ASSURANCE OF COMPLIANCE: NETWORK CERTIFICATIONS OF DRUG MEDI-CAL ORGANIZED DELIVERY SYSTEM PLANS

Table of Contents

1.   Executive Summary

The Department of Health Care Services (DHCS) is responsible for certifying Drug Medi-Cal Organized Delivery System (DMC-ODS) provider networks on an annual basis. The network certifications are required to be submitted to the Center for Medicare and Medicaid Services (CMS) prior to July 1 of each year.

DHCS published Information Notice #18-011,[1] which prescribes the DMC-ODS plan network certification process and submission requirements. DMC-ODS plans are required to submit documentation that demonstrates the capacity to serve the expected enrollment in each service area in accordance with DHCS' standards for access to care established under the authority of CMS Medicaid and CHIP Final Rule, CMS-2390-F (Final Rule) Sections 438.68, 438.206 and 438.207.[2]

DHCS conducted a comprehensive review of each DMC-ODS plan's provider networks. Based on this review, DHCS found that each DMC-ODS plan complied with the Annual Network Certification requirements set forth in 42 CFR Section 438.207 or that the DMC-ODS plan will receive a conditional pass with Corrective Action Plan (CAP) mandates. DHCS submits this report as an assurance of compliance and includes attachments that are examples of criteria DHCS used to certify the DMC-ODS plan's provider networks. DHCS will make available to CMS, upon request, all documentation collected by the State from each DMC-ODS plan.[3]

1.1.   Medicaid Managed Care Final Rule

The Final Rule required DHCS to implement regulations related to network adequacy standards and certification, and established requirements for DMC-ODS plan network certification that expanded on previous provider network monitoring efforts and contractual provider network requirements. The Final Rule required that states not only meet the federal requirements of 42 CFR Sections 438.68, 438.206(c) and 428.207, but also establish state specific network adequacy standards to ensure that DMC-ODS plans are meeting the current needs of the beneficiaries and projected future beneficiaries.

To assure compliance with established federal and State standards, the Final Rule requires DHCS to submit to CMS an annual network certification of the DMC-ODS plans. Additionally, DHCS must submit a network certification when a DMC-ODS plan enters into a contract with the State; any time there has been a significant change as defined by DHCS in the DMC-ODS plans operations that would affect the adequacy of capacity and services, including changes in DMC-ODS plan services, benefits,

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[1] MHSUDS Information Notice 18-011 Federal Network Adequacy Standards for Mental Health Plans (MHPs) and Drug Medi-Cal Organized Delivery System (DMC-ODS) Pilot Counties.
[2] Managed care Final Rule, Federal Register, Vol. 81, No. 88.
[3] Title 42 Code of Federal Regulation (CFR) section 438.207(e)

geographic service area, composition of, or payments to its provider network; or enrollment of a new population in the DMC-ODS plan.[4]

1.2. Assurance of Compliance Overview

The assurance of compliance report reviews the network certification process and validation activities that DHCS has conducted. The report is organized by the following sections:

- Section 1: Medicaid Managed Care Final Rule: Network Adequacy Standards and Certification Requirements;
- Section 2: State Medicaid Program: State Network Adequacy Standards and DMC-ODS plan Contractual Requirements;
- Section 3: Network Certifications for newly enrolled populations, changes to existing benefits, and increases in DMC-ODS plan scope;
- Section 4: Annual Network Certification Process and Evaluation;
- Section 5: CAP Process and Monitoring Activities; and
- Section 6: Annual Network Certification Results.

2. California Medicaid Program

2.1. Drug Medi-Cal Organized Delivery System in California

The DMC-ODS provides a continuum of care modeled after the American Society of Addiction Medicine Criteria for substance use disorder treatment services, enables more local control and accountability, provides greater administrative oversight, creates utilization controls to improve care and efficient use of resources, implements evidenced-based practices in substance abuse treatment, and coordinates with other systems of care.

