

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



September 1, 2021

Sent via e-mail to: Suzanne.Tavano@cchealth.org

Director Suzanne Tavano Contra Costa County Behavioral Health Alcohol and Other Drug Services 1220 Morello Ave., Suite 101

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Tavano,

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 Contra Costa 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 Contra Costa County's Fiscal Year 2020-21 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Contra Costa 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 11/01/2021. 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 emanuel.hernandez@dhcs.ca.gov.

Sincerely,

Emanuel Hernandez

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

Distribution:

To: Director Tavano,

CC: Mateo Hernandez, Audits and Investigations, Medical Review Branch Acting Chief Lanette Castleman, Audits and Investigations, Behavioral Health Compliance Section Chief Ayesha Smith, Audits and Investigations, Behavioral Health Compliance Unit Chief Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief Tracie Walker, Community Services Division, Community Support Branch Chief Victoria King-Watson, Community Services Division, Operations Branch Chief Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief Jessica Fielding, Community Services Division, Family Services Section Chief Angelina Azevedo, Community Services Division, Prevention Services Unit Chief Ashlev Love, Community Services Division, Family Services Unit Chief Denise Galvez, Community Services Division, Youth Services Section Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch Fatima Matal Sol, Contra Costa Program Chief Alcohol and Other Drug Services Behavioral Health Division

COUNTY REVIEW INFORMATION

County:

Contra Costa

County Contact Name/Title:

Fatima Matal Sol/Program Chief

County Address:

1220 Morello Avenue, Suite 101 Martinez, CA 94553

County Phone Number/Email:

(925) 335-3307 Fatima.MatalSol@cchealth.org

Date of Review:

4/1/2021

Lead CCU Analyst:

Emanuel Hernandez

Assisting CCU Analyst:

Katrina Beedy

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 4/1/2021. The following individuals were present:

Representing DHCS:

Emanuel Hernandez, Associate Governmental Program Analyst (AGPA) Katrina Beedy, AGPA

Representing Contra Costa County:

Fatima Matal Sol, Program Chief Alcohol and Other Drug Services
Michelle Richardson, AOD Adult Clinical Support and Care Coordinator
Mark Messerer, AOD Program Manager – Quality Management and Access Line
Christopher Pedraza, Contracts, Grants and Discovery House
Danelyn Razon, HSD Finance AODS
Alicia Permento, Accountant Manager HSD Finance

During the Entrance Conference, the following topics were discussed:

Introductions

Overview of the monitoring process

Contra Costa County overview of services

Exit Conference:

An Exit Conference was conducted via WebEx on 04/01/2021. The following individuals were present:

Representing DHCS:

Emanuel Hernandez, AGPA

Katrina Beedy, AGPA

Representing Contra Costa County:

Fatima Matal Sol, Program Chief Alcohol and Other Drug Services
Michelle Richardson, AOD Adult Clinical Support and Care Coordinator
Mark Messerer, AOD Program Manager – Quality Management and Access Line
Christopher Pedraza, Contracts, Grants and Discovery House
Danelyn Razon, Health Safety Division Finance AODS
Alicia Permento, Accountant Manager HSD Finance

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	3
2.0	Prevention	0
3.0	Perinatal	1
4.0	Adolescent/Youth Treatment	0
5.0	Data/CalOMS	2
6.0	Program Integrity	1
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 1.2.3:

SABG Application, Enclosure 2, I, 1, A, 1, f-g

- 1. Performance under the terms of this Enclosure is subject to all applicable federal and state laws, regulations, and standards. In accepting DHCS drug and alcohol SABG allocation pursuant to HSC Sections 11814(a) and (b), County shall: (i) establish, and shall require its subcontractors to establish, written policies and procedures consistent with the control requirements set forth below; (ii) monitor for compliance with the written procedures; and (iii) be accountable for audit exceptions taken by DHCS against the County and its subcontractors for any failure to comply with these requirements:
 - f. Code of Federal Regulations (CFR), Title 45, Part 75, Uniform Administration Requirements, Cost Principles, and Audit Requirements for Federal Awards.
 - g. CFR, Title 45, Part 96, Block Grants.

45 CFR 75.329(f) (1-4)

- (f) Procurement by noncompetitive proposals. Procurement by noncompetitive proposals is procurement through solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:
 - (1) The item is available only from a single source;
 - (2) The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;
 - (3) The HHS awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; or
 - (4) After solicitation of a number of sources, competition is determined inadequate.

