitals, and Kings View. Tuolumne County will post the material on their website and update the Beneficiary Handbook to include it. Tuolumne County will develop a procedure to provide authorization decisions with established timeframes to contracted hospitals.</p>	<p>12/1/2024</p>	<p><u>Beneficiary Handbook 2024</u> – this is the updated Tuolumne County Beneficiary Handbook for 2024. Beginning on page 19 it explains how to obtain benefits, including any requirements for service authorizations and/or referrals for specialty mental health services.</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>communication requirements:</p> <ol style="list-style-type: none"> 1. Notify DHCS and contracting providers in writing of all services that require prior or concurrent authorization and ensure that all contracting providers are aware of the procedures and timeframes necessary to obtain authorization for these services 2. Disclose to DHCS, the MHP's providers, beneficiaries, and members of the public, upon request, the UM 			<p><u>Business Administration Meeting (BAM) Agenda 11.30.23</u> – this is the agenda from November 30, 2023 Business Administration Meeting where the Concurrent Review Procedure and Worksheet documents were presented for staff review and input. The Business Administration Meeting is chaired by the Business and Operations Staff Analyst and attended by staff from all teams at Tuolumne County Behavioral Health so there is representation from administration, which include Business Operations, Billing, Fiscal, and Quality Management, and clinical, which includes Children's, Adults, Crisis, and Full-Service</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>or utilization review policies and procedures that the MHP, or any entity that the MHP contracts with, uses to authorize, modify, or deny SMHS. The MHP may make the criteria or guidelines available through electronic communication means by posting them online</p> <p>3. Ensure the beneficiary handbook includes the procedures for obtaining benefits,</p>			<p>Partnership. Staff submit agenda items for the meeting in order to receive review and input from various teams and knowledge basis. Topics include, but are not limited to, E.H.R. documentation, policies, procedures, implementation of new procedures, updating of existing procedures, and form updates.</p> <p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document provides Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) information on admission notifications</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>including any requirements for service authorizations and/or referrals for SMHS; and,</p> <p>4. Provide written notification regarding authorization decisions in accordance with the established timeframes for the type of authorization.</p> <p>DHCS deems the MHP out of compliance with BHIN 22-017 and Code of Federal Regulations, title 42, section 438, subdivision 10(g)(2)(iv).</p>			<p>and initial authorization requests required documents and concurrent review. This document is posted on the Tuolumne County Behavioral Health website.</p> <p><u>Concurrent Review Notification</u> – this is notification letter sent to all contracted and used Psychiatric Hospitals and Kings View. The letter was sent with the Concurrent Review Procedure, Concurrent Review Worksheet, and the Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines document to notify them of the created</p>	

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			<p>documents and the authorization and concurrent review process moving forward. The notification tells providers of all services that require prior authorization or concurrent authorization and makes them aware of the procedures and timeframes necessary to obtain authorization for these services.</p> <p><u>Concurrent Review Procedure</u> – this procedure provides a standard process for Tuolumne County Behavioral Health for the concurrent review of inpatient psychiatric hospital placement documentation in order to provide authorization for the hospitalization</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
			<p>stay. The procedure lays out how Tuolumne County Behavioral Health will evaluate notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Concurrent Review Worksheet</u> – this fillable worksheet is completed by Tuolumne County Behavioral Health and signed off and approved by a clinical (LPHA) designee. The worksheet is used for inpatient mental health and concurrent review authorization. It includes evaluating notes and information received in order to determine medical necessity and</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
			<p>authorize days of stay, including administrative days.</p> <p><u>Tuolumne Concurrent Review Tracker</u> – this is the tracker created in order to track authorization requests through the utilization management/concurrent review process.</p> <p><u>UM Criteria & Concurrent Review Meetings</u> – this shows all the meetings that took place between Tuolumne County Behavioral Health staff and partners in the creation of the Concurrent Review Procedure and Worksheet documents. The meetings took</p>	

