

1600 9th Street, Room 151, Sacramento, CA 95814 (916) 654-2309

August 5, 2008

DMH INFORMATION NOTICE NO.: 08-22

TO: LOCAL MENTAL HEALTH DIRECTORS

LOCAL MENTAL HEALTH PROGRAM CHIEFS LOCAL MENTAL HEALTH ADMINISTRATORS

COUNTY ADMINISTRATIVE OFFICERS

CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: FY 08-09 COMPLIANCE PROTOCOL FOR CONSOLIDATED

SPECIALTY MENTAL HEALTH SERVICES AND OTHER FUNDED

SERVICES

SUPERCEDES: DMH Information Notice No.: 07-16

REFERENCE: Retain until rescinded

This Information Notice provides the specifics of the Department of Mental Health's (DMH) compliance review of Mental Health Plans (MHPs) in fiscal year (FY) 2008-2009. Enclosed are the following:

- Review Protocol for FY 2008-2009
- Reasons for Recoupment in FY 2008-2009
- Medi-Cal Oversight Review Schedule for FY 2008-2009
- 1) Review Protocol for FY 2008-2009: DMH will review approximately one third of the MHPs in FY 08-09. In addition to the usual MHP personnel involved in the oversight review process, the MHP must also include direct service staff in the protocol review process in order to confirm that policies match practices. No specific number of direct service staff need be present, but there should be a sufficient number present during the course of the review process to demonstrate their knowledge of MHP policies, procedures, and processes related to items on the protocol.
- 2) Reasons for Recoupment in FY 2008-2009: DMH will review a random sample of adult beneficiary charts and recoup Federal Financial Participation (FFP) dollars per the FY 08-09 Reasons for Recoupment. The Reasons for Recoupment remain unchanged from FY 07-08.

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a. Non- Hospital Services: Depending on the size of your county (large or small), DMH will review the documentation of services provided to 10 or 20 adult beneficiaries. This review includes all charts associated with their care during the review period. The review period will be a floating three-month period commencing twelve months prior to the month of the review. MHPs will be provided the beneficiary names a week before the review.

In addition to recouping FFP, when applicable, a Plan of Correction will be required for items found out of compliance with Section K, Chart Review - Non Hospital Services, of the protocol.

b. Short- Doyle/ Medi-Cal (SD/MC) Hospital Services: DMH will review a sample of adult and/or children's charts. The sample will be drawn from paid claims from the twelve month period prior to the date of the review.

In addition to recouping FFP, when applicable, a Plan of Correction will be required for items found out of compliance with Sections L and M of the protocol.

3) Review Schedule for FY 2008-2009: The schedule includes both MHP system reviews and SD/MC hospital reviews.

MHPs will receive an "announcement" letter approximately 30 days in advance of its scheduled system review or hospital review.

This protocol was developed in collaboration with the Compliance Advisory Committee, which includes representatives from the California Mental Health Director's Association, the California Mental Health Planning Council, the California Healthcare Association, the National Alliance for the Mentally III, the Consumer/Family Task Force, Disability Rights California (Protection and Advocacy, Inc.), and other stakeholders.

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If you have any questions, please contact Carol Sakai, LCSW, Chief, Medi-Cal Oversight-South at Carol.Sakai@dmh.ca.gov or (916) 445-0460.

Sincerely,

Original signed by

STEPHEN W. MAYBERG, Ph.D. Director

Enclosures

cc: California Mental Health Planning Council Patricia Ryan, Executive Director CMHDA Compliance Advisory Committee