



March 8, 2024

THIS LETTER SENT VIA EMAIL TO: auhring@countyofcolusa.co

Ms. Audrey Uhring, LCSW, Deputy Director
Colusa County Department of Behavioral Health
162 E. Carson Street
Colusa, CA 95932

SUBJECT: ANNUAL COUNTY COMPLIANCE SECTION DMC FINDINGS REPORT

Dear Deputy Director Uhring:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Drug Medi-Cal (DMC) Intergovernmental Agreement operated by Colusa County.

The County Compliance Section (CCS) within DHCS' Audits and Investigations (A&I) conducted a review of the County's compliance with Federal and State regulations, program requirements and contractual obligations based on supporting documentation and interviews with County staff. Enclosed are the results of Colusa County's Fiscal Year (FY) 2023-24 DMC compliance review. The report identifies deficiencies, advisory recommendations, and referrals for technical assistance.

Colusa County is required to submit a Corrective Action Plan (CAP) addressing each compliance deficiency (CD) noted to DHCS' Medi-Cal Behavioral Health – Oversight and Monitoring Division (MCBH-OMD), County/Provider Operations and Monitoring Branch (CPOMB) Liaison by 5/7/2024. Please use the enclosed CAP form to submit the completed CAP and supporting documentation via the MOVEit Secure Managed File Transfer System. For instructions on how to submit to the correct MOVEit folder, email MCBHOMEMonitoring@dhcs.ca.gov.

If you have any questions, please contact me at susan.volmer@dhcs.ca.gov.

Sincerely,

Susan Volmer | County Compliance Monitoring II Analyst

Distribution:

To: Deputy Director Uhring,

Cc: Mateo Hernandez, Audits and Investigations, Contract and Enrollment Review
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MCBHOMDMonitoring@dhcs.ca.gov, County/Provider Operations and
Monitoring Branch

Jeannie Armstrong, Colusa County Clinical Program Manager, Quality Assurance

COUNTY REVIEW INFORMATION

County:

Colusa

County Contact Name/Title:

Jeannie Armstrong/Clinical Program Manager, Quality Assurance

County Address:

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Colusa, CA 95932

County Phone Number/Email:

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Date of Review:

12/13/2023

Lead CCM Analyst:

Becky Counter

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Report Prepared by:

Susan Volmer

Report Approved by:

Ayesha Smith

REVIEW SCOPE

I. Regulations:

- a. California Code of Regulations, Title 22, section 51341.1, 51490.1 and 51516.1 – Drug Medi-Cal Substance Use Disorder Services
- b. California Code of Regulations, Title 9, Division 4: Department of Alcohol and Drug Programs
- c. Health and Safety Code, Division 10.5, Section 11750 – 11970: Alcohol and Drug Programs
- d. Welfare and Institutions Code, Division 9, Part 3, Chapter 7, Sections 14000, et seq.; 14100.2, 14021, 14021.51-14021.53, 14021.6, and 14124.20-14124.25, 14184.402, 14059.5: Basic Health Care – Drug Medi-Cal Treatment Program

II. Program Requirements:

- a. Fiscal Year (FY) 2022-23 DMC Intergovernmental Agreement (IA)
- b. State of California *Adolescent Best Practices Guidelines October 2020*
- c. DHCS' *Perinatal Practice Guidelines FY 2018-19*
- d. DHCS' *Minimum Quality Drug Treatment Standards (Document 2F(a))*
- e. National Culturally and Linguistically Appropriate Services (CLAS)
- f. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
- g. Behavioral Health Information Notices (BHIN)

SUMMARY OF FY 2023-24 COMPLIANCE DEFICIENCIES (CD)

<u>Category</u>	<u>Number of CDs</u>
1.0 Availability of DMC Services	4
2.0 Care Coordination	0
3.0 Quality Assurance and Performance Improvement	5
4.0 Access and Information Requirements	1
5.0 Coverage and Authorization of Services	0
6.0 Beneficiary Rights and Protections	2
7.0 Program Integrity	1

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the DMC Contract, Exhibit A, Attachment I A1, Part I, Section 4, B, 6 a-b each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.

Please provide the following within the completed FY 2023-24 CAP:

- a) A statement of the CD.
- b) A list of action steps to be taken to correct the CD.
- c) A date of completion for each CD.
- d) The name of the person who will be responsible for corrections and ongoing compliance.

