



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



July 28, 2020

Sharrah White
Regulatory Affairs & Compliance Administrator
Senior Care Action Network Health Plan
3800 Kilroy Airport Way, Suite 100
Long Beach, CA 90806

RE: Department of Health Care Services Medical Audit

Dear Ms. White:

The Department of Health Care Services (DHCS), Audits and Investigations Division conducted an on-site Medical Audit of Senior Care Action Network Health Plan, a Managed Care Plan (MCP), from March 2, 2020 through March 13, 2020. The audit covered the period of March 1, 2019 through February 29, 2020.

On June 10, 2020, the MCP provided DHCS with additional information regarding its Corrective Action Plan (CAP) in response to the report originally issued on May 7, 2020.

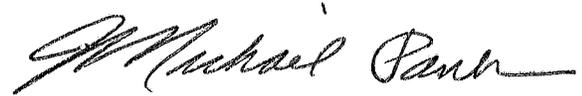
All items have been reviewed and DHCS accepts the MCP's submitted CAP. The CAP is hereby closed. Full implementation of the CAP will be monitored on the subsequent audit. The enclosed report will serve as DHCS' final response to the MCP's CAP.

Please be advised that in accordance with Health & Safety Code Section 1380(h) and the Public Records Act, the final report will become a public document and will be made available on the DHCS website and to the public upon request.

If you have any questions, feel free to contact me at (916) 345-7829 or Meghan Lytle at (916) 345-8734.

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Sincerely,

A handwritten signature in black ink that reads "Michael Pank". The signature is written in a cursive style with a horizontal line at the end.

Michael Pank, Chief
Compliance Unit

Enclosures: Attachment A CAP Response Form

cc: Vickshna Anand, Contract Manager
Department of Health Care Services
Medi-Cal Managed Care Division
P.O. Box 997413, MS 4408
Sacramento, CA 95899-7413



ATTACHMENT A

Plan: SCAN

Audit Type: Medical Audit

Corrective Action Plan Response Form

Review Period: 3/1/19-2/29/20

Onsite Review: 3/02/20-3/13/20

MCPs are required to provide a CAP and respond to all documented deficiencies within 30 calendar days, unless an alternative timeframe is indicated in the letter. MCPs are required to submit the CAP in word format that will reduce turnaround time for DHCS to complete its review.

The CAP submission must describe the plan of action taken to correct the deficiency, and the operational results of that action. For deficiencies that require short-term corrective action, implementation should be completed within 30 calendar days. For deficiencies that require long-term corrective action or a period longer than 30 calendar days for implementation, the MCP must demonstrate it has taken remedial action and is making progress toward achieving an acceptable level of compliance. The MCP will be required to include the date when full compliance is expected to be achieved. **Policies and procedures submitted during the CAP process must still be sent to the MCP's Contract Manager for review and approval in accordance with existing requirements.**

DHCS will maintain close communication with the MCP throughout the CAP process and provide technical assistance to ensure the MCP provides sufficient documentation to correct deficiencies. Depending on the volume and complexity of deficiencies identified, DHCS may require the MCP to provide weekly updates, as applicable.

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* <small>(*Short-Term, Long-Term)</small>	DHCS Comments
4. Member Rights				
<p>4.1.1 Reading Level of Grievance Notification Letters</p> <p>Grievance acknowledgement and resolution letters sent to members were not written at a sixth grade reading level. The Plan did not have a monitoring system in place to ensure written information provided to members contained the required reading level.</p>	<p>The Grievance and Appeals Department (GAD) has implemented the following Readability Requirement:</p> <ol style="list-style-type: none"> 1.Coordinators validate that the free text entered does not exceed a 6th grade reading level. 2.Coordinators save a screenshot copy of the readability verification as an attachment in the case. 3.Prior to case closure, Management reviews the case and validates that the Readability screenshot is attached for both the acknowledgement and resolution letter(s). 4.Management will also validate that the readability did not exceed 6th grade reading level 	<p>Grievance and Appeal - Staff Training Material.pdf</p>	<p>Full Implementation Date: April 7, 2020</p>	<p>07/13/20- The following documentation supports the MCP’s efforts to correct this finding:</p> <p>- Grievance and Appeal Staff Training Material (06/11/2020) is evidence that staff has received training in regards to grievance acknowledgement and resolution letters to ensure they are being written at a sixth grade level.</p> <p>07/22/20- The following additional documentation supports the MCP’s efforts to correct this finding:</p> <p>- Desktop procedure, “DHCS Letter Readability Verification (07/06/2020)”serves as evidence that customer services staff received guidance on grievance and appeals closure letters being at a 6th grade reading level. The procedure also ensures that the GAD coordinator will</p>

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	<p>Readability Tool:</p> <ul style="list-style-type: none"> - GAD is utilizing the Microsoft - Word built in Readability Tool: Flesch-Kincaid Reading Level tool. - This built in Readability tool is available to all Staff. - All Staff was provided training on utilizing the readability tool, which included turning on the build-in feature within Microsoft Word. 			<p>verify the letters are at the aforementioned level. The staff will be utilizing the MedHOK (MOK) System, and pasting the letter into a word document and apply the Flesch-Kincaid pop-up to ensure the reading level is less than a 6.9 reading level.</p> <p>- Sample G & A Readability letters confirm the MCP has reviewed letters and they are being properly screened and written at a 6th grade level as they include a screen shot of the Fleish-Kincaid Tool on each grievance letter.</p> <p>- GAD Coordinator Meeting Agenda (04/07/2020) , G & A Staff Training Power-point, and sign-in sheet, is evidence of the staff training to discuss readability requirements and how to simplify documents to ensure letters are being properly screened and written at a 6th grade reading level.</p>

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* <small>(*Short-Term, Long-Term)</small>	DHCS Comments
				This finding is closed

Ginette Hawkins

Submitted by:
Title: VP Compliance, Compliance Officer

Date: 07/09/2020