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DIRECTOR

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



GAVIN NEWSOM
GOVERNOR

07/21/2022

Sent via e-mail to: dortiz@tularehhsa.org

Donna Ortiz, Director
Tulare County Health and Human Services
5957 S. Mooney Blvd.
Visalia, CA 93277

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Ortiz:

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

Tulare 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 9/21/2022. 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 emanuel.hernandez@dhcs.ca.gov.

Sincerely,

Emanuel Hernandez
(916) 713-8667

Audits and Investigations Division
Medical Review Branch
Behavioral Health Compliance Section
County Compliance Unit
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Gilbert Rivas, Tulare County SUD Managed Care Division Manager

COUNTY REVIEW INFORMATION

County:

Tulare

County Contact Name/Title:

Chandler Bailey, Tulare County SUD Managed Care Staff Services Analyst II

County Address:

5957 S. Mooney Blvd.
Visalia, CA 93277

County Phone Number/Email:

559-303-5484
cbailey@tularecounty.ca.gov

Date of Review:

06/02/2022

Lead CCU Analyst:

Emanuel Hernandez

Assisting CCU Analyst:

N/A

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. 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 06/02/2022. The following individuals were present:

- Representing DHCS:
Emanuel Hernandez, Associate Governmental Program Analyst (AGPA)
Suarna Allen, County Provider Operations and Monitoring (CPOM) Unit AGPA
- Representing Tulare County:
Gilbert Rivas, Tulare County SUD Managed Care Division Manager
Chandler Bailey, Tulare County SUD Managed Care Staff Services Analyst II
Omar De Leon Jr., Tulare County SUD Prevention Services Coordinator
Jeff Blackmon, Tulare County SUD Administrative Specialist
Liz Mason, Visalia Adult Integrated Clinic (VAIC) Administrator
Milena Padilla-Nowakowski, Visalia Adult Integrated Clinic (VAIC) 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 06/02/2022. The following individuals were present:

- Representing DHCS:
Emanuel Hernandez, AGPA
Suarna Allen, CPOM, AGPA
- Representing Tulare County:
Gilbert Rivas, Tulare County SUD Managed Care Division Manager
Chandler Bailey, Tulare County SUD Managed Care Staff Services Analyst II
Omar De Leon Jr., Tulare County SUD Prevention Services Coordinator
Jeff Blackmon, Tulare County SUD Administrative Specialist
Liz Mason, Visalia Adult Integrated Clinic (VAIC) Administrator
Milena Padilla-Nowakowski, Visalia Adult Integrated Clinic (VAIC) 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	4
2.0 Prevention	0
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	1
5.0 Data/CalOMS	2
6.0 Program Integrity	3
7.0 Fiscal	2

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 1.2.2:

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 pre-award risk assessments with all potential subcontractors annually prior to making an award.

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 provide the email submission to DHCS indicating the total number of referrals necessitated by a beneficiary's religious objection for FY 2020-21. However, the email submission was submitted to DHCS after the October 1st deadline.

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 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.

Category 4: ADOLESCENT/YOUTH TREATMENT

A review of the SABG Adolescent/Youth Treatment program and services was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 4.2.3:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: <https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx>.

Youth Treatment Guidelines Section VIII, E, 1-2

E. Buildings/Grounds

1. All residential facilities must be licensed in accordance with applicable state licensing statutes and regulations and remain in compliance with such requirements.
2. All facilities should be clean, sanitary, and in good repair at all times for the safety and well-being of youth, staff, and visitors.

Findings: The County did not provide evidence demonstrating how County and subcontracted providers ensure facilities are in compliance with licensing and regulations.

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 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 elements:

- Interim Services
- Primary Prevention
- Fiscal

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 11 of 12 SABG funded programs and submitted audit reports of these annual reviews to DHCS.
- The County submitted 10 of 11 annual monitoring reports within two weeks of completion to DHCS.

CD 6.2.1:

SABG Application Enclosure 2, II, 19, L

L. Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2, Subparts A – E).

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 compliance with Confidentiality of Substance Use Disorder Patient Records under 42 CFR Part 2, Subparts A-E.

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 were identified:

COMPLIANCE DEFICIENCIES:

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/policy/salcap_summary.htm

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.

CD 7.1.2:

SABG Application, Enclosure 2, I, 2, I, 1-3

I. Restrictions on Use of SABG Funds to Pay for Services Reimbursable by Medi-Cal

1. County shall not utilize SABG funds to pay for a service that is reimbursable by Medi-Cal.
2. The County may utilize SABG funds to pay for a service included in the California State Plan or the Drug Medi-Cal Organized Delivery System (DMC-ODS), but which is not reimbursable by Medi-Cal.
3. If the County utilizes SABG funds to pay for a service that is included in the California State Plan or the DMC-ODS, the County shall maintain documentation sufficient to demonstrate that Medi-Cal reimbursement was not available.

Findings: The County did not provide evidence demonstrating verification that SABG funds used to pay for services reimbursable by Medi-Cal are consistent with restrictions, specifically:

- County shall not utilize SABG funds to pay for a service that is reimbursable by Medi-Cal;
- The County may utilize SABG funds to pay for a service included in the California State Plan or the Drug Medi-Cal Organized Delivery System (DMC-ODS), but which is not reimbursable by Medi-Cal; and
- If the County utilizes SABG funds to pay for a service that is included in the California State Plan or the DMC-ODS, the County shall maintain documentation sufficient to demonstrate that Medi-Cal reimbursement was not available.

TECHNICAL ASSISTANCE

Tulare County did not request technical assistance.