

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



August 11, 2021

Sent via e-mail to: sgraber@co.slo.ca.us

Star Graber, PhD, LMFT, DAS Division Manager Behavioral Health Department 2180 Johnson Ave San Luis Obispo, CA 93401

SUBJECT: Annual DMC-ODS County Compliance Unit Findings Report

Dear Manager Graber:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to the requirements of the Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver and the terms of the Intergovernmental Agreement operated by San Luis Obispo 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 San Luis Obispo County's State Fiscal Year 2020/21 DMC-ODS compliance review. The report identifies deficiencies, required corrective actions, new requirements, advisory recommendations, and referrals for technical assistance.

San Luis Obispo County is required to submit a Corrective Action Plan (CAP) addressing each compliance deficiency (CD) noted to the Medi-Cal Behavioral Health Division (MCBHD), Plan and Network Monitoring Branch (PNMB), County/Provider Operation and Monitoring Branch (CPOMB) Analyst by 10/11/2021. Please use the enclosed CAP form and submit the completed the CAP and supporting documentation via email to the CPOMB liaison at MCBHDMonitoring@dhcs.ca.gov.

If you have any questions or need assistance, please contact me at susan.volmer@dhcs.ca.gov.

Sincerely,
Susan Volmer
Susan Volmer
(916) 713-8677
susan.volmer@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: Star Graber

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MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch Amanda Getten, San Luis Obispo County QST Division Manager

# **COUNTY REVIEW INFORMATION**

## County:

San Luis Obispo

#### **County Contact Name/Title:**

Amanda Getten, QST Division Manager

# **County Address:**

2180 Johnson Avenue San Luis Obispo, CA 93401

# **County Phone Number/Email:**

805-781-4733 agetten@co.slo.ca.us

# **Date of DMC-ODS Implementation:**

1/1/2018

#### Date of Review:

June 22, 2021

### **Lead CCU Analyst:**

Susan Volmer

# **Assisting CCU Analyst(s):**

Michael Bivians

#### **Report Prepared by:**

Susan Volmer

# **Report Approved by:**

Ayesha Smith

# **REVIEW SCOPE**

- I. Regulations:
  - a. Special Terms and Conditions (STCs) for California's Medi-Cal 2020 section 1115(a) Medicaid Demonstration STC, Part X: Drug Medi-Cal Organized Delivery System
  - b. Code of Federal Regulations, Title 42, Chapter IV, Subchapter C, Part 438; section 438.1 through 438.930: Managed Care
- II. Program Requirements:
  - a. Fiscal Year (FY) 2020-21 Intergovernmental Agreement (IA)
  - b. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
  - c. Behavioral Health Information Notices (BHIN)

# **ENTRANCE AND EXIT CONFERENCE SUMMARIES**

### **Entrance Conference:**

An Entrance Conference was conducted at via WebEx on 6/22/21. The following individuals were present:

• Representing DHCS:

Susan Volmer, Associate Government Program Analyst (AGPA) Michael Bivians, Staff Services Manager I (SSM I) Natalia Krasnodemsky, AGPA Kathryn Sears, SSM I

Representing San Luis Obispo County:

Amanda Getten, QST Division Manager

Star Graber, DAS Division Manager

Frank Warren, Prevention and Outreach Division Manager

Kathy Bailey, Administrative Services Officer

Julianne Schmidt, QST Clinician

Colin Quinnell, DAS Program Supervisor

Clark Guest, DAS Program Supervisor

Kristina Paramore, DAS Program Supervisor

Josh Peters, P & O Program Supervisor

Katrina Feliciano, DAS ASO

Scott Seyer, Health Agency Contracting ASO

During the Entrance Conference, the following topics were discussed:

- Introductions
- San Luis Obispo County overview of services
- Overview of monitoring process

#### **Exit Conference:**

An Exit Conference was conducted via WebEx on 6/22/2021. The following individuals were present:

Representing DHCS:

Susan Volmer, AGPA

Michael Bivians, SSM I

Natalia Krasnodemsky, AGPA

• Representing San Luis Obispo County:

Amanda Getten, QST Division Manager

Star Graber, DAS Division Manager

Kathy Bailey, Administrative Services

Julianne Schmidt, QI Officer

Kristina Paramore, DAS Program Supervisor

During the Exit Conference, the following topics were discussed:

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

# **SUMMARY OF FY 2020-21 COMPLIANCE DEFICIENCIES (CD)**

Section:		Number of CD's
1.0	Availability of DMC-ODS Services	0
2.0	Coordination of Care	0
3.0	Quality Assurance and Performance Improvement	1
4.0	Access and Information Requirements	0
5.0	Beneficiary Rights and Protections	0
6.0	Program Integrity	0

# **CORRECTIVE ACTION PLAN (CAP)**

Pursuant to the <u>Intergovernmental Agreement</u>, <u>Exhibit A</u>, <u>Attachment I</u>, <u>Part III</u>, <u>Section KK</u>, <u>2</u>, <u>i</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 CPOMB liaison will monitor progress of the CAP completion.

# Category 3: QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT

A review of the practice guidelines, monitoring, and other quality assurance requirements was conducted to ensure compliance with applicable regulations and standards. The following deficiency in quality assurance and performance improvement was identified:

## COMPLIANCE DEFICIENCY:

#### CD 3.2.1

#### Intergovernmental Agreement Exhibit A, Attachment I, III, OO, 1, i, d

- 1. Monitoring
  - i. The Contractor's performance under this Exhibit A, Attachment I, shall be monitored by DHCS annually during the term of this Agreement. Monitoring criteria shall include, but not be limited to:
    - d. Contractor shall conduct annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. Contractor shall submit copy of their monitoring and audit reports to DHCS within two weeks of issuance. Reports should be sent by secure, encrypted e-mail to:

SUDCountyReports@dhcs.ca.gov

Alternatively, mail to:

Department of Health Care Services Medi-Cal Behavioral Health Division 1500 Capitol Avenue, MS-2623 Sacramento, CA 95814

### Intergovernmental Agreement Exhibit A, Attachment I, III, AA, 1-2 iv

- In addition to complying with the subcontractual relationship requirements set forth in Article
   Error! Reference source not found. of this Agreement, the Contractor shall ensure that all s
   ubcontracts require that the Contractor oversee and is held accountable for any functions and
   responsibilities that the Contractor delegates to any subcontractor.
- 2. Each subcontract shall:
  - iv. Ensure the Contractor monitors the subcontractor's performance on an ongoing basis and subject it to an annual onsite review, consistent with statutes, regulations, and Article III.PP.

**Findings:** The Plan did not monitor all County and subcontracted providers for compliance with DMC-ODS programmatic and fiscal requirements. Specifically:

- For FY 2019-20, the Plan monitored thirteen (13) of sixteen (16) Plan and sub-contracted providers for DMC-ODS programmatic and/or fiscal requirements, and submitted audit reports of these monitoring reviews to DHCS.
- The Plan submitted seven (7) of thirteen (13) DMC-ODS audit reports to DHCS within two weeks of report issuance.

# **TECHNICAL ASSISTANCE**

San Luis Obispo County did not request Technical Assistance during this review.