



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

FISCAL YEAR 2018/2019

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

SYSTEM FINDINGS REPORT

Review Dates: May 8, 2019 and May 9, 2019

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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 Siskiyou County MHP's Medi-Cal SMHS programs on May 22, 2019 and May 23, 2019. 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) 2018/2019 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:

- Section A: Network Adequacy and Availability of Services
- Section B: Care Coordination and Continuity of Care
- Section C: Quality Assurance and Performance Improvement

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- Section D: Access and Information Requirements
- Section E: Coverage and Authorization of Services
- Section F: Beneficiary Rights and Protections
- Section G: Program Integrity
- Section H: Other Regulatory and Contractual Requirement

This report details the findings from the Medi-Cal SMHS Triennial System Review of the Siskiyou County MHP. The report is organized according to the findings from each section of the FY 2018/2019 Protocol and the Attestation 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 Plan of Correction (POC) is required for all items determined to be out-of-compliance. The MHP is required to submit a POC to DHCS within 60-days of receipt of the findings report for all system and chart review items deemed out-of-compliance. The POC 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 POC determined not to be effective, the MHP should propose an alternative corrective action plan to DHCS; and
- (5) Description of corrective actions required of the MHP's contracted providers to address findings.

Review Findings Overview

- In DHCS review, the Siskiyou County MHP demonstrated numerous strengths, including but not limited to the following examples:
 - The MHP maintains two active PIPs;
 - 100% compliance in the authorization requirements;
 - Robust wellness center and wide use of peer providers;
 - Willing to make modification in process when systemic gap is identified;
 - Changing mindset for quality improvement and implementing data driven quality assurance program;
 - Open line of communication within MHP and with other agencies;

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- Good working relationships with other agencies including, but not limited to, Managed Care Providers, Child Welfare Services, and Law Enforcement agencies;
- Active utilization of various grants to enhance service delivery and staff development;
- Proactive transportation service provided by MHP; and
- Active engagement and open communication between quality assurance team and clinical providers.
- DHCS identified opportunities for improvement in various areas, including:
 - Timely reflection of changes in regulation and process into existing/new policy/procedure/guidelines;
 - Streamlining data monitoring, tracking, and analysis procedures;
 - Geographic/socio-economic challenges to reduce disparities and stigma in the community;
 - Ongoing engagement with hard to reach population (LGBTQ, Veterans) and community leaders;
 - Recruitment effort to recruit/retain qualified staff;
 - Ongoing staff education on crisis services; and,
 - Consistency in proper documentation in the access call log.

Questions about this report may be directed to DHCS via email to MHSDCompliance@dhcs.ca.gov.

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FINDINGS

QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT

REQUIREMENT
The MHP shall implement mechanisms to monitor the safety and effectiveness of medication practices. The monitoring mechanism shall be: Under the supervision of a person licensed to prescribe or dispense medication. (MHP Contract, Ex. A, Att. 5)

FINDINGS

The MHP did not furnish evidence to demonstrate it complies with MHP Contract, Ex. A, Att. 5. The MHP must implement mechanisms to monitor the safety and effectiveness of medication practice. The monitoring mechanism shall be under the supervision of a person licensed to prescribe or dispense medication.

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

- Medication Monitoring Logs 2017 & 2018;
- P&P HID 13-27 Medication Monitoring; and
- Medication Monitoring Worksheet.

The MHP submitted a policy and procedure addressing medication services review process. The policy did not address supervision process or the credential of the person who supervise the process. At the on-site discussion, the MHP reported the absence of a Medical Director and Nursing Supervisor affecting the medication monitoring process with a lack of supervision of the process by an appropriate licensed provider. The MHP reported that currently, a contracted pharmacist conducts the medication monitoring activity and the result is returned to the Clinical Director who is not licensed to prescribe or dispense medication. The Clinical Director checks completeness of the monitoring tool, then the results are logged by the Health Record team, then analyzed by the Quality Assurance Manager. The MHP reported that they plan to resume supervision of the medication monitoring process by the newly hired Nursing Supervisor as soon as the Nursing Supervisor will start the appointment.

