

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



August 2, 2022

Sent via e-mail to: millerje@mendocinocounty.org

Jenine Miller, Behavioral Health and Recovery Services Director Health and Human Services Agency 1120 South Dora Street Ukiah, CA 95482

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Miller:

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 Mendocino 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 Mendocino County's Fiscal Year 2021-22 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Mendocino 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 10/3/2022. 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 susan.volmer@dhcs.ca.gov.

Sincerely,

Susan Volmer (916) 713-8677

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 Miller:

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 Cindy Berger, Audits and Investigations, Provider Compliance Unit Chief Tracie Walker, Community Services Division, Community Support Branch Chief Denise Galvez, 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 Ashley Love, Community Services Division, Family Services Unit Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch Jill Ales, Mendocino County Behavioral Health and Recovery Services Program Manager Wendy Millis, Partnership HealthPlan of California, PHC Wellness and Recovery Program, Program Manager I

COUNTY REVIEW INFORMATION

County:

Mendocino

County Contact Name/Title:

Jill Ales, Program Manager

County Address:

1120 South Dora Street Ukiah, CA 95482

County Phone Number/Email:

707-472-2618 alesj@mendocinocounty.org

Date of Review:

6/14/22

Lead CCU Analyst:

Susan Volmer

Assisting CCU Analyst:

Michael Bivians

Report Prepared by:

Susan Volmer

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. Fiscal Year (FY) 2021-22 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
- c. State of California Youth Treatment Guidelines Revised August 2002
- d. DHCS Perinatal Practice Guidelines FY 2018-19
- 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 6/14/2022. The following individuals were present:

• Representing DHCS:

Susan Volmer, Associate Governmental Program Analyst (AGPA) Michael Bivians, County Compliance Monitoring II (CCM II) Chief Katrina Beedy, AGPA

Representing Mendocino County:

Jenine Miller, Director of Behavioral Health and Recovery Services
Jill Ales, Behavioral Health and Recovery Services Program Manager
Barbie Svendsen, Behavioral Health and Recovery Services Program Administrator
Lili Chavoya, Behavioral Health and Recovery Services Program Specialist
Wendy Millis, Partnership HealthPlan of California, PHC Wellness and Recovery Program,
Program Manager I

Nicole Talley, Partnership HealthPlan of California, Behavioral Health Senior Program Manager

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of review process
- Overview of services provided

Exit Conference:

An Exit Conference was conducted via WebEx on 6/14/2022. The following individuals were present:

Representing DHCS:

Susan Volmer, AGPA Michael Bivians, CCM II Katrina Beedy, AGPA

Representing Mendocino County:

Jenine Miller, Director

Jill Ales, Program Manager

Barbie Svendsen, Behavioral Health and Recovery Services Program Administrator Lili Chavoya, Behavioral Health and Recovery Services Administrative Secretary Wendy Millis, Partnership HealthPlan of California, PHC Wellness and Recovery Program, Program Manager I

Nicole Talley, Partnership HealthPlan of California, Behavioral Health Senior Program Manager

During the Exit Conference, the following topics were discussed:

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

SUMMARY OF FY 2021-22 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	2
6.0	Program Integrity	1
7.0	Fiscal	1

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the <u>SABG County Application</u>, <u>Enclosure 2</u>, <u>Part I</u>, <u>Section 3</u>, <u>B</u>, <u>5-7</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 2021-22 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 1.2.2:

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 75.205 (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 demonstrating the completion of sub-recipient preaward risk assessments with all potential subcontractors annually prior to making an award.

CD: 1.5.1:

SABG Application Enclosure 2, II, 17

17. Byrd Anti-Lobbying Amendment (31 USC 1352)

County certifies that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 USC 1352. County shall also disclose to DHCS any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

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 provide evidence demonstrating County compliance with the Byrd Anti-Lobbying Amendment (31 USC 1352) provision.

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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: 5.1.1:

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's Open Admissions report is not in compliance.

CD: 5.1.3:

SABG Application, Enclosure 2, III, 5, A-D

- 5. Drug and Alcohol Treatment Access Report (DATAR)
 - The DATAR business rules and requirements are:
 - A. The County shall be responsible for ensuring that the County-operated treatment services and all treatment providers, with whom County makes a contract or otherwise pays for the services, submit a monthly DATAR report in an electronic copy format as provided by DHCS.
 - B. The County shall ensure that treatment providers who reach or exceed 90 percent of their dedicated capacity, report this information to <u>DHCSPerinatal@dhcs.ca.gov</u> within seven days of reaching capacity.
 - 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.
 - D. The County shall ensure that all applicable providers are enrolled in DHCS'web-based DATARWeb program for submission of data, accessible on the DHCS website when executing the subcontract.

Findings: 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 6.1.2:

SABG Application Enclosure 2, I, 3, A, 1, 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:
 - 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 via a Secure Managed File Transfer system specified by DHCS.

Findings: The County did not provide evidence demonstrating it conducted onsite monitoring reviews of each County managed program providing SABG funded services.

- The County monitored one (1) of two (2) SABG funded programs.
- The County did not submit annual monitoring reports secure and encrypted to DHCS.

Category 7: FISCAL

A review of the SABG fiscal services was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 7.1.1:

SABG Application, Enclosure 2, I, 2, A

A. Restrictions on Salaries

County agrees that no part of any federal funds provided under this Contract shall be used by the County or its subcontractors to pay the salary and wages of an individual at a rate in excess of Level II of the Executive Schedule, as found online at: http://grants.nih.gov/grants.nih

Findings: The County did not provide evidence demonstrating verification that SABG funds are not used to pay an individual's salary in excess of Level II of the Executive Schedule.

TECHNICAL ASSISTANCE

Mendocino County did not request Technical Assistance (TA) during this review.