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			<p>place over the course of four months and included Tuolumne County Behavioral Health administrative and clinical staff and other partners.</p> <p><u>Website Posting</u> – this document contains screenshots showing concurrent review and authorization documents are posted on the Tuolumne County Behavioral Health website.</p>	
<p><u>Question 5.2.5</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with BHIN 22-016. Concurrent Review: In the absence of</p>	<p>Tuolumne County will update the Concurrent Review Procedure and create a Concurrent Review Form. The review form will reflect clearly defined evidence of UM. The created form will be launched through the EHR and require a clinical (LPHA) designee to sign off and</p>	<p>12/1/2023</p>	<p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document provides Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF)</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>an MHP referral, MHPs shall conduct concurrent review of treatment authorizations following the first day of admission to a facility through discharge. MHPs may elect to authorize multiple days, based on the beneficiary's mental health condition, for as long as the services are medically necessary.</p> <p>DHCS deems the MHP out of compliance with BHIN 22-016.</p>	<p>approve. A form will be created to notify hospitals of authorization.</p>		<p>information on admission notifications and initial authorization requests required documents and concurrent review. This document is posted on the Tuolumne County Behavioral Health website.</p> <p><u>Concurrent Review Procedure</u> – this procedure provides a standard process for Tuolumne County Behavioral Health for the concurrent review of inpatient psychiatric hospital placement documentation in order to provide authorization for the hospitalization stay. The procedure lays out how Tuolumne County Behavioral Health will evaluate</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
			<p>notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Concurrent Review Worksheet</u> – this fillable worksheet is completed by Tuolumne County Behavioral Health and signed off and approved by a clinical (LPHA) designee. The worksheet is used for inpatient mental health and concurrent review authorization. It includes evaluating notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
			<p><u>Tuolumne Concurrent Review Tracker</u> – this is the tracker created in order to track authorization requests through the utilization management/concurrent review process.</p>	
<p><u>Question 5.2.6</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with BHIN 22-017; Welfare and Institution Code, section 14197.1; and Health and Safety Code, section 1367.01(i), 1371.4(a). The MHPs must maintain telephone access to receive Psychiatric</p>	<p>A procedure will be authored and distributed to contracted facilities that will explain how they can get in touch with Behavioral Health for initial authorization requests 24-hours a day and 7 days a week.</p>	<p>12/1/2023</p>	<p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document notifies Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) of admission notifications and initial authorization requests required documents and provides the 24 hours a day and 7 days a week initial authorization phone number.</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>Inpatient Hospital or Psychiatric Health Facility (PHF) admission notifications and initial authorization requests 24-hours a day and 7 days a week.</p> <p>DHCS deems the MHP out of compliance with BHIN 22-017; Welfare and Institution Code, section 14197.1; and Health and Safety Code, section 1367.01(i), 1371.4(a).</p>				
<p><u>Question 5.2.10</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with</p>	<p>Tuolumne County will update the Concurrent Review Procedure and create a Concurrent Review Form. The review form will reflect clearly defined evidence of UM. The created form will be</p>	<p>12/1/2023</p>	<p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document provides</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>BHIN 22-017; California Code of Regulations, title 9, section 1820, subdivision 230; and Welfare and Institution Code 14184.402, 14184.102 and 14184.400. Authorizing Administrative Days: 1. In order to conduct concurrent review and authorization for administrative day service claims, the MHP shall review that the hospital has documented having made at least one contact to a non-acute</p>	<p>launched through the EHR and require a clinical (LPHA) designee to sign off and approve.</p>		<p>Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) information on admission notifications and initial authorization requests required documents and concurrent review. This document is posted on the Tuolumne County Behavioral Health website.</p> <p><u>Concurrent Review Procedure</u> – this procedure provides a standard process for Tuolumne County Behavioral Health for the concurrent review of inpatient psychiatric hospital placement documentation in order to provide authorization for the hospitalization stay. The procedure</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>residential treatment facility per day (except weekends and holidays), starting with the day the beneficiary is placed on administrative day status.</p> <p>2. Once five contacts have been made and documented, any remaining days within the seven-consecutive-day period from the day the beneficiary is placed on administrative day status can be authorized.</p> <p>3. A hospital may make more than</p>			<p>lays out how Tuolumne County Behavioral Health will evaluate notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Concurrent Review Worksheet</u> – this fillable worksheet is completed by Tuolumne County Behavioral Health and signed off and approved by a clinical (LPHA) designee. The worksheet is used for inpatient mental health and concurrent review authorization. It includes evaluating notes and information received in order to determine medical necessity and authorize days of stay,</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>one contact on any given day within the seven-consecutive-day period; however, the hospital will not receive authorization for the days in which a contact has not been made until and unless all five required contacts are completed and documented.</p> <p>4. Once the five-contact requirement is met, any remaining days within the seven- day period can be authorized</p>			<p>including administrative days.</p> <p><u>Tuolumne Concurrent Review Tracker</u> – this is the tracker created in order to track authorization requests through the utilization management/concurrent review process.</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>without a contact having been made and documented.</p> <p>5. MHPs may waive the requirements of five contacts per week if there are fewer than five appropriate, non-acute residential treatment facilities available as placement options for the beneficiary. The lack of appropriate, non-acute treatment facilities and the contacts made at appropriate facilities shall be documented to</p>				

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>include the status of the placement, date of the contact, and the signature of the person making the contact. (If an MHP has been granted an exemption to 9 CCR § 1820.220, then the review of the MHP will be based upon the alternate procedure agreed to in the MHP contract.)</p> <p>DHCS deems the MHP out of compliance with BHIN 22-017; California Code of Regulations, title 9, section 1820,</p>				