This approach provides the beneficiary with access to the care needed in order to achieve sustainable recovery. DMC-ODS will demonstrate how organized substance use disorder care increases the success of DMC beneficiaries while decreasing other system health care costs.

In California, there are nineteen DMC-ODS plans that require an annual network adequacy certification:

- Alameda County
- Contra Costa County
- Imperial County
- Los Angeles County

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[4] 42 CFR Section 438.207(c)

- Marin County
- Monterey County
- Napa County
- Nevada County
- Orange County
- Riverside County
- San Bernardino County
- San Diego County
- San Francisco County
- San Joaquin County
- San Luis Obispo County
- San Mateo County
- Santa Clara County
- Santa Cruz County
- Yolo County

2.2. Network Adequacy Standards

In July 2017, DHCS published guidance establishing Network Adequacy Standards in compliance with the network adequacy provisions of the Final Rule. The network adequacy standards were subsequently codified in Assembly Bill (AB) 205 (Chapter 738, Statutes of 2018). The network adequacy standards are outlined in Attachment A, including time and distance standards for outpatient services and opioid treatment program (OTP) services.

In addition, the Final Rule permits states to grant exceptions to the network adequacy standards.[5] If a DMC-ODS plan cannot meet the time and distance standards, it may submit a request for alternative access which, if approved, allows for an alternative time and distance standard for a specific zip code.[6] DHCS may grant requests for alternative access standards (AAS) if the DMC-ODS plan has exhausted all other reasonable attempts to contract with providers to meet the applicable network adequacy standard or if DHCS determines that the DMC-ODS plan has demonstrated that its delivery structure is capable of delivering the appropriate level of care and access with the current provider network.[7] DHCS will continually monitor beneficiary access to providers and communicate the findings to CMS in the managed care program assessment report required under 42 CFR 438.66(e). DHCS will post all approved AAS on its website.[8]

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[5] 42 CFR section 438.68(d)(1)
[6] Welfare and Institutions Code (W&I), Section 14197(e)(2)
[7] W&I 14197(e)(1)(A) and (B)
[8] W&I 14197(e)(3)

2.3.   Requirements

In order to ensure DMC-ODS plans have adequate provider networks, DHCS leveraged the Annual Network Certification process to combine network requirements that are required under the contract with DHCS and State and federal law.

- DMC-ODS Plan Contractual Requirements
    - Network capacity, which ensures there is an adequate network to serve all beneficiaries that reside in the DMC-ODS Plan.
- State Requirements
    - Outpatient substance use disorder services other than OTPs must meet time or distance standards set forth in AB 205.[9]
    - OTPs must meet time or distance standards set forth in AB 205.[10]

3.   Additional Network Certifications

DHCS is required to certify the provider network when a new population is enrolled; there is a change in services or benefits[11] or when a DMC-ODS plan enters into a new contract with DHCS.[12]

4. Annual Network Certification

4.1.   Annual Network Certification Methodology

DHCS developed a methodology to determine the projected enrollment for this contract year for each DMC-ODS plan. The methodology also projected the DMC-ODS plan's network composition to determine the number of facilities per modality that are needed to meet the projected enrollment.

4.1.1. Projected Enrollment

The projected enrollment methodology is based on monthly enrollment totals derived from the Medi-Cal Eligibility Data System (MEDS). Two sets of projections were produced for each county: one for children and youth (aged 12-17) and one for adults (aged 18 and over). Trend lines were established using 53 monthly enrollment totals; beneficiaries were included in the monthly totals if they had eligibility dates from June 2014 through October 2018. A beneficiary was counted only once in each monthly total but may have been counted in more than one monthly total. Monthly enrollment totals were forecast through June 2020.

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[9] W&I Section 14197(c)(4)(A)
[10] W&I Section 14197(c)(4)(B)
[11] 42 CFR Section 438.207(c)(3)
[12] 42 CFR Section 438.207(c)(1)

4.1.2. Projected Network Composition

The DMC-ODS plan has provided the list of contracted facilities as part of their annual submission. DHCS has analyzed the list of submitted facilities, along with the provider database that houses all DMC certified facilities, to verify the network composition for the DMC-ODS plan.