The CPOMB analyst will monitor progress of the CAP completion.

Category 1: AVAILABILITY OF DMC SERVICES

A review of the County's records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiencies were identified:

COMPLIANCE DEFICIENCIES:

CD 1.1.1:

DMC Contract, Exhibit A, Attachment I, Part I, Section 2 Covered Services, A covered Services, 1 a-e

Covered Services

Contractor shall establish assessment and referral procedures and shall arrange, provide, or subcontract for covered services in the Contractor's service area. Covered services include:

- a. Outpatient Drug-Free Treatment
- b. Narcotic Treatment Program Services
- c. Naltrexone Treatment
- d. Intensive Outpatient Treatment
- e. Perinatal Residential Substance Abuse Services (excluding room and board)

MHSUDS Information Notice No: 18-009

The DMC contract between the Department and a contracting county specifies that the contracting county "shall establish assessment and referral procedures and shall arrange, provide, or subcontract for covered services in the Contractor's service area." (See Fiscal Year 2017-2020 DMC Contract, Exhibit A, Attachment I, Part I, Section 2, Subsection A, Paragraph 1.) The contract goes on to define "covered services" to include the following:

- a) Outpatient drug-free treatment;
- b) Narcotic replacement therapy;
- c) Naltrexone treatment;
- d) Intensive Outpatient Treatment; and
- e) Perinatal Residential Substance Abuse Services (excluding room and board).

(DMC Contract, Exhibit A, Attachment I, Part I, Section 2, Subsection A, Paragraph 1) The contract further requires that a contracting county “maintain continuous availability and accessibility of covered services and facilities, service sites, and personnel to provide the covered services.” (DMC Contract, Exhibit A, Attachment I, Part I, Section 2, Subsection B, Paragraph 1.) These services must be provided to Medi-Cal beneficiaries with reasonable promptness, may not be limited due to budgetary constraints, and must be provided to requesting beneficiaries without regard to the county of residence (DMC Contract, Exhibit A, Attachment I, Part I, Section 2, Subsection B, Paragraphs 1 and 2.). A referral to a non-contracting provider or to another county without an appropriate funding agreement does not fulfill a county’s contractual obligation to arrange, provide or subcontract for DMC services.

Findings: The County did not provide evidence demonstrating how it arranges, provides, or subcontracts for the following DMC Service:

- Naltrexone Treatment

CD 1.1.4:

DMC Contract, Exhibit A, Attachment I, Part I, Section 2 Covered Services, 1, c

The Contractor shall require that treatment programs are accessible to people with disabilities in accordance with Title 45, Code of Federal Regulations (hereinafter referred to as CFR), Part 84, the Americans with Disabilities Act, and other State and federal regulations and laws.

Findings: The County did not provide evidence that treatment programs are accessible to people with disabilities in accordance with Title 45, Code of Federal Regulations (hereinafter referred to as CFR), Part 84, the Americans with Disabilities Act, and other State and federal regulations and laws.

CD 1.3.2:

DMC Contract, Exhibit A, Attachment I, Part I, Section 3, DMC Certification and Continued Certification, A, 3

The Contractor shall require that providers of perinatal DMC comply with the requirements contained in Title 22, Section 51341.1, Services for Pregnant and Postpartum Women.

Findings: The County did not provide evidence that providers of perinatal DMC comply with the requirements contained in Title 22, Section 51341.1, Services for Pregnant and Postpartum Women, specifically:

- Any of the substance use disorder services listed in Subsection (d) shall be reimbursed at enhanced perinatal rates pursuant to Section 51516.1(a)(3) only when delivered by providers who have been certified pursuant to Section 51200 to provide perinatal Medi-Cal services to pregnant and postpartum women.
- Only pregnant and postpartum women are eligible to receive residential substance use disorder services.
- Perinatal services shall address treatment and recovery issues specific to pregnant and postpartum women, such as relationships, sexual and physical abuse, and development of parenting skills.
- Mother/child habilitative and rehabilitative services (i.e., development of parenting skills, training in child development, which may include the provision of cooperative childcare pursuant to Health and Safety Code Section 1596.792).
- Service access (i.e., provision of or arrangement for transportation to and from medically necessary treatment).

