



**CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES**

**FISCAL YEAR 2020/2021**

**MEDI-CAL SPECIALTY MENTAL HEALTH SERVICES TRIENNIAL REVIEW  
OF THE SANTA CRUZ COUNTY MENTAL HEALTH PLAN**

**SYSTEM FINDINGS REPORT**

**Review Dates: May 11, 2021 to May 13, 2021**

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**EXECUTIVE SUMMARY**

The California Department of Health Care Services' (DHCS) mission is to provide Californians with access to affordable, integrated, high-quality health care including medical, dental, mental health, substance use treatment services, and long-term care. Our vision is to preserve and improve the overall health and well-being of all Californians.

DHCS helps provide Californians access to quality health care services that are delivered effectively and efficiently. As the single state Medicaid agency, DHCS administers California's Medicaid program (Medi-Cal). DHCS is responsible for administering the Medi-Cal Specialty Mental Health Services (SMHS) Waiver Program. SMHS are "carved-out" of the broader Medi-Cal program. The SMHS program operates under the authority of a waiver approved by the Centers for Medicare and Medicaid Services (CMS) under Section 1915(b) of the Social Security Act.

Medi-Cal is a federal/state partnership providing comprehensive health care to individuals and families who meet defined eligibility requirements. Medi-Cal coordinates and directs the delivery of important services to approximately 13.2 million Californians.

The SMHS program which provides SMHS to Medi-Cal beneficiaries through county Mental Health Plans (MHPs). The MHPs are required to provide or arrange for the provision of SMHS to beneficiaries' in their counties that meet SMHS medical necessity criteria, consistent with the beneficiaries' mental health treatment needs and goals as documented in the beneficiaries client plan.

In accordance with the California Code of Regulations, title 9, chapter 11, § 1810.380, DHCS conducts monitoring and oversight activities such as the Medi-Cal SMHS Triennial System and Chart Reviews to determine if the county MHPs are in compliance with state and federal laws and regulations and/or the contract between DHCS and the MHP.

DHCS conducted an onsite review of the Santa Cruz County MHP's Medi-Cal SMHS programs on May 11, 2021 to May 13, 2021. The review consisted of an examination of the MHP's program and system operations, including chart documentation, to verify that medically necessary services are provided to Medi-Cal beneficiaries. DHCS utilized Fiscal Year (FY) 2020/2021 Annual Review Protocol for SMHS and Other Funded Programs (Protocol) to conduct the review.

The Medi-Cal SMHS Triennial System Review evaluated the MHP's performance in the following categories:

- Category 1: Network Adequacy and Availability of Services
- Category 2: Care Coordination and Continuity of Care
- Category 3: Quality Assurance and Performance Improvement

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- Category 4: Access and Information Requirements
- Category 5: Coverage and Authorization of Services
- Category 5: Beneficiary Rights and Protections
- Category 6: Program Integrity

This report details the findings from the Medi-Cal SMHS Triennial System Review of the Santa Cruz County MHP. The report is organized according to the findings from each section of the FY 2020/2021 Protocol deemed out of compliance (OOC), or in partial compliance, with regulations and/or the terms of the contract between the MHP and DHCS.

For informational purposes, this findings report also includes additional information that may be useful for the MHP (e.g., a description of calls testing compliance of the MHP's 24/7 toll-free telephone line).

The MHP will have an opportunity to review the report for accuracy and appeal any of the findings of non-compliance (for both system review and chart review). The appeal must be submitted to DHCS in writing within 15 business days of receipt of the findings report. DHCS will adjudicate any appeals and/or technical corrections (e.g., calculation errors, etc.) submitted by the MHP and, if appropriate, send an amended report.

A Corrective Action Plan (CAP) is required for all items determined to be OOC or in partial compliance. The MHP is required to submit a CAP to DHCS within 60-days of receipt of the findings report for all system and chart review items deemed OOC. The CAP should include the following information:

- (1) Description of corrective actions, including milestones;
- (2) Timeline for implementation and/or completion of corrective actions;
- (3) Proposed (or actual) evidence of correction that will be submitted to DHCS;
- (4) Mechanisms for monitoring the effectiveness of corrective actions over time. If the CAP is determined to be ineffective, the MHP should inform their county liaison of any additional corrective actions taken to ensure compliance; and
- (5) A description of corrective actions required of the MHP's contracted providers to address findings.

