Medi-Cal Behavioral Health Corrective Action Plan (CAP)

LASSEN

Compliance Review Date: 6/4/2024

Corrective Action Plan Fiscal Year: 23/24

SMHS

Deficiency Number and Finding	Corrective Action Description and Mechanism for Monitoring	Corrective Action Implementation Date	Evidence of Correction	DHCS Response
1.2.1 Provision of TFC Services - Finding: The Plan did not ensure the provision of TFC services to children and youth who met beneficiary access and medical necessity criteria for SMH	11/26/2024: Lassen County has requested Technical Assistance from DHCs since the County has already went out for Request for Proposals and no responses.	1/1/2025	Request for Proposal 2024	
4.2.1 24/7 Access Line Required Inform - Finding: The Plan did not ensure its 24/7 Access Line provided	11/26/2024: LCBH has placed contracted After-Hours provider in Corrective Action Plan to ensure 24/7 access line provided required information	12-31-2024	Alameda After-Hours CAP The next Test call Quarterly	

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required information regarding how to access SMHS or how to treat a beneficiary's urgent condition.	regarding how to Access SMHS and how to treat a beneficiaries' urgent condition. LCBH did increase test calls per month regarding Urgent conditions 11-15-2024.			
6.1.1 Discrimination Grievances - Finding: The Plan did not designate a Discrimination Grievance Coordinator or adopt procedures to resolve discrimination-related complaints	11/26/2024: LCBH has created a policy which designated a Discrimination Grievance Counselor.	11/26/2024	Policy BH 24-05 pg. 2	

Submitted by: Tiffany Armstrong **Date: 11/26/2024**

Title: Director LCBH