4.1.3. Projected Network Capacity

The DMC-ODS plan included projections for enrollment, utilization, and number of facilities required at the point of implementation. DHCS has validated the prior year number of beneficiaries served, actual utilization, and number of facilities that provided the services for adult and youth in outpatient and OTP service delivery.

4.2. Provider Network Evaluation

The provider network evaluation consisted of reviewing the DMC-ODS plan's compliance with contractual, State and federal requirements for the Annual Network Certification, including network composition and additional certification requirements, as applicable.

4.2.1. Provider Network Composition

In accordance with 42 CFR Section 438.207(b)(1), DMC-ODS plans are required to have a provider network that is composed of the appropriate range of outpatient services, residential services, and OTP services for the expected number of beneficiaries within the DMC-ODS plan. DMC-ODS plans are required to contract with the required provider types outlined in their intergovernmental agreement.

DHCS applied the methodology described in Section 4.1 evaluate the DMC-ODS plan's provider network to ensure it will meet the needs of the anticipated number of beneficiaries.

4.2.2. Mandatory Levels of Care

DMC-ODS plans must contract with the following provider types or facilities based on contractual, State or federal requirements:

- Outpatient substance use disorder services provided by DMC certified outpatient and intensive outpatient facilities.
- Opioid use disorder services provided by DMC certified OTP facilities.
- Residential substance use disorder services provided by DMC certified, state licensed, and ASAM designated residential facilities.

DMC-ODS plans submitted Exhibit A-2, which included the following information: the name of the provider or facility, the location of the provider or facility, and the DMC-ODS plan's contract status with the provider or facility.

DHCS reviewed the DMC-ODS plan's submissions and validated the information with DHCS data sources to ensure compliance.

4.2.3. Time and Distance Standards

The Final Rule required DHCS to establish network adequacy standards effective July 1, 2018. Assembly Bill (AB) 205 outlines California's state-specific network adequacy standards, as set forth in Attachment A. They include time and distance standards based on county population density, and are applicable to outpatient and OTP service providers. Additionally, DHCS allowed DMC-ODS plans to utilize telehealth services as a means of meeting time and distance standards in cases where the DMC-ODS plan can demonstrate it has been unable to contract with an in-person provider or if they can demonstrate that its delivery structure is capable of delivering the appropriate level of care.

DMC-ODS plans submitted geographic access maps or accessibility analyses that demonstrated compliance with applicable time and distance standards, or demonstrated that they had requested DHCS approval of an AAS for the affected service area (zip code).

DHCS reviewed and certified the DMC-ODS plans using geographic access maps and accessibility analysis for time and distance standards based on county population density for outpatient and OTP service providers. The geographic access maps and accessibility analysis looked at total distance and travel time between the providers and the member's residence by zip code. Additionally, DHCS reviewed and ensured there was entire service area coverage for time and distance standards. DHCS verified that the DMC-ODS plan submitted an AAS request if they were unable to meet time and distance standards based on the geographic access analysis.

4.2.4. Alternative Access Requests

AB 205 allows DMC-ODS plans to submit AAS requests for time and distance standards for outpatient and OTP service providers. AAS requests may only be submitted when the DMC-ODS plan has exhausted all other reasonable options for contracting with providers in order to meet the applicable standards, or if DHCS determines that the requesting DMC-ODS plan has demonstrated that its delivery structure is capable of delivering the appropriate level of care and access.

DMC-ODS plans that are unable to meet time and distance standards for assigned beneficiaries submitted AAS requests to DHCS, using a DHCS reporting template. DMC-ODS plan AAS requests were organized by zip code and county, and included the

driving time and/or the distance, in miles, between the nearest in-network provider(s) and the most remote beneficiaries. Additionally, the requests included the three nearest out-of-network providers and the proposed AAS standard in minutes and miles from the most remote beneficiaries. The requests detailed the DMC-ODS plan's contracting efforts, including an explanation of the difficulty in obtaining a contract.

