



MICHELLE BAASS
DIRECTOR

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



GAVIN NEWSOM
GOVERNOR

July 8, 2022

Sent via e-mail to: matthew.chang@ruhealth.org

Matthew Chang, M.D., Director
Riverside University Health System – Behavioral Health
4095 County Circle Drive
Riverside, CA 92503-7549

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Chang:

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

Riverside 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 9/8/2022. 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 michael.bivians@dhcs.ca.gov.

Sincerely,

Michael Bivians
(916) 713-8966

Audits and Investigations Division
Medical Review Branch
Behavioral Health Compliance Section
County Compliance Unit
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Sacramento, CA 95814
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To: Director Chang,

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Rhyan Miller, Riverside County Behavioral Health Deputy Director
Maureen Dopson, Riverside County Quality Improvement Behavioral Health Services Administrator

COUNTY REVIEW INFORMATION

County:

Riverside

County Contact Name/Title:

Maureen Dopson, Quality Improvement Behavioral Health Services Administrator

County Address:

3525 Presley Avenue
Riverside, CA 92507

County Phone Number/Email:

(951) 955-7320
mdopson@ruhealth.org

Date of Review:

4/21/2022

Lead CCU Analyst:

Michael Bivians

Assisting CCU Analyst:

N/A

Report Prepared by:

Michael Bivians

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 4/21/2022. The following individuals were present:

- Representing DHCS:
Michael Bivians, County Compliance Monitoring II (CCM II) Chief
Alexis Maher, Associate Governmental Program Analyst (AGPA)
- Representing Riverside County:
Maureen Dopson, Quality Improvement Services Administrator
Rhyan Miller, Deputy Director Forensics
Jacob Ruiz, Deputy Director Administration and Finance
Brandon Jacobs, Deputy Director Quality and Research
William Harris, Assistant Regional Manager
Nicole Shaverdi, Administrative Services Supervisor
Twanda Jackson, Administrative Services Supervisor
Eren Guerrero, Administrative Services Assistant
Sarah Stewart, Administrative Services Supervisor
Melissa Noone, Budget and Analysis Administration Services Manager I
Joshua Rodriguez, Office Assistant II
Ashley Trevino, Behavioral Health Program Support and Compliance
Andrea Webb, Business Process Analyst II
Yajaira Carrillo, Fiscal Services Accountant II
Alexandra Arriaga, Administrative Services Analyst I
Elizabeth Del Rio, Mental Health Services 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 4/21/2022. The following individuals were present:

- Representing DHCS:
Michael Bivians, CCM II Chief
Alexis Maher, AGPA

- Representing Riverside County:
Maureen Dopson, Quality Improvement Services Administrator
Rhyan Miller, Deputy Director Forensics
Jacob Ruiz, Deputy Director Administration and Finance
Brandon Jacobs, Deputy Director Quality and Research
William Harris, Assistant Regional Manager
Nicole Shaverdi, Administrative Services Supervisor
Twanda Jackson, Administrative Services Supervisor
Eren Guerrero, Administrative Services Assistant
Sarah Stewart, Administrative Services Supervisor
Melissa Noone, Budget and Analysis Administration Services Manager I
Joshua Rodriguez, Office Assistant II
Ashley Trevino, Behavioral Health Program Support and Compliance
Andrea Webb, Business Process Analyst II
Yajaira Carrillo, Fiscal Services Accountant II
Alexandra Arriaga, Administrative Services Analyst I
Elizabeth Del Rio, Mental Health Services 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>	<u>Number of CD's</u>
1.0 Administration	1
2.0 Prevention	0
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	0
5.0 Data/CalOMS	1
6.0 Program Integrity	2
7.0 Fiscal	0

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the SABG County Application, Enclosure 2, Part I, Section 3, B, 5-7 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 deficiency in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 1.3.1:

SABG Application, Enclosure 2, III, 6

6. Charitable Choice

County shall document the total number of referrals necessitated by religious objection to other alternative SUD providers. The County shall annually submit this information to DHCS by e-mail at CharitableChoice@dhcs.ca.gov by October 1st. The annual submission shall contain all substantive information required by DHCS and be formatted in a manner prescribed by DHCS.

Findings: The County did not provide evidence of the email submission to DHCS indicating the total number of referrals necessitated by a beneficiary's religious objection for FY 2020-21.

Category 5: DATA/CALOMS

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

COMPLIANCE DEFICIENCY:

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 DHCSPerinatal@dhcs.ca.gov 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 deficiencies in regulations, standards, or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD: 6.1.1:

SABG Application, Enclosure 2, I, 1, A, 1, a-b

1. County's performance under the Performance Contract and the SABG County Application, shall be monitored by DHCS during the term of the Performance Contract. Monitoring criteria shall include, but not be limited to:
 - a. Whether the quantity of work or services being performed conforms to Enclosures 2, 3, 4, and 5.
 - b. Whether the County has established and is monitoring appropriate quality standards.

Findings: The County did provide current blank monitoring tools used to monitor County and subcontracted providers for compliance with the SABG program requirements. However, the monitoring tools provided did not include the following element:

- Minimum Quality Drug Treatment Standards, Form 2F(b).

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 and subcontracted program providing SABG funded services.

- The County monitored 22 of 49 SABG funded programs.
- The County submitted 16 of 22 annual monitoring reports secure and encrypted to DHCS.
- The County submitted 19 of 22 annual monitoring reports within two weeks of report issuance to DHCS.

TECHNICAL ASSISTANCE

Riverside County did not request Technical Assistance during this review.