DHCS deems the MHP out-of-compliance with MHP Contract, Ex. A, Att. 5. The MHP must complete a POC addressing this finding of non-compliance.

ACCESS AND INFORMATION REQUIREMENTS

REQUIREMENT
Regarding the statewide, 24 hours a day, 7 days a week (24/7) toll-free telephone number (Cal. Code Regs., tit. 9, chapter 11, §§ 1810.405(d) and 1810.410(e)(1)).

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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.
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The toll-free telephone number provides information to beneficiaries about services needed to treat a beneficiary's urgent condition.

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 it complies with California Code of Regulations, title 9, chapter 11, §§ 1810.405(d) and 1810.410(e)(1). Each MHP must provide 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, that will provide information to beneficiaries about how to access SMHS, including SMHS required to assess whether medical necessity criteria are met and services needed to treat a beneficiary's urgent condition, and 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 Monday, December 17, 2018, at 9:59 p.m. The call was answered after seven (7) rings via a live operator. The caller requested SMHS in the county. The operator assessed the caller's current condition by asking if they were in crisis. The caller replied in the negative. The operator then requested that the caller call back in ten (10) minutes. The caller was not provided information about how to access SMHS, and the caller was provided information about services needed to treat a beneficiary's urgent condition.

FINDINGS

DHCS deems the MHP out-of-compliance with specific requirements in California Code of Regulations, title 9, chapter 11, § 1810.405(d) and 1810.410(e)(1).

TEST CALL #2

Test call was placed on Wednesday, January 23, 2019, at 7:30 a.m. A live operator who identified the line as the Siskiyou crisis line answered the call after three (3) rings. The operator provided two addresses, one phone number, and the option to call back for an intake interview. The caller was provided information about how to access SMHS, including SMHS required to assess whether medical necessity criteria are met, and information about services needed to treat a beneficiary's urgent condition that same day.

FINDINGS

DHCS deems the MHP in compliance with specific requirements in California Code of Regulations, title 9, chapter 11, §§ 1810.405(d) and 1810.410(e)(1).

TEST CALL #3

Test call was placed on Tuesday, January 22, 2019, at 11:53 a.m. The call was initially answered after four (4) rings via a live operator. The caller requested information about

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accessing mental health services in the county for her 6-year-old son, Rayan. The operator asked the caller to provide her name and contact information and told her that someone from the county or the children's mental health department would contact the caller later in the week to schedule an assessment. The operator provided the address to the county and the mental health department's two main phone numbers. The caller was provided information about how to access SMHS, including SMHS required to assess whether medical necessity criteria are met, offered an appointment over phone and informed of walk-in services. The caller was not provided with information about services needed to treat a beneficiary's urgent condition.

FINDINGS

DHCS deems the MHP out-of-compliance with specific requirements in California Code of Regulations, title 9, chapter 11, § 1810.405(d) and 1810.410(e)(1).

TEST CALL #4

Test call was placed on February 8, 2019, at 9:34 a.m. The call was initially answered after one (1) ring via a live operator. The caller requested information about accessing mental health services in the county. The operator provided detailed information about how to access SMHS, including information about services needed to treat a beneficiary's urgent condition, and stated the county offers clinical services, case management services and medical services.

FINDINGS

DHCS deems the MHP in compliance with specific requirements in California Code of Regulations, title 9, chapter 11, §§ 1810.405(d) and 1810.410(e)(1).