45 CFR 75.333(b)(1)

- (b) The non-Federal entity must make available upon request, for the HHS awarding agency or passthrough entity pre-procurement review, procurement documents, such as requests for proposals or invitations for bids, or independent cost estimates, when:
 - 1) The non-Federal entity's procurement procedures or operation fails to comply with the procurement standards in this part;

Findings: The County did not demonstrate the justification of procurement of SABG service providers with noncompetitive proposals included at least one or more of the following required elements:

- The service is available only from a single source;
- The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;

- The HHS awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; and
- The County did not make available a copy of the procurement proposal along with the justification for each noncompetitive SABG provider.

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 County and subcontractor compliance with the Restriction on Distribution of Sterile Needles.

CD: 1.5.9:

SABG Application, Enclosure 2, II, 14

14. Tribal Communities and Organizations

County shall regularly review population information available through Census, compare to information obtained in the California Outcome Measurement System for Treatment (CalOMS-Tx) to determine whether the population is being reached, and survey Tribal representatives for insight in potential barriers to the substance use service needs of the American Indian/Alaskan Native (Al/AN) population within the County geographic area. Contractor shall also engage in regular and meaningful consultation and collaboration with elected officials of the tribe, Rancheria, or their designee for the purpose of identifying issues/barriers to service delivery and improvement of the quality, effectiveness, and accessibility of services available to Al/NA communities within the County.

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, specifically Tribal Communities and Organizations.

Category 3: PERINATAL

A review of the SABG Perinatal services, outreach and Tuberculosis (TB) monitoring was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 3.3.1:

SABG Application, Enclosure 2, II, 12

12. Tuberculosis Treatment

County shall ensure the following related to Tuberculosis (TB):

- A. Routinely make available TB services to each individual receiving treatment for AOD use and/or abuse.
- B. Reduce barriers to patients' accepting TB treatment.
- C. Develop strategies to improve follow-up monitoring, particularly after patients leave treatment, by disseminating information through educational bulletins and technical assistance.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

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

45 CFR § 96.127(a)(3)(i-ii)

Requirements regarding tuberculosis.

- (a) States shall require any entity receiving amounts from the grant for operating a program of treatment for substance abuse to follow procedures developed by the principal agency of a State for substance abuse, in consultation with the State Medical Director for Substance Abuse Services, and in cooperation with the State Department of Health/Tuberculosis Control Officer, which address how the program -
- (3) Will implement infection control procedures established by the principal agency of a State for substance abuse, in cooperation with the State Department of Health/Tuberculosis Control Officer, which are designed to prevent the transmission of tuberculosis, including the following:
 - (i) Screening of patients:
 - (ii) Identification of those individuals who are at high risk of becoming infected;

Findings: The County did not make available evidence demonstrating the all requirements for Tuberculosis Treatment including:

- Routinely make available TB services to each individual receiving treatment for AOD use and/or abuse.
- Reduce barriers to patients' accepting TB treatment.
- Develop strategies to improve follow-up monitoring, particularly after patients leave treatment, by disseminating information through educational bulletins and technical assistance.

Category 5: DATA/CALOMS

A review of data submissions via CalOMS was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD: 5.1.2:

SABG Application, Enclosure 2, III, 2, C-F

- 2. California Outcomes Measurement System for Treatment (CalOMS-Tx) The CalOMS-Tx business rules and requirements are:
 - C. Electronic submission of CalOMS-Tx data shall be submitted by County within 45 days from the end of the last day of the report month.
 - D. County shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS Tx data collection.
 - E. County 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. County shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method, as identified online at: https://www.dhcs.ca.gov/provgovpart/Pages /CalOMS-Treatment.aspx

Findings: The County did not make available evidence demonstrating CalOMS-Tx data is submitted to DHCS within 45 days from the end of the last day of the report month. The County's Open Admissions Report is not in compliance.

CD: 5.1.3:

SABG Application, Enclosure 2, III, 5, C

- 5. Drug and Alcohol Treatment Access Report (DATAR)
 - The DATAR business rules and requirements are:
 - C. The County shall ensure that all DATAR reports are submitted by either County-operated treatment services and by each subcontracted treatment provider to DHCS by the 10th of the month following the report activity month.

Findings: The County did not make available evidence demonstrating DATAR reports are submitted to DHCS by the 10th of the month following report activity month. The County's DATAR Report is not in compliance.

Category 6: PROGRAM INTEGRITY

A review of the SABG monitoring, privacy, and program integrity was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 6.1.3:

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

- 1. 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 18 of 46 SABG funded providers and submitted audits reports of these annual reviews to DHCS.

TECHNICAL ASSISTANCE

No technical assistance was requested by the County.