DHCS reviewed the requests for AAS and approved or denied each request on a zip code and provider type basis. DHCS-approved AAS requests are valid for one contract year and must be resubmitted to DHCS for approval annually.

4.2.5. Telehealth

Pursuant to AB 205, DHCS is allowing DMC-ODS plans to use telehealth to demonstrate compliance with time and distance standards. DMC-ODS plans will be authorized to begin using telehealth as an alternative access to care for contractual time and distance standards[13] if they meet the contractual and State requirements.

DMC-ODS plans using telehealth to meet network adequacy standards submitted information for telehealth providers with the annual submission to DHCS. The DMC-ODS plan indicated the provider type, whether the provider is available for in-person services, as well as telehealth services, and the service area the telehealth provider serves.

4.2.6. Access and Availability Policies and Procedures

DHCS is required to ensure that DMC-ODS plans meet timely access requirements outlined in 438.206(c)(1). DHCS' Substance Use Disorders Program, Policy, and Fiscal Division (SUD-PPFD) Quality Monitoring (QM) Section evaluates External Quality Review Organization (EQRO) findings regarding DMC-ODS plan timely access compliance as follows:

- The DMC-ODS plan and its network providers meet state mandated standards for timely access to care and services;
- That network providers offer hours of operation that are no less than the hours of operation offered to commercial members or comparable to Medicaid Fee-for-Service if the provider serves only Medicaid beneficiaries;
- That services are available 24 hours a day, 7 days a week when medically necessary;
- There are mechanisms to ensure compliance from network providers;
- There is monitoring of network providers regularly to determine compliance; and
- Corrective action is taken if there is failure to comply by a network provider.

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[13] W&I Section 14197(e)(4)

DHCS' SUD-PPFD QM Section reviews findings and, where deficiencies are identified, requires DMC-ODS plans to submit a CAP addressing all areas of non-compliance. SUD-PPFD QM Section's monitoring of the annual CAPs are thereby incorporated into the Annual Network Certification process.

4.3. Provider Network Validation

As part of the network certification process, DHCS validated each DMC-ODS plan's provider network to ensure there is an executed contract between the provider and DMC-ODS plan. Prior to entry on the provider database, each DMC-ODS plan submits the appropriate form with identification for contracted services per each network provider.

In order to certify each DMC-ODS plan's provider network, DHCS confirmed that the facilities had an executed contract with the DMC-ODS plan based on the provider database entry.

4.4. Provider Network Evaluation Findings

Each DMC-ODS plan's provider network submission was reviewed and deemed Pass, Conditional Pass, and N/A.

- A Pass designation means the standard was met and no further action is needed from the DMC-ODS plan.
- A Conditional Pass designation means the DMC-ODS plan did not meet the standard. DHCS imposed a temporary standard requiring the DMC-ODS plan to authorize access to out-of-network providers and/or services if services are not available in-network within the timely access standards. DMC-ODS plans may not deny access to out-of-network services on the basis of payment or rate disputes with the provider. The temporary standard was communicated through a CAP. DMC-ODS plans are required to authorize out-of-network providers and services until all CAP items have been corrected and the CAP is closed. Note: A Conditional Pass designation can also result from any deficiency in the requisite supporting documentation that each DMC-ODS plan submits as part of the certification process.
- A N/A designation means that the network certification requirement does not apply to the DMC-ODS plan.