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
subdivision 230; and Welfare and Institution Code 14184.402, 14184.102 and 14184.400.				
<p><u>Question 5.2.11</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with BHIN 22-016. The MHP must utilize referral and/or concurrent review and authorization for all Crisis Residential Treatment Services (CRTS) and Adult Residential Treatment Services (ARTS). MHPs may not require prior authorization.</p> <p>1. If the MHP</p>	<p>Tuolumne County will update the Concurrent Review Procedure and create a Concurrent Review Form. The review form will reflect clearly defined evidence of UM. The created form will be launched through the EHR and require a clinical (LPHA) designee to sign off and approve.</p>	<p>12/1/2023</p>	<p><u>Concurrent Review and Psychiatric Inpatient Hospital Admission Notifications and Initial Authorization Requests Guidelines</u> – this document provides Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) information on admission notifications and initial authorization requests required documents and concurrent review. This document is posted on the Tuolumne County Behavioral Health website.</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>refers a beneficiary to a facility for CRTS or ARTS, the referral may serve as the initial authorization as long as the MHP specifies the parameters (e.g., number of days authorized) of the authorization.</p> <p>2. The MHP must then re-authorize medically necessary CRTS and ARTS services, as appropriate, concurrently with the beneficiary's stay and based</p>			<p><u>Concurrent Review Procedure</u> – this procedure provides a standard process for Tuolumne County Behavioral Health for the concurrent review of inpatient psychiatric hospital placement documentation in order to provide authorization for the hospitalization stay. The procedure lays out how Tuolumne County Behavioral Health will evaluate notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Concurrent Review Worksheet</u> – this fillable worksheet is completed by Tuolumne County</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>on beneficiary's continued need for services.</p> <p>DHCS deems the MHP out of compliance with BHIN 22-016.</p>			<p>Behavioral Health and signed off and approved by a clinical (LPHA) designee. The worksheet is used for inpatient mental health and concurrent review authorization. It includes evaluating notes and information received in order to determine medical necessity and authorize days of stay, including administrative days.</p> <p><u>Tuolumne Concurrent Review Tracker</u> – this is the tracker created in order to track authorization requests through the utilization management/concurrent review process.</p>	
<u>Question 5.2.14</u>	A SARs procedure will be created to ensure Tuolumne County reviews and makes a	12/1/2023	<u>Service Authorization Request Policy</u> – this policy explains how	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p>The MHP did not furnish evidence to demonstrate compliance with BHIN 22-016. The MHPs must review and make a decision regarding a provider's request for prior authorization as expeditiously as the beneficiary's mental health condition requires, and not to exceed five (5) business days from the MHP's receipt of the information reasonably necessary and requested by the MHP to make the determination.</p> <p>DHCS deems the MHP in partial</p>	<p>decision regarding a provider's request for prior authorization not to exceed five (5) business days. The procedure will include naming a designee for when the review is out of office and include a tracking process.</p>		<p>Tuolumne County Behavioral Health review and make a decision regarding a provider's request for prior authorization. It is highlighted that the MHP will make decisions within five business days, it names the decision maker as the Planned Services Supervisor or their designee, and lists the Outside Agency Referral Log as the tracking mechanism for requests.</p> <p><u>Outside Agency Referral Log SAR Tracking</u> – this is a redacted PDF printout of the Outside Agency Referral Log used for Service Authorization Request tracking.</p>	

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compliance with BHIN 22-016.				
<p><u>Question 6.2.6</u></p> <p>The MHP did not furnish evidence to demonstrate compliance with California Code of Regulations, title 9, section 1850, subdivision 205(d)(6) and MHP Contract, exhibit A, attachment 12, section 2(E). The MHP must provide notice, in writing, to any provider identified by the beneficiary or involved in the grievance, appeal, or expedited appeal of the final disposition of the beneficiary's</p>	<p>Tuolumne County will ensure that all network providers are notified in writing of any involved grievance, appeal, or expedited appeal of the final disposition of the beneficiary's grievance, appeal, or expedited appeal.</p>	<p>10/1/2023</p>	<p><u>Grievance Ack Redacted</u> – this is a provider notice addressed to Clinical Deputy Director following the resolution of a grievance. It gives a summary of the incident, the actions taken by the Quality Management team to resolve the issue, and the final disposition.</p> <p><u>Grievance Ack Redacted</u> – this is a provider notice addressed to Clinical Deputy Director following the resolution of a grievance. It gives a summary of the incident, the actions taken by the Quality Management team to</p>	

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
<p data-bbox="201 345 464 451">grievance, appeal, or expedited appeal.</p> <p data-bbox="201 492 478 889">DHCS deems the MHP out of compliance with California Code of Regulations, title 9, section 1850, subdivision 205(d)(6) and MHP Contract, exhibit A, attachment 12, section 2(E).</p>			<p data-bbox="1289 345 1604 410">resolve the issue, and the final disposition.</p>	

Submitted by: Amanda Lawrance

Date: 8/4/2023

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