



November 27, 2023

THIS LETTER SENT VIA EMAIL TO: roldham@placer.ca.gov

Robert Oldham, Director
Placer County Health and Human Services
3901 County Center Drive, Suite 290
Auburn, CA 95603

SUBJECT: ANNUAL COUNTY COMPLIANCE SECTION DMC-ODS FINDINGS
REPORT

Dear Director Oldham:

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

The County Compliance Section (CCS) within Audits and Investigations (A&I) of DHCS 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 Placer County's Fiscal Year (FY) 2023-24 DMC-ODS compliance review. The report identifies deficiencies, advisory recommendations, and referrals for technical assistance.

Placer County is required to submit a Corrective Action Plan (CAP) addressing each compliance deficiency (CD) to DHCS' Medi-Cal Behavioral Health – Oversight and Monitoring Division (MCBH-OMD), County/Provider Operations and Monitoring Branch (CPOMB) Liaison by 1/26/2024. 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 MCBHOMDMonitoring@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: Director Oldham;

Cc: Mateo Hernandez, Audits and Investigations, Contract and Enrollment Review
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Catherine Hicks, Audits and Investigations, Behavioral Health Review Branch
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MCBHOMDMonitoring@dhcs.ca.gov, County/Provider Operations and
Monitoring Branch
Susan Stephens, Placer County QM Staff Services Analyst
Amy Ellis, Placer County Adult System of Care Behavioral Health Director

COUNTY REVIEW INFORMATION

County:

Placer

County Contact Name/Title:

Susan Stephens, QM Staff Services Analyst

County Address:

3901 County Center Drive, Suite 290
Auburn, CA 95603

County Phone Number/Email:

SStephens@placer.ca.gov
530-889-7285

Date of DMC-ODS Implementation:

11/1/18

Date of Review:

9/28/23

Lead CCM Analyst:

Susan Volmer

Assisting CCM Analyst:

N/A

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-ODS 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)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 9/28/2023. The following individuals were present:

- Representing DHCS:
Susan Volmer, County Compliance Monitoring Analyst II (CCM II)
- Representing Placer County:
Susan Stephens, QM Staff Services Analyst
Scott Genschmer, SUD program manager
Dan Apgar, Program Supervisor, Substance Use Services
Amy Ellis, Adult System of Care Behavioral Health Director
Megan Jones, Ongoing Children's BH Supervisor
Kelly Couture, QA Program Supervisor
Leslie Roth, Program Manager CSOC
Twylla Abrahamson, Director Children's System of Care
Julia Soto, QM Program Manager
Amy Haynes, ASOC Assistant Director
Russell Graham, Supervising Accountant Behavioral Health

During the Entrance Conference, the following topics were discussed:

- Introductions
- DHCS overview of review process
- Placer County overview of services

Exit Conference:

An Exit Conference was conducted via WebEx on 9/28/2023. The following individuals were present:

- Representing DHCS:
Susan Volmer, CCM II Analyst

- Representing Placer County:
Susan Stephens, QM Staff Services Analyst
Scott Genschmer, SUD program manager
Dan Apgar, Program Supervisor, Substance Use Services
Amy Ellis, Adult System of Care Behavioral Health Director
Megan Jones, Ongoing Children's BH Supervisor
Kelly Couture, QA Program Supervisor
Leslie Roth, Program Manager CSOC
Twylla Abrahamson, Director Children's System of Care
Julia Soto, QM Program Manager
Amy Haynes, ASOC Assistant Director
Russell Graham, Supervising Accountant Behavioral Health

During the Exit Conference, the following topics were discussed:

- Submitting follow-up evidence
- Due date for evidence submission

SUMMARY OF FY 2023-24 COMPLIANCE DEFICIENCIES (CD)

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

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the Intergovernmental Agreement, Exhibit A, Attachment I, Part III, Section QQ 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 list of action steps to be taken to correct the CD.
- b) The name of the person who will be responsible for corrections and ongoing compliance.
- c) Provide a specific description on how ongoing compliance is ensured.
- d) A date of completion for each CD.

The CPOMB liaison will monitor progress of the CAP completion.

Category 5: COVERAGE AND AUTHORIZATION OF SERVICES

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

COMPLIANCE DEFICIENCIES:

CD 5.1.4:

DMC-ODS Contract, Exhibit A Attachment I, Section III Program Specifications, I, 1, iv-v

- iv. Length of stay for adults, ages 21 and over, and adolescents, under the age of 21, shall be determined by an LPHA and authorized by DMC-ODS plans as medically necessary.
- v. Ensure that the length of residential services comply with the following:
 - a. The goal for a statewide average length of stay for residential services of 30 days is not a quantitative treatment limitation or hard "cap" on individual stays.
 - b. Lengths of stay in residential treatment settings shall be determined by individualized clinical need.
 - c. The Contractor shall ensure that beneficiaries receiving residential treatment are transitioned to another level of care when clinically appropriate based on treatment progress.
 - d. The Contractor shall adhere to the length of stay monitoring requirements set forth by DHCS and length of stay performance measures established by DHCS and reported by the external quality review organization.
 - e. Nothing in the DMC-ODS overrides any EPSDT requirements. EPSDT beneficiaries may receive a longer length of stay based on medical necessity.
 - f. If determined to be medically necessary, perinatal beneficiaries may receive a longer length of stay than those described above.

Findings: The Plan did not provide evidence it ensures that the length of residential services complies with the following:

- Nothing in the DMC-ODS overrides any EPSDT requirements. EPSDT beneficiaries may receive a longer length of stay based on medical necessity.
- If determined to be medically necessary, perinatal beneficiaries may receive a longer length of stay than those described above.

CD 5.3.1:

DMC-ODS Contract, Exhibit A Attachment I, Section III Program Specifications, LL, 4, c-g)

Open Admission and Open Provider Reporting

- c. Electronic submission of CalOMS-Tx data shall be submitted by Contractor within 45 days from the end of the last day of the report month.
- d. 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 and reporting requirements.
- e. 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.
- f. 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.
- g. Contractor shall participate in CalOMS-Tx informational meetings, trainings, and conference calls.

Findings: The Plan’s Open Admissions report is not in compliance.

TECHNICAL ASSISTANCE

Placer County did not request technical assistance during this review.