CD 1.4.6:

DMC Contract, Exhibit A, Attachment I, Part II General, E

Counselor Certification

Any counselor or registrant providing intake, assessment of need for services, treatment or recovery planning, individual or group counseling to participants, patients, or residents in a DHCS licensed or certified program is required to be registered or certified as defined in Title 9, Division 4, Chapter 8 (Document 3H).

Findings: The County did not provide evidence it ensures County and subcontractor counselors are certified and re-certified timely as defined in CCR, *Title 9, Division 4, Chapter 8*.

Category 3: QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT

A review of the County's Quality Assurance and Performance Improvement program was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiencies were identified:

COMPLIANCE DEFICIENCIES:

CD 3.1.4:

DMC Contract, Exhibit A, Attachment I, Part I, Section 4 Monitoring, B, 5, a

The Contractor shall notify DHCS' Data Management, Reporting, and Evaluation Section by email at DHCSMPF@dhcs.ca.gov of the termination of any contract with a subcontractor, and the basis for termination of the contract, within five business days of the termination.

Findings: The County did not provide evidence it notifies DHCS by email at DHCSMPF@dhcs.ca.gov regarding the termination of any contract with a subcontractor, and the basis for termination of the contract, within five business days of the termination.

CD 3.2.5:

DMC Contract, Exhibit A, Attachment I, Part I, Section 3 DMC Certification and Continued Certification, A, 4, c

The Contractor's subcontracts shall require that providers comply with the following regulations and guidelines, including, but not limited to:
Minimum Quality Treatment Standards, (Document 2F(a))

Minimum Quality Drug Treatment Standards Document 2F(a), A, 5

Written roles and responsibilities...for the medical director shall be clearly documented, signed and dated by a program representative and physician.

Findings: The County did not provide evidence that the County Medical Director's Roles and Responsibilities document includes all required elements according to the Minimum Quality Drug Treatment Standards. The following required element is missing, specifically:

- Is signed and dated by a program representative.

CD 3.2.7:

DMC Contract, Exhibit A, Attachment I, Part I, Section 3 DMC Certification and Continued Certification, A, 4, c

The Contractor's subcontracts shall require that providers comply with the following regulations and guidelines, including, but not limited to:

Minimum Quality Treatment Standards, (Document 2F(a))

Minimum Quality Drug Treatment Standards Document 2F(a), B, 1, a i-iv

Program Management

Admission or Readmission

Each program shall include in its policies and procedures written admission and readmission criteria for determining beneficiary's eligibility and suitability for treatment.

These criteria shall include, at minimum:

- i. DSM diagnosis;
- ii. Use of alcohol/drugs of abuse;
- iii. Physical health status; and
- iv. Documentation of social and psychological problems.

Findings: The County did not provide evidence that the County's policies and procedures include admission and readmission criteria for determining client's eligibility and suitability for treatment. Specifically, the following required element(s) is/are missing:

- DSM diagnosis.

CD 3.2.9:

DMC Contract, Exhibit A, Attachment I, Part I, Section 3 DMC Certification and Continued Certification, A, 4, c

The Contractor's subcontracts shall require that providers comply with the following regulations and guidelines, including, but not limited to:

Minimum Quality Treatment Standards, (Document 2F(a))

Minimum Quality Drug Treatment Standards Document 2F(a), B, 1, f, i

Copies of the following documents shall be provided to the beneficiary upon admission: Beneficiary rights, share of cost if applicable, notification of DMC funding accepted as payment in full, and consent to treatment.

Findings: The County did not provide evidence demonstrating compliance with ensuring required documents are provided to clients. The following required document was not provided to clients, specifically:

- Notification of DMC funding accepted as payment in full.

CD 3.4.1:

DMC Contract, Exhibit A, Attachment I, Part III Reporting Requirements, C, 3-8

California Outcomes Measurement System for Treatment (CalOMS-Tx)

The CalOMS-Tx Business Rules and Requirements are:

3. Electronic submission of CalOMS-Tx data shall be submitted by the Contractor within 45 days from the end of the last day of the report month.
4. The Contractor shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (Document 3J) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS-Tx data collection.
5. The Contractor shall submit CalOMS-Tx admission, discharge, annual update, resubmissions of records containing errors or in need of correction, and “provider no activity” report records in an electronic format approved by DHCS.
6. The Contractor shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS identified in Document 3S for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method.
7. The Contractor shall participate in CalOMS-Tx informational meetings, trainings, and conference calls.
8. The Contractor shall implement and maintain a system for collecting and electronically submitting CalOMS-Tx data.