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**FINDINGS**

**NETWORK ADEQUACY AND AVAILABILITY OF SERVICES**

**Question 1.2.7**

**FINDING**

The MHP did not furnish evidence to demonstrate compliance with the Medi-Cal Manual for Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), and Therapeutic Foster Care (TFC) Services for Medi-Cal Beneficiaries, 3<sup>rd</sup> Edition, January 2018. The MHP must provide TFC services to all children and youth who meet medical necessity criteria for TFC.

The MHP submitted the following documentation as evidence of compliance with this requirement:

- Policy & Procedure 2434 MHP Delivery of Intensive Support Services (ICC, IHBS, TFC)
- Policy & Procedure 3425 Prior Authorization for Outpatient SMHS
- Children's Behavioral Health Intensive Support Services Eligibility Form
- IHBS/TBS/TFC Referral and Authorization Form
- Therapeutic Services Tracking Log
- Request for Proposal #16P3-003
- Request for Proposals #10738
- Status of Therapeutic Foster Care Service (TFC) Statement
- Intensive Support Services Updates Training
- Intensive Support Services Updates Training for Contracted Providers
- Evidence of two (2) TFC clients who received treatment through other services

While the MHP submitted evidence to demonstrate compliance with this requirement, it is not evident that the MHP provides TFC services. It is not evident that the MHP has a current contract to provide TFC services. During the facilitated discussion, the MHP indicated that there has been outreach to find a provider since two RFPs have failed to produce a TFC provider for the MHP. The MHP stated that in lieu of TFC, a combination of ICC, IHBS, and TBS services are used to meet the TFC requirement. The MHP stated that while these three services are not the same as providing TFC services, it is as close as possible without a TFC provider. The MHP did provide examples of two children who have been identified as needing TFC services and their progress notes to show that the children who are receiving the alternate set of treatment services being provided the same level of care while the county continues its attempts to contract with a TFC provider.

DHCS deems the MHP out of compliance with the Medi-Cal Manual for Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), and Therapeutic Foster Care Services (TFC) for Medi-Cal Beneficiaries, 3<sup>rd</sup> Edition, January 2018.

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The MHP must comply with CAP requirement addressing this finding of non-compliance.

**ACCESS AND INFORMATION REQUIREMENTS**

**Question 4.3.2**

**FINDING**

DHCS' review team made seven (7) calls to test the MHP's statewide 24/7 toll-free number. The seven (7) test calls must demonstrate compliance with California Code of Regulations, title 9, chapter 11, section 1810, subdivision 405(d) and 410(e)(1). The toll-free telephone number provides information to beneficiaries to the below listed requirements:

1. The MHP provides a statewide, toll-free telephone number 24 hours a day, seven days per week, with language capability in all languages spoken by beneficiaries of the county.
2. The toll-free telephone number provides information to beneficiaries about how to access specialty mental health services, including specialty mental health services required to assess whether medical necessity criteria are met.
3. The toll-free telephone number provides information to beneficiaries about services needed to treat a beneficiary's urgent condition.
4. The toll-free telephone number provides information to the beneficiaries about how to use the beneficiary problem resolution and fair hearing processes.

The seven (7) test calls are summarized below.

**TEST CALL #1**

Test call was placed on Wednesday, February 17, 2021, at 11:23 p.m. The call was answered after one (1) ring via recorded message, then the call was placed on hold, then the line rang six (6) times and was then by a live operator. The caller asked how to access children's specialty mental health services. The operator provided the caller with information regarding Crisis Intervention Services. The operator did not provide the caller with information regarding children's SMHS and informed the caller to call back during business hours. The caller was not provided information on how to access SMHS including SMHS required to assess whether medical necessity criteria are met.

**FINDING**

The call is deemed out of compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).