5. Monitoring Network Adequacy: Post and Ongoing

5.1. Corrective Action Plans

DHCS granted DMC-ODS plans a conditional pass on Annual Network Certifications if the DMC-ODS plan was unable to meet the network certification requirements. DHCS will impose temporary standards for the DMC-ODS plan to implement immediately and

impose a CAP for any network certification deficiencies. The temporary standard requiring authorization of out-of-network services allows the DMC-ODS plan to correct all deficiencies during the CAP process while at the same time ensuring that Medi-Cal members are allowed to access out-of-network services within the timely access standards. DMC-ODS plans may not deny access to out-of-network services based on payment or rate disputes with a provider. The temporary standard remains in full effect until all network certification deficiencies have been corrected and DHCS approves closure of the CAP.

DHCS issued CAPs to the DMC-ODS plans with a description of each deficiency. DMC-ODS plans will have up to 90 days to resolve all deficiencies. The DMC-ODS plan will need to submit a response to the CAP and include the following items: a proposed solution; specific deliverables to be met and completed; a timeline for each deliverable; an attestation that the DMC-ODS plan will approve out of network services for the beneficiaries affected by the deficiencies for the duration of the CAP; and the timeline for progress updates. Network Certification CAPs will remain effective until all deficiencies are resolved.

If the DMC-ODS plan fails to comply with CAP requirements, DHCS may initiate additional corrective action measures, including sanctions, in accordance with the DMC-ODS plan contract, State, and federal law.

5.2. DHCS Monitoring

DHCS will monitor Prepaid Inpatient Health Plan provider network compliance through annual reviews of each plan and a cross-section of network providers. Timely access, time and distance standards, and grievances/complaints will be evaluated to determine compliance. CAPs will be required for any areas of non-compliance.

5.3. External Quality Review

In order to ensure an unbiased review of DMC-ODS waiver services, DHCS has contracted with an EQRO pursuant to 42 CFR Part 438. Related to Network Adequacy, the EQRO will review and validate the data collected by DHCS related to the:

- Number of requests for AAS in the plan service area for time and distance, categorized by all provider types, including specialists, and by adult and youth.
- Number of allowable exceptions for the appointment time standard, if known, categorized by all provider types, including specialists, and by adult and youth.
- Distance and driving time between the nearest network provider and zip code of the beneficiary furthest from that provider for requests for AAS.
- Approximate number of beneficiaries impacted by AAS or allowable exceptions.
- Number of requests for AAS approved or denied by zip code and provider and specialty type, and the reasons for the approval or denial of the request for AAS.

- The process of ensuring out-of-network access.
- Descriptions of contracting efforts and explanation for why a contract was not executed.
- Timeframe for approval or denial of a request for AAS by the department.
- Consumer complaints, if any.

The EQRO will complete an annual report and submit the results to DHCS. The annual report will cover the following:

1) Identify areas of systematic strengths and weaknesses within each county DMC-ODS plan's service delivery system and strategies to improve performance.
2) Identify and recommend strategies that are strength-based, solution-focused, culturally sensitive, action oriented and common sense driven.
3) Provide recommendations to increase accurate data collection, verification, analysis and integration/connectivity between state, county and provider-level HIS systems.
4) Be posted to county DMC-ODS websites to ensure transparency.
5) Be used to support counties with programmatic and fiscal decision-making.

6.   DMC-ODS Plan Network Certification Results

The following charts are the results of the Annual Network Certification on a Pass or Conditional Pass basis.

Annual Network Certification Key

Pass: Standard is met
Conditional Pass: Standard is not met – CAP Letter Sent

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Alameda County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	The two zip codes in the Alternative Access Request have a low number of beneficiaries living outside the 15 miles/30 minutes requirement. The majority of clients in Alameda are concentrated near city of Livermore

Annual Network Certification Summary		Pass/Conditional Pass	Comments
			and live within or close to the 30 minutes access standard. Alameda County is currently working with an established OTP provider to develop a Medication Unit or full NTP clinic in the eastern part of Alameda County (Dublin/Pleasanton or Livermore).
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	
Interpreter Services		Pass	

