



MICHELLE BAASS  
DIRECTOR

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



GAVIN NEWSOM  
GOVERNOR

February 10, 2023

Sent via e-mail to: TMariscal@co.tuolumne.ca.us

Tami Mariscal  
Tuolumne County Behavioral Health Department  
105 Hospital Road  
Sonora, CA 95370

SUBJECT: Annual DMC County Compliance Section Findings Report

Dear Director Mariscal:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Drug Medi-Cal (DMC) Contract operated by Tuolumne County.

The County Compliance Section (CCS) 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 protocol, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Tuolumne County's Fiscal Year (FY) 2022-23 DMC contract compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Tuolumne County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Medi-Cal Behavioral Health Division (MCBHD), Plan and Network Monitoring Branch (PNMB), County/Provider Operations and Monitoring Branch (CPOMB) liaison by 4/10/2023. Please use the enclosed CAP form to submit the completed CAP and supporting documentation via the MOVEit Secure Managed File Transfer System. For instructions on how to submit to the correct MOVEit folder, email [MCBHDmonitoring@dhcs.ca.gov](mailto:MCBHDmonitoring@dhcs.ca.gov).

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

Sincerely,

Susan Volmer  
(916) 713-8677

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

To: Director Mariscal

CC: Mateo Hernandez, Audits and Investigations, Contract and Enrollment Review Division Chief  
Catherine Hicks, Audits and Investigations, Behavioral Health Review Branch Chief  
Ayesha Smith, Audits and Investigations, County Compliance Section Chief  
Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief  
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[MCBHDMonitoring@dhcs.ca.gov](mailto:MCBHDMonitoring@dhcs.ca.gov), County/Provider Operations and Monitoring Branch  
Lindsey Lujan, Tuolumne County Quality Improvement Manager

## COUNTY REVIEW INFORMATION

**County:**

Tuolumne

**County Contact Name/Title:**

Lindsey Lujan, Quality Improvement Manager

**County Address:**

105 Hospital Road  
Sonora, CA 95370

**County Phone Number/Email:**

209-533-6268  
llujan@co.tuolumne.ca.us

**Date of Review:**

1/10/2023

**Lead CCS Analyst:**

Susan Volmer

**Assisting CCS Analyst:**

Michael Bivians

**Report Prepared by:**

Susan Volmer

**Report Approved by:**

Ayesha Smith

## REVIEW SCOPE

- I. Regulations:
  - a. California Code of Regulations, Title 22, section 51341.1, 51490.1 and 51516.1 – Drug Medi-Cal Substance Use Disorder Services
  - b. California Code of Regulations, Title 9, Division 4: Department of Alcohol and Drug Programs
  - c. Health and Safety Code, Division 10.5, Section 11750 – 11970: Alcohol and Drug Programs
  - d. Welfare and Institutions Code, Division 9, Part 3, Chapter 7, Sections 14000, et seq.; 14100.2, 14021, 14021.51-14021.53, 14021.6, and 14124.20-14124.25, 14184.402, 14059.5: Basic Health Care – Drug Medi-Cal Treatment Program
  
- II. Program Requirements:
  - a. Fiscal Year (FY) 2021-22 State-County Contract, herein referred to as State County Contract
  - b. Fiscal Year (FY) 2022-23 State-County Contract, herein referred to as State County Contract
  - c. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
  - d. Behavioral Health Information Notices (BHIN)

## ENTRANCE AND EXIT CONFERENCE SUMMARIES

### **Entrance Conference:**

An Entrance Conference was conducted via WebEx on 1/10/2023. The following individuals were present:

- Representing DHCS:  
Susan Volmer, Associate Governmental Program Analyst (AGPA)  
Michael Bivians, County Compliance Monitoring II (CCM II) Chief
- Representing Tuolumne County:  
Tami Mariscal, Behavioral Health Director  
Brock Kolby, SUD Administrator  
Misti Ambler, Compliance Officer  
Amanda Lawrence, Quality Improvement Analyst  
Lindsey Lujan, Quality Improvement Manager  
Donna Villanueva, SUD Clinical Supervisor

During the Entrance Conference, the following topics were discussed:

- Introductions
- County overview of services provided
- DHCS overview of review process

### **Exit Conference:**

An Exit Conference was conducted via WebEx on 1/10/2023. The following individuals were present:

- Representing DHCS:  
Susan Volmer, AGPA  
Michael Bivians, CCM II Chief
- Representing Tuolumne County:  
Tami Mariscal, Behavioral Health Director  
Brock Kolby, SUD Administrator  
Misti Ambler, Compliance Officer  
Amanda Lawrence, Quality Improvement Analyst  
Lindsey Lujan, Quality Improvement Manager  
Donna Villanueva, SUD Clinical Supervisor

During the Exit Conference, the following topics were discussed:

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

## SUMMARY OF FY 2022-23 COMPLIANCE DEFICIENCIES (CD)

<u>Section</u>	<u>Number of CD's</u>
1.0 Administration	0
2.0 Program Integrity	0
3.0 Perinatal Practice Guidelines	0
4.0 Youth Services	0
5.0 Reporting Requirements	1

## **CORRECTIVE ACTION PLAN (CAP)**

Pursuant to the State County Contract, Exhibit A, Attachment I A1, Part I, Section 4, B, 6 a-b 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 2022-23 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 analyst will monitor progress of the CAP completion.

## Category 5: REPORTING REQUIREMENTS

A review of the County's reporting requirements was conducted to ensure compliance with applicable regulations, and standards. The following DMC deficiency in regulations, standards, or protocol requirements was identified:

### CD 5.1:

DMC Contract, Exhibit A, Attachment I A1, Part III; C, 3-6

3. Electronic submission of CalOMS-Tx data shall be submitted by the Contractor within 45 days from the end of the last day of the report month.
4. The Contractor shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (Document 3J) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS-Tx data collection.
5. The Contractor 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.
6. The Contractor shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS identified in Document 3S for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method.

**Findings:** The County's Open Admissions Report is out of compliance.



## **TECHNICAL ASSISTANCE**

Tuolumne County did not request technical assistance during this review.