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**TEST CALL #2**

Test call was placed on Thursday, February 18, 2021, at 12:58 p.m. The call was answered after two (2) rings via phone tree providing language capabilities in all languages spoken by beneficiaries in the county. The call was then transferred to a live operator. The caller asked how to access specialty mental health services. The operator provided the caller with a clinic location and hours of operation. The operator provided information on the screening process. The caller was provided information on how to access SMHS including SMHS required to assess whether medical necessity criteria are met. The caller was provided information on how to treat an urgent condition.

**FINDING**

The call is deemed in compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).

**TEST CALL #3**

Test call was placed on Tuesday, December 29, 2020, at 7:12 a.m. The call was answered after two (2) rings via live operator. The caller asked how to access specialty mental health services for anxiety and depression. The operator advised the caller that they had reached the after-hours staff and instructed the caller to call back during regular business hours. The operator asked the caller if they needed help right away. The caller was not provided information on how to access SMHS including SMHS required to assess whether medical necessity criteria are met. The caller was provided information on how to treat an urgent condition.

**FINDING**

The call is deemed in partial compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).

**TEST CALL #4**

Test call was placed on Friday, November 13, 2020, at 3:04 p.m. The call was answered after one (1) ring via phone tree providing language capabilities in all languages spoken by beneficiaries in the county. The call was then transferred to a live operator. The caller asked how to request a medication refill as a new patient in the county. The operator did not provide information to the caller regarding how to obtain a medication refill as a new patient in the county. The caller was not provided information on how to access SMHS including SMHS required to assess whether medical necessity criteria are met. The caller was provided information on how to treat an urgent condition.

**FINDING**

The call is deemed in partial compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).

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**TEST CALL #5**

Test call was placed on Tuesday, January 19, 2021, at 7:51 a.m. The call was answered after one (1) ring via recorded message stating that the call would be recorded. After five (5) rings, the call was answered by a message stating that the call would be answered by the first available operator. After holding for 30 seconds, the call was answered by a live operator. The caller asked how to access specialty mental health services. The operator advised the caller that they had reached the after-hours staff and instructed the caller to call back during regular business hours. The caller was not provided information on how to access SMHS including SMHS required to assess whether medical necessity criteria are met. The caller was not provided information on how to treat an urgent condition.

**FINDING**

The call is deemed out of compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).

**TEST CALL #6**

Test call was placed on Thursday, February 18, 2021, at 3:28 p.m. The call was answered after one (1) ring via a phone tree providing language capabilities in all languages spoken by beneficiaries in the county. The call was then transferred to a live operator. The caller asked how to file a complaint in the county. The operator explained the beneficiary problem resolution and state fair hearing processes. The operator advised the caller that grievance forms are located in the clinic lobby. The operator offered to mail a grievance form to the caller. The caller was provided information about how to use the beneficiary problem resolution and fair hearing process.

**FINDING**

The call is deemed in compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).

**TEST CALL #7**

Test call was placed on Monday, December 7, 2020, at 11:46 p.m. The call was answered after one (1) ring via a recorded message saying the call would be recorded and then the call was answered by a live operator. The caller asked how to file a complaint in the county. The operator advised the caller they had reached the after-hours line and to leave a message. The caller was not provided information about how to use the beneficiary problem resolution and fair hearing process.

**FINDING**

The call is deemed out of compliance with the regulatory requirements with California Code of Regulations, title 9, chapter 11, section 1810 subdivision 405(d) and 410(e)(1).



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**SUMMARY OF TEST CALL FINDINGS**

| Test Call Findings |     |     |     |     |     |     |     |                       |
|--------------------|-----|-----|-----|-----|-----|-----|-----|-----------------------|
| Required Elements  | #1  | #2  | #3  | #4  | #5  | #6  | #7  | Compliance Percentage |
| 4.3.2.1            | N/A | IN  | N/A | IN  | N/A | IN  | N/A | 100%                  |
| 4.3.2.2            | OOC | IN  | OOC | OOC | OOC | N/A | N/A | 20%                   |
| 4.3.2.3            | N/A | IN  | IN  | IN  | OOC | N/A | N/A | 75%                   |
| 4.3.2.4            | N/A | N/A | N/A | N/A | N/A | IN  | OOC | 50%                   |

Based on the test calls, DHCS deems the MHP in partial compliance with California Code of Regulations, title 9, chapter 11, section 1810, subdivision 405(d) and 410(e)(1).