ASSURANCE OF COMPLIANCE: NETWORK CERTIFICATIONS OF DRUG MEDI-CAL ORGANIZED DELIVERY SYSTEM PLANS

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Contra Costa County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Conditional Pass	Contra Costa County has a gap for in-network residential withdrawal management.
	Youth	Conditional Pass	Contra Costa County has a gap for in-network residential withdrawal management.
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	Contra Costa County continues to work with the community-based organizations and providers to offer services in all areas of the county to meet the needs of beneficiaries.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	
Interpreter Services		Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Imperial County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Network Adequacy Monitoring	Pass	
Out of Network Access	Pass	
Timely Access	Pass	
Service Availability	Pass	
Physical Accessibility	Pass	
Telehealth Services (if applicable)	N/A	
24/7 Access Line Requirements	Pass	
24/7 Language Assistance	Pass	
Subcontracts		
Provider Boilerplate	Conditional Pass	Boilerplate contract language missing Timely Access requirement.
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Marin County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Monterey County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	Monterey County plans to extend the Opioid treatment program at the new SUD clinic in King City.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		Pass	
24/7 Access Line Requirements		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
24/7 Language Assistance	Pass	
Subcontracts		
Provider Boilerplate	Pass	
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Napa County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Conditional Pass	Napa County has been under an extended corrective action plan for gaps in services.
	Youth	Conditional Pass	Napa County has been under an extended corrective action plan for gaps in services.
Residential Treatment Services	Adult	Conditional Pass	Napa County has been under an extended corrective action plan for gaps in services.
	Youth	Conditional Pass	Napa County has been under an extended corrective action plan for gaps in services.
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	Napa County is a rural county. A portion of the county has uninhabitable terrain, seasonal issues due to the fact that much of it is wilderness. There are no NTP services in surrounding Lake

Annual Network Certification Summary		Pass/Conditional Pass	Comments
			or Yolo counties that meet the time and distance standards. Telehealth services are not a viable option for this type of treatment. Napa will work with Lake and Yolo to determine a regional alternative.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	
Interpreter Services		Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Nevada County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Orange County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	While continuing to work on identifying qualified providers, both in the southern region of the County and neighboring northern San Diego County, Orange County will make OTP accessible to beneficiaries. The county will continue to work with existing and potential providers to develop further "hub and spoke" models of service in order to provide mobile dosing/services in the southern region.

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	
Interpreter Services		Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Riverside County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		Pass	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
San Bernardino County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	San Bernardino County DBH is communicating with a provider to contract an NTP medication unit in the Ridgecrest area, which will serve surrounding northern rural areas of San Bernardino County. DBH will continue collaboration on this project to ensure the needs of SBC residents are fulfilled.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Other Supporting Documentation		
Grievance and Appeals Logs	Pass	
Language Utilization Chart	Pass	
Policies and Procedures		
Network Adequacy Monitoring	Pass	
Out of Network Access	Pass	
Timely Access	Pass	
Service Availability	Pass	
Physical Accessibility	Pass	
Telehealth Services (if applicable)	Pass	
24/7 Access Line Requirements	Pass	
24/7 Language Assistance	Pass	
Subcontracts		
Provider Boilerplate	Pass	
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
San Diego County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	Most of the County is covered by the 15 mile radius, the portion not covered is a rural area surrounded by the Mesa Grande Reservation to the north and El Capital Indian reservation to the South. One zip code has two areas requiring longer driving paths around military land.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Policies and Procedures		
Network Adequacy Monitoring	Conditional Pass	Policy and procedure submitted as a "draft".
Out of Network Access	Conditional Pass	Policy and procedure submitted as a "draft".
Timely Access	Conditional Pass	Policy and procedure submitted as a "draft".
Service Availability	Conditional Pass	Policy and procedure submitted as a "draft".
Physical Accessibility	Conditional Pass	Policy and procedure submitted as a "draft".
Telehealth Services (if applicable)	Conditional Pass	Policy and procedure submitted as a "draft".
24/7 Access Line Requirements	Conditional Pass	Policy and procedure submitted as a "draft".
24/7 Language Assistance	Conditional Pass	Policy and procedure submitted as a "draft".
Subcontracts		
Provider Boilerplate	Pass	
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
San Francisco County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Conditional Pass	SUD Scope of Work Addendum has not