TEST CALL #5

Test call was placed on Tuesday, January 22, 2019, at 11:01 a.m. The call was initially answered without audibly ringing on the caller's end via a live operator. After briefly describing why the test caller was calling, the operator told the caller she would transfer her to the Children's Mental Health division. The operator advised the caller that if she reached a voicemail recording, she should hang up and call back so that the operator could connect her to someone. After two rings, Allison in the Children's Mental Health division answered the call. The caller requested information about accessing mental health services in the county for her son. Allison asked the caller to provide identifying information. The caller provided her son's name, John, and that he is 12 years old, but declined to provide any other information. Allison explained the process for intake, assessment, and treatment appointments. Allison then asked what general area they lived in and provided clinic information, including location, business hours, telephone numbers, and contact names. Allison provided information on how to access services, the different types of services, and what to expect after intake. The MHP provided all required information on accessing SMHS, including SMHS required to assess whether medical necessity criteria are met, including information about services needed to treat a beneficiary's urgent condition.

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FINDINGS

DHCS deems the MHP in compliance with specific requirements in California Code of Regulations, title 9, chapter 11, §§ 1810.405(d) and 1810.410(e)(1).

TEST CALL #6

Test call was placed on Tuesday, January 15, 2019, at 7:04 p.m. The call was initially answered after two (2) rings via a live operator. The operator identified herself as a counselor. The test caller asked for information on how to file a complaint about a therapist he is seeing through the MHP. The operator asked for the test caller's name. The test caller identified himself as Dwight. The operator informed the test caller that he could file a formal grievance by walking in or by calling the QI team. The forms are located in the lobby. The operator offered callback service if the caller provides contact information. Caller asked where s/he could pick one up. Operator then asked if caller was in the North County or South County. Caller replied north. Operator provided the address, 260 County Drive in Yreka and the telephone number is 530-841-4100. Operator asked the caller if s/he was in a safe location. Operator asked if the caller was having any thoughts of hurting themselves or others. Caller responded with no and that s/he was feeling fine. Operator asked the caller if s/he wanted to leave their information. Caller replied with no and that s/he would just walk-in and grab a form and fill it out. The caller was provided information about how to file a grievance.

FINDINGS

DHCS deems the MHP in compliance with specific requirements in California Code of Regulations, title 9, chapter 11, § 1810.405(d) and 1810.410(e)(1).

TEST CALL #7

Test call was placed on Tuesday, January 22, 2019, at 9:28 a.m. A live operator initially answered the call after one (1) ring. The caller requested information about how to file a complaint against a therapist seen in the county. The operator provided the caller with three options with the grievance form: 1) Pick up the grievance at the front window in the lobby; 2) The operator could mail it to the caller; 3) The operator could help fill out the grievance over the phone. The caller decided that she would pick up the form and the caller provided the address: 1107 Ream Avenue in Mt. Shasta. No additional information about SMHS was provided to the caller. The caller was provided information on how to use the beneficiary problem resolution and fair hearing processes.

FINDINGS

DHCS deems the MHP in compliance with specific requirements in California Code of Regulations, title 9, chapter 11, § 1810.405(d) and 1810.410(e)(1).

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SUMMARY OF TEST CALL FINDINGS

Protocol Question	Test Call Findings							Compliance Percentage
	#1	#2	#3	#4	#5	#6	#7	
1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Not applicable
2	OOB	IN	IN	IN	IN	N/A	N/A	80%
3	IN	IN	OOB	IN	IN	N/A	N/A	80%
4	N/A	N/A	N/A	N/A	N/A	IN	IN	100%

Based on the test calls, DHCS deems the MHP in partial compliance with California Code of Regulations, title 9, chapter 11, § 1810.405(d). The MHP must complete a POC addressing this finding of non-compliance. These are repeated deficiencies.

REQUIREMENT
The written log(s) contain the following required elements (Cal. Code Regs., tit. 9, chapter 11, § 1810.405(f).): a) Name of the beneficiary. b) Date of the request. c) Initial disposition of the request.

