

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



May 24, 2021

Sent via e-mail to: <a href="mailto:mcranfill@amadorgov.org">mcranfill@amadorgov.org</a>

Director Melissa Cranfill Amador County Behavioral Health 10877 Conductor Blvd., Suite 300 Sutter Creek, CA 95685

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Cranfill:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Amador County.

The County Compliance Unit (CCU) within the Audits and Investigations Division (A&I) of DHCS conducted a review of the County's compliance with contract requirements based on responses to the monitoring instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Amador County's Fiscal Year 2020-21 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Amador County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 7/24/2021. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions, please contact me at <a href="mailto:emanuel.hernandez@dhcs.ca.gov">emanuel.hernandez@dhcs.ca.gov</a>.

Sincerely,

Emanuel Hernandez (916) 713-8667 emanuel.hernandez@dhcs.ca.gov.

Audits and Investigations Division Medical Review Branch Behavioral Health Compliance Section County Compliance Unit 1500 Capitol Ave., MS 2305 Sacramento, CA 95814 http://www.dhcs.ca.gov

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### **COUNTY REVIEW INFORMATION**

# County:

Amador

# **County Contact Name/Title:**

Amy Hixson/Health Care Program Manager

# **County Address:**

10877 Conductor Blvd., Suite 300, Sutter Creek, CA 95685

# **County Phone Number/Email:**

(209) 223-6548 ahixson@amadorgov.org

### **Date of Review:**

1/21/2021

### **Lead CCU Analyst:**

Emanuel Hernandez

# **Assisting CCU Analyst:**

Susan Volmer

# Report Prepared by:

Emanuel Hernandez

# Report Approved by:

Ayesha Smith

### **REVIEW SCOPE**

### I. Regulations:

- a. California Code of Regulations, Title 22, section 51341.1 Drug Medi-Cal Substance Use Disorder Services
- b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
- c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
- d. Health and Safety Code, Division 10.5, Section 11750 11970: Alcohol and Drug Programs

### II. Program Requirements:

- a. Fiscal Year (FY) 2020-21 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
- b. State of California Youth Treatment Guidelines Revised August 2002
- c. DHCS Perinatal Practice Guidelines FY 2018-19
- d. National Culturally and Linguistically Appropriate Services (CLAS)
- e. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
- f. Behavioral Health Information Notices (BHIN)

### ENTRANCE AND EXIT CONFERENCE SUMMARIES

### **Entrance Conference:**

An Entrance Conference was conducted via WebEx on 1/21/2021. The following individuals were present:

• Representing DHCS:

Emanuel Hernandez, Associate Governmental Program Analyst (AGPA) Susan Volmer, Associate Governmental Program Analyst (AGPA)

Representing Amador County:
 Melissa Cranfill/Health Care Program Director
 Amy Hixson/Health Care Program Manager
 Stephanie Hess/MHSA Coordinator

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of the Monitoring Process
- Amador County Overview of Services

### **Exit Conference:**

An Exit Conference was conducted via WebEx on 1/21/2021. The following individuals were present:

 Representing DHCS: Emanuel Hernandez, AGPA Susan Volmer, AGPA

Representing Amador County:
 Melissa Cranfill/Health Care Program Director
 Amy Hixson/Health Care Program Manager
 Stephanie Hess/MHSA Coordinator

During the Exit Conference, the following topics were discussed:

- Review of Compliance Deficiencies
- Follow Up Deadlines

# **SUMMARY OF FY 2020-21 COMPLIANCE DEFICIENCIES (CD)**

	<u>Section</u>	Number of CD's
1.0	Administration	2
2.0	Prevention	0
3.0	Perinatal	0
4.0	Adolescent/Youth Treatment	0
5.0	Data/CalOMS	0
6.0	Program Integrity	2
7.0	Fiscal	0

# **CORRECTIVE ACTION PLAN (CAP)**

Pursuant to the <u>SABG County Application</u>, <u>Enclosure 1</u>, <u>Part I</u>, <u>Section 3</u>, <u>B</u>, <u>5-8</u> 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 2020-21 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 PMFS analyst will monitor progress of the CAP completion.

# **Category 1: ADMINISTRATION**

A review of the County's Maintenance of Records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

### **COMPLIANCE DEFICIENCIES:**

#### CD 1.2.4:

### SABG Application, Enclosure 2, I. 3, C

C. Sub-recipient Pre-Award Risk Assessment

County shall comply with the sub-recipient pre-award risk assessment requirements contained in 45 CFR 72.205 (HHS awarding agency review of risk posed by applicants). County shall review the merit and risk associated with all potential subcontractors annually prior to making an award.

County shall perform and document annual sub-recipient pre-award risk assessments for each subcontractor and retain documentation for audit purposes.

**Findings:** The County did not provide evidence the County completes sub-recipient pre-award risk assessments with all potential subcontractors annually prior to making an award.

### CD: 1.5.7:

### SABG Application Enclosure 2, II, 6

6. Restriction on Distribution of Sterile Needles

No SABG funds made available through this Contract shall be used to carry out any program that includes the distribution of sterile needles or syringes for the hypodermic injection of any illegal drug unless DHCS chooses to implement a demonstration syringe services program for injecting drug users.

### SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

**Findings:** The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, including the Restriction on Distribution of Sterile Needles.

# **Category 6: PROGRAM INTEGRITY**

### **COMPLIANCE DEFICIENCIES:**

### CD 6.1.2:

### SABG Application Enclosure 2, I, 1, A, 3-4

- 3. County shall adhere to the applicable provisions of Title 45, CFR, Part 75 and Part 96 in the expenditure of SABG funds.
- 4. County and all its subcontractors shall comply with the Minimum Quality Drug Treatment Standards for SABG for all Substance Use Disorder (SUD) treatment programs either partially or fully funded by SABG. The Minimum Quality Drug Treatment Standards for SABG are attached to this Contract in Enclosure 4.

**Findings:** The County did not make available evidence to support subcontracted providers are monitored for the Minimum Quality Drug Treatment Standards.

### CD 6.1.3:

### SABG Application Enclosure 2, I, 3, A, 1, a-e

- County's performance under the County Performance Contract and the SABG County Application shall be monitored by DHCS during the term of the County Performance Contract. Monitoring criteria shall include. but not be limited to:
  - a. Whether the quantity of work or services being performed conforms to Enclosure 3.
  - b. Whether the County has established and is monitoring appropriate quality standards.
  - c. Whether the County is abiding by all the terms and requirements of this Contract.
  - d. Whether the County is abiding by the terms of the Perinatal Practice Guidelines.
  - e. Whether the County conducted annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. County shall submit copy of its monitoring and audit reports to DHCS within two weeks of issuance. Reports shall be sent by secure, encrypted e-mail to:

SUDCountyReports@dhcs.ca.gov or

Audits and Investigations Division Medical Review Branch Department of Health Care Services PO Box 997413, MS-2703 Sacramento, CA 95899-7413

**Findings:** The County did not make available evidence it conducts an onsite monitoring review of each County managed and County subcontracted program providing SABG funded services.

• The County monitored zero (0) of two (2) SABG funded providers and submitted no audit reports of these annual reviews to DHCS.

# TECHNICAL ASSISTANCE

No technical assistance was requested by the County.