



MICHELLE BAASS  
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Department of Health Care Services



GAVIN NEWSOM  
GOVERNOR

March 9, 2022

Sent via e-mail to: [tsprague@stanbhhs.org](mailto:tsprague@stanbhhs.org)

Tabitha Sprague, Chief, Substance Use Disorder Services  
Stanislaus County Behavioral Health & Recovery Services  
800 Scenic Drive  
Modesto, CA 95350

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Chief Sprague:

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

Stanislaus 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 5/9/2022. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at [SABGcompliance@dhcs.ca.gov](mailto:SABGcompliance@dhcs.ca.gov).

If you have any questions, please contact me at [becky.counter@dhcs.ca.gov](mailto:becky.counter@dhcs.ca.gov).

Sincerely,

Becky Counter  
(916) 713-8567

Audits and Investigations Division  
Medical Review Branch  
Behavioral Health Compliance Section  
County Compliance Unit  
1500 Capitol Ave., MS 2305  
Sacramento, CA 95814  
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Distribution:

To: Chief Sprague,

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  
Victoria King-Watson, Community Services Division, Operations Branch Chief  
Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief  
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Nasrin Safi, Stanislaus County Manager III, QS/Risk Management/Compliance

## COUNTY REVIEW INFORMATION

**County:**

Stanislaus

**County Contact Name/Title:**

Nasrin Safi/ Manager III, QS/Risk Management/Compliance

**County Address:**

800 Scenic Drive  
Modesto, CA 95350

**County Phone Number/Email:**

(209) 525-6265  
nsafi@stanbhhs.org

**Date of Review:**

1/19/2022

**Lead CCU Analyst:**

Becky Counter

**Assisting CCU Analyst:**

N/A

**Report Prepared by:**

Becky Counter

**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 1/19/2022. The following individuals were present:

- Representing DHCS:  
Becky Counter, Associate Governmental Program Analyst (AGPA)  
Mary Westmark, AGPA  
Kathryn Sears, Staff Services Manager I (SSM I)
- Representing Stanislaus County:  
Trew Candis, BHRS Confidential Assistant IV  
Stacey Callahan, Program Manager  
Miranda Chalabi, Manager II, OEM  
Laura Garcia, Director, Human Resources and equal Right Officer  
Teresa Gonzalez, Manager II  
Tina Jamison, Chief, Fiscal and Administrative Services  
Olivia Jimenez, Amin Clerk III  
Jennifer Marsh, Staff Serv. Coordinator  
Jeff Mason, Program Manager  
Melissa McCay, Hospital Liaison  
Tracey McCullough, Behavioral Health Coordinator  
Bernardo Mora, MD, Medical Director  
LaDonna Norman, Manager II, PIP  
DeLayne Oliva, Manager III, Contracts  
Kevin Panyanouvong, Chief, Operations Officer  
Elizabeth Pike, BH Coordinator SRC  
Cam Quach, Staff Services Analyst, OEM  
Norma Rodriguez, Manager II, HR  
Diane Rose, Program Coordinator  
Nasrin Safi, Manager III, QS/Risk Mgmt./ Compliance  
Monica Salazar, Chief, Behavioral health Plan Administration  
Tabitha Sprague, Chief, Substance Use Disorder Services  
Cory Taylor, BH Coordinator SRC  
Bee Thao, Quality Services Specialist  
Megan Vylonis, Quality Services Specialist  
Charles Yarnell, Quality Services Specialist  
Dawn Vercelli, Manager IV

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of the monitoring process
- Stanislaus County overview of services

**Exit Conference:**

An Exit Conference was conducted via WebEx on 1/19/2022. The following individuals were present:

- Representing DHCS:  
Becky Counter, AGPA  
Mary Westmark, AGPA  
Kathryn Sears, SSM I
  
- Representing Stanislaus County:  
Trew Candis, BHRS Confidential Assistant IV  
Stacey Callahan, Program Manager  
Miranda Chalabi, Manager II, OEM  
Laura Garcia, Director, Human Resources and equal Right Officer  
Teresa Gonzalez, Manager II  
Tina Jamison, Chief, Fiscal and Administrative Services  
Olivia Jimenez, Amin Clerk III  
Jennifer Marsh, Staff Serv. Coordinator  
Jeff Mason, Program Manager  
Melissa McCay, Hospital Liaison  
Tracey McCullough, Behavioral Health Coordinator  
Bernardo Mora, MD, Medical Director  
LaDonna Norman, Manager II, PIP  
DeLayne Oliva, Manager III, Contracts  
Kevin Panyanouvong, Chief, Operations Officer  
Elizabeth Pike, BH Coordinator SRC  
Cam Quach, Staff Services Analyst, OEM  
Norma Rodriguez, Manager II, HR  
Diane Rose, Program Coordinator  
Nasrin Safi, Manager III, QS/Risk Mgmt./ Compliance  
Monica Salazar, Chief, Behavioral health Plan Administration  
Tabitha Sprague, Chief, Substance Use Disorder Services  
Cory Taylor, BH Coordinator SRC  
Bee Thao, Quality Services Specialist  
Megan Vylonis, Quality Services Specialist  
Charles Yarnell, Quality Services Specialist  
Dawn Vercelli, Manager IV

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	4
2.0 Prevention	0
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	0
5.0 Data/CalOMS	0
6.0 Program Integrity	1
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 deficiencies in regulations, standards or protocol requirements were identified:

### COMPLIANCE DEFICIENCIES:

#### **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 and subcontractor compliance with the Byrd Anti-Lobbying Amendment (31 USC 1352) provision.

The County also did not provide evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, including the Byrd Anti-Lobbying Amendment (31 USC 1352) provision.

#### **CD: 1.5.2:**

##### SABG Application Enclosure 2, II, 22, A

##### 22. Information Access for Individuals with Limited English Proficiency

A. County shall comply with all applicable provisions of the Dymally-Alatorre Bilingual Services Act (Government Code sections 7290-7299.8) regarding access to materials that explain services available to the public as well as providing language interpretation services.

##### 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 all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically the Dymally-Alatorre Bilingual Services Act (Government Code sections 7290-7299.8) provision.

**CD: 1.5.3:**

SABG Application Enclosure 2, II, 8

8. Nondiscrimination and Institutional Safeguards for Religious Providers

County shall establish such processes and procedures as necessary to comply with the provisions of USC, Title 42, Section 300x-65 and CFR, Title 42, Part 54.

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 all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically Nondiscrimination and Institutional Safeguards for Religious Providers (USC, Title 42, Section 300x-65 and CFR, Title 42, Part 54) provision.

**CD: 1.5.4:**

SABG Application, Enclosure 2, II, 13

13. Trafficking Victims Protection Act of 2000

County and its subcontractors that provide services covered by this Contract shall comply with the Trafficking Victims Protection Act of 2000 (USC, Title 22, Chapter 78, Section 7104) as amended by section 1702 of Pub. L. 112-239.

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 the Trafficking Victims Protection Act of 2000 (USC, Title 22, Chapter 78, Section 7104) as amended by section 1702 of Pub. L. 112-239 provision.

## 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 monitored 12 of 18 SABG funded programs and submitted audit reports of these annual reviews to DHCS.

- The County submitted eight (8) of 12 annual monitoring reports secure and encrypted to DHCS.
- The County submitted five (5) of 12 annual monitoring reports within two weeks of completion to DHCS.

## **TECHNICAL ASSISTANCE**

Stanislaus County did not request Technical Assistance during the FY 21-22 review.