Findings: The County’s Open Provider report is not in compliance.

Category 4: ACCESS AND INFORMATION REQUIREMENTS

A review of the County's Access and Information Requirements was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiency was identified:

COMPLIANCE DEFICIENCY:

CD 4.1.1:

DMC Contract, Exhibit A, Attachment I, Part II General, S

Nondiscrimination Notice, Nondiscrimination Statement, and Taglines (45 C.F.R. § 92.8)

1. The Contractor shall post a DHCS-approved nondiscrimination notice and language taglines in at least the top 16 non-English languages in the State (as determined by DHCS), as well as large print, explaining the availability of free language assistance services, including written translation and oral interpretation to understand the information provided, and the toll-free and TTY/TOY telephone number of the Contractor's member/customer service unit, as follows:
 - a) In all conspicuous physical locations where the Contractor interacts with the public.
 - b) In a conspicuous location on the Contractor's website that is accessible on the Contractor's home page, and in a manner that allows beneficiaries and prospective beneficiaries to easily locate the information.
 - c) In all significant communications and significant publications targeted to beneficiaries, enrollees, applicants, and members of the public, except for significant publications and significant communications that are small-sized, such as postcards and tri-fold brochures.
2. The Contractor shall post a DHCS-approved nondiscrimination statement and language taglines in at least the top two non-English languages in the State (as determined by DHCS), explaining the availability of free language assistance services, and the toll-free and TTY/TOY telephone number of the Contractor's member/customer service unit, as follows:
 - a) In all significant publications and significant communications that are small-sized, such as postcards and tri-fold brochures.
3. The Contractor's nondiscrimination notice, nondiscrimination statement, and language taglines must be in a conspicuously visible font size no smaller than 12 points. Any large print tagline required must be in a font size no smaller than 18 point and must include information on how to request auxiliary aids and services,

including the provision of the materials in alternative formats.

Findings: The County did not provide evidence it posted a nondiscrimination statement and language taglines in at least the top two non-English languages in the State, explaining the availability of free language assistance services, and the toll-free and TTY/TOY telephone number of the Contractor's member/customer service unit in all significant publications and significant communications that are small-sized, such as postcards and tri-fold brochures.

Category 6: BENEFICIARY RIGHTS AND PROTECTIONS

A review of the County's Beneficiary Rights and Protections was conducted to ensure compliance with applicable Federal and State regulations, program requirements and contractual obligations. The following deficiencies were identified:

COMPLIANCE DEFICIENCIES:

CD 6.4.14:

BHIN 22-070

The NAR "Your Rights" attachment provides beneficiaries with the following required information pertaining to NAR:

1. The beneficiary's right to request a State hearing no later than 120 calendar days from the date of the Plan's written appeal resolution and instructions on how to request a State hearing; and,
2. The beneficiary's right to request and receive continuation of benefits while the State hearing is pending and instructions on how to request continuation of benefits, including the timeframe in which the request shall be made (i.e., within ten days from the date the letter was post-marked or delivered to the beneficiary).

Counties shall use the appropriate NAR form and "Your Rights" attachments contained in this BHIN to notify beneficiaries of their rights.

Findings: The County did not provide evidence it utilizes the revised NAR templates and corresponding "Your Rights" attachments included in BHIN 22-070.

CD 6.5.2:

DMC Contract, Exhibit A, Attachment I, Part II General, L, 12

Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2, Subparts A – E).

Findings: The County did not provide evidence demonstrating compliance with Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2, Subparts A – E).

Category 7: PROGRAM INTEGRITY

A review of the County's Program Integrity was conducted to ensure compliance with applicable Federal and State regulations, program requirements, and contractual obligations. The following deficiency was identified:

COMPLIANCE DEFICIENCY:

CD 7.1.3:

DMC Contract, Exhibit A, Attachment I, Part I, Section 4 Monitoring, B, 3, d

The Contractor shall be responsible for investigating complaints and providing the results of all investigations to DHCS by secure, encrypted e-mail to:

MCBHDMonitoring@dhcs.ca.gov within two business days of completion.

Findings: The County did not provide evidence it investigated complaints and provided the results of all investigations to DHCS by secure, encrypted e-mail to: MCBHDMonitoring@dhcs.ca.gov within two business days of completion.

TECHNICAL ASSISTANCE

Colusa County did not request technical assistance during this review.