Annual Network Certification Summary	Pass/Conditional Pass	Comments
		been signed/approved.
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
San Joaquin County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		Pass	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
San Luis Obispo County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		Pass	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
San Mateo County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	The beneficiaries in the rural part of the county are on the coast. The distance is extended in that part of the county due to the need to drive around, rather than directly across, the hilly terrain.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Service Availability	Pass	
Physical Accessibility	Pass	
Telehealth Services (if applicable)	N/A	
24/7 Access Line Requirements	Pass	
24/7 Language Assistance	Pass	
Subcontracts		
Provider Boilerplate	Pass	
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Santa Clara County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		Pass	The beneficiaries that require an AAS live in the Santa Cruz Mountains, which require slower drive speeds and longer drive times.
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Telehealth Services (if applicable)	N/A	
24/7 Access Line Requirements	Pass	
24/7 Language Assistance	Pass	
Subcontracts		
Provider Boilerplate	Pass	
Language Line Services	Pass	
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Santa Cruz County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

Annual Network Certification Summary		Pass/Conditional Pass	Comments
Yolo County DMC-ODS Plan			
Overall Results			
Facilities Available			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Residential Treatment Services	Adult	Pass	
	Youth	Pass	
Time and Distance			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Alternate Access Standards			
		N/A	
Network Validation			
Projected Enrollment/Utilization			
Outpatient Services	Adult	Pass	
	Youth	Pass	
Opioid Treatment Services	Adult	Pass	
	Youth	Pass	
Other Supporting Documentation			
Grievance and Appeals Logs		Pass	
Language Utilization Chart		Pass	
Policies and Procedures			
Network Adequacy Monitoring		Pass	
Out of Network Access		Pass	
Timely Access		Pass	
Service Availability		Pass	
Physical Accessibility		Pass	
Telehealth Services (if applicable)		N/A	
24/7 Access Line Requirements		Pass	
24/7 Language Assistance		Pass	
Subcontracts			
Provider Boilerplate		Pass	
Language Line Services		Pass	

Annual Network Certification Summary	Pass/Conditional Pass	Comments
Interpreter Services	Pass	

7. Appendices

7.1. Attachment A: Network Adequacy Standards

Network Adequacy Standards						
Provider Type	Timely Access Standard	Time and Distance Standard by County Size[14]				
		Rural	Small	Medium	Dense	
Outpatient Services	Within 10 business days to apt. from request	60 miles or 90 minutes from the beneficiary's residence*	60 miles or 90 minutes from the beneficiary's residence*	30 miles or 60 minutes from the beneficiary's residence*	15 miles or 30 minutes from the beneficiary's residence*	
Opioid Treatment Program Services	Within 3 business days to apt. from request	60 miles or 90 minutes from the beneficiary's residence*	45 miles or 75 minutes from the beneficiary's residence*	30 miles or 60 minutes from the beneficiary's residence*	15 miles or 30 minutes from the beneficiary's residence*	

Table 1: County Size Categories by Population			
Size Category	Population Density	# of Counties	Counties
Rural	<50 people per square mile	21	Alpine, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Imperial, Inyo, Lassen, Mariposa, Mendocino, Modoc, Mono, Plumas, San Benito, Shasta, Sierra, Siskiyou, Tehama, Tuolumne, Trinity
Small	51 to 200 people per square mile	19	Amador, Butte, El Dorado, Fresno, Kern, Kings, Lake, Madera, Merced, Monterey, Napa, Nevada, San Bernardino, San Luis Obispo, Santa, Barbara, Sutter, Tulare, Yolo, Yuba
Medium	201 to 600 people per square mile	9	Marin, Placer, Riverside, San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus, Ventura
Dense	≥600 people per square mile	9	Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Mateo, Santa Clara

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[14] See Table 1