FINDINGS

The MHP did not furnish evidence to demonstrate it complies with California Code of Regulations, title 9, chapter 11, § 1810.405(f). The MHP must maintain a written log of the initial requests for SMHS from beneficiaries of the MHP. The requests must be recorded whether they are made via telephone, in writing, or in person. The log must contain the name of the beneficiary, the date of the request, and the initial disposition of the request.

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

- Call Log 2017-2018; and
- P&P CLIN 15-00 Intake and Approval Process.

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Five of five required DHCS test calls were not logged on the MHP's access log. The table below summarizes DHCS' findings pertaining to its test calls:

Test Call #	Date of Call	Time of Call	Log Results		
			Name of the Beneficiary (a)	Date of the Request (b)	Initial Disposition of the Request (c)
1	12/17/18	9:59 p.m.	OOC	OOC	OOC
2	1/23/19	7:30 a.m.	OOC	OOC	OOC
3	1/22/19	11:53 a.m.	OOC	OOC	OOC
4	2/8/19	9:34 a.m.	OOC	OOC	OOC
5	1/22/19	11:01 a.m.	OOC	OOC	OOC
Compliance Percentage			0%	0%	0%

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

DHCS deems the MHP out of compliance with California Code of Regulations, title 9, § 1810.405(f). The MHP must complete a POC addressing this finding of non-compliance. These are repeated deficiencies.

SURVEY ONLY FINDINGS

NETWORK ADEQUACY AND AVAILABILITY OF SERVICES

REQUIREMENT
The MHP must provide Therapeutic Foster Care (TFC) services to all children and youth who meet medical necessity criteria for TFC (Medi-Cal Manual for Intensive Care Coordination, Intensive Home Based Services, and Therapeutic Foster Care Services for Medi-Cal Beneficiaries, 3 rd Edition, January 2018).

FINDINGS

The MHP did not furnish evidence to demonstrate compliance with this survey item requirement.

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

- P&P CLIN 16-00 Intensive Services for Children and Youth – Screening and Referral;
 - P&P CLIN 16-02 Intensive Services for Children and Youth – Service Delivery;
- and

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- P&P CLIN 16-01 Intensive Services for Children and Youth – Intake and Assessment.

The MHP submitted policy and procedures addressing Intensive Service for Children and Youth. While policies are in place to provide TFC service, the MHP reported during the onsite discussion that the MHP was not successful in finding providers interested in providing TFC services in the Siskiyou County. The MHP had meetings with a foster care agency, Children First, but none of the parents were interested in providing TFC services. The MHP identified lack of cost benefit and increased oversight and documentation requirements may be some cause of not having interests in TFC providers.

SUGGESTED ACTION

DHCS recommends, at a minimum, the MHP implement the following actions in an effort to meet regulatory and/or contractual requirements, or to strengthen current processes in this area to ensure compliance in future reviews:

- Maintain policies and procedures to address the requirements;
- Continue discussion with interested contractors in providing TFC; and,
- Update the Provider Contract Boilerplate to reflect the requirements as needed.

COVERAGE AND AUTHORIZATION OF SERVICES

REQUIREMENT
MHPs must review and make a decision regarding a provider’s request for prior authorization within 5-business days after receiving the request.

SURVEY FINDING

The MHP did not furnish evidence to demonstrate it complies with this survey item requirement.

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

- P&P CLIN 302 Service Authorization Requests (SAR), Organization/Contracted Providers;
- P&P CLIN 16-05 Inpatient Treatment Authorization Request; and
- SAR log.

The policies did not indicate this requirement at the time of the review.

SUGGESTED ACTION

As the relevant DHCS guidance (Information Notice 19-026 Authorization of Specialty Mental Health Services) on 5/31/2019, DHCS recommends, at a minimum, the MHP implement the following actions in an effort to meet regulatory and/or contractual

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requirements, or to strengthen current processes in this area to ensure compliance in future reviews:

- Update policies and procedures to address the requirements;
- Provider training to the affected parties; and,
- Continue to monitor compliance with new requirements.