The MHP must comply with CAP requirement addressing this finding of partial/non-compliance.

Repeat deficiency Yes

**Question 4.3.4**

**FINDING**

The MHP did not furnish evidence to demonstrate compliance with California Code for Regulations, title 9, chapter 11, section 1810, subdivision 405(f). The MHP must maintain a written log(s) of initial requests for SMHS that includes requests made by phone, in person, or in writing. The written log(s) must contain name of the beneficiary, date of the request, and initial disposition of the request.

The MHP submitted the following documentation as evidence of compliance with this requirement:

- Policy & Procedure 2102 Access Triage, Screening and Assessment for MHP & DMC-ODS
- Business Hours and After-Hours Call Logs for 11/13/2020, 12/29/2020, 1/19/2021, 2/17/2021, 2/18/2021
- Screenshots of Service Request & Disposition Log

While the MHP submitted evidence to demonstrate compliance with this requirement, one (1) of five (5) required DHCS test calls were not logged on the MHP's written log of initial request. The table below summarizes DHCS' findings pertaining to its test calls:

| Log Results |              |              |                         |                     |                                    |
|-------------|--------------|--------------|-------------------------|---------------------|------------------------------------|
| Test Call # | Date of Call | Time of Call | Name of the Beneficiary | Date of the Request | Initial Disposition of the Request |
|             |              |              |                         |                     |                                    |

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|                       |            |            |     |     |     |
|-----------------------|------------|------------|-----|-----|-----|
| 1                     | 2/17/2021  | 11:23 p.m. | OOC | IN  | OOC |
| 2                     | 2/18/2021  | 12:58 p.m. | IN  | IN  | IN  |
| 3                     | 12/29/2020 | 7:12 a.m.  | OOC | IN  | OOC |
| 4                     | 11/13/2020 | 3:04 p.m.  | IN  | OOC | IN  |
| 5                     | 1/19/2021  | 7:51 a.m.  | OOC | OOC | OOC |
| Compliance Percentage |            |            | 40% | 60% | 40% |

*Note: Only calls requesting information about SMHS, including services needed to treat a beneficiary's urgent condition, are required to be logged.*

While the test call placed on 11/13/2020 at 3:04 p.m. was found in the log provided with the correct name of the beneficiary, date of the request and the initial disposition of the request, the date and time it was logged by the MHP into the Service Request & Disposition Log was on 12/1/2020 at 10:41 a.m., therefore this call is out of compliance. MHP did not provide evidence as to why this call was logged three (3) weeks after the call was placed.

DHCS deems the MHP Select One with California Code of Regulations, title 9, section 1810, subdivision 405(f).

The MHP must comply with CAP requirement addressing this finding of partial compliance.

Repeat deficiency Yes

**Question 4.4.2**

**FINDING**

The MHP did not furnish evidence to demonstrate compliance with California Code of Regulations, title 9, section 1810, subdivision 410. The MHP must have a Cultural Competence Committee or other group that addresses cultural issues and has participation from cultural groups that is reflective of the community.

The MHP submitted the following documentation as evidence of compliance with this requirement:

- The Cultural COMPASS and Cultural COMPASS Facilitation Questions
- Cultural Humility Committee Meeting Agendas for January, April, May, June, July, August, September, October, and November 2020 and February and March 2021

While the MHP submitted evidence to demonstrate with this requirement, it is not evident that the MHP has beneficiaries, family members, providers, or community representatives as part of the Cultural Competence Committee. During the facilitated discussion during the review, the MHP stated that the current committee does not have family members or those with lived experience as part of the committee. The MHP

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stated that they will work with NAMI to include outreach to involve family members into the Cultural Competence Committee. The MHP stated that this outreach will also be a part of the MHSA activities. The MHP acknowledges that with more funding and additional positions, the MHP would be able to reach this goal of including beneficiaries, family members, providers, those with lived experience, and community representatives into this committee.

DHCS deems the MHP out of compliance with California Code of Regulations, title 9, section 1810, subdivision 410.

The MHP must comply with CAP requirement addressing this finding of non-compliance.