ATTACHMENT A Corrective Action Plan Response Form

Plan: California Health and Wellness

Review Period: 12/01/2018-11/30/2019

Audit Type: Medical Audit and State Supported Services

Onsite Review: 02/24/2020-03/03/2020

MCPs are required to provide a CAP and respond to all documented deficiencies within 30 calendar days, unless an alternative timeframe is indicated in the letter. MCPs are required to submit the CAP in word format that will reduce turnaround time for DHCS to complete its review.

The CAP submission must include a written statement identifying the deficiency and describing the plan of action taken to correct the deficiency, and the operational results of that action. For deficiencies that require short-term corrective action, implementation should be completed within 30 calendar days. For deficiencies that require long-term corrective action or a period longer than 30 calendar days for implementation, the MCP must demonstrate it has taken remedial action and is making progress toward achieving an acceptable level of compliance. The MCP will be required to include the date when full compliance is expected to be achieved. **Policies and procedures submitted during the CAP process must still be sent to the MCP's Contract Manager for review and approval in accordance with existing requirements.**

DHCS will maintain close communication with the MCP throughout the CAP process and provide technical assistance to ensure the MCP provides sufficient documentation to correct deficiencies. Depending on the volume and complexity of deficiencies identified, DHCS may require the MCP to provide weekly updates, as applicable.

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* (*Short-Term, Long-Term)	DHCS Comments
2.4.1 Physician Certification Statement	 a. Update the plan's policy to limit courtesy rides to 1 RT or 2 one way transports if a PCS form is not on file, unless it meets urgent 	a. Policy "CA.HNT.MB RS.58 10.12.2020_F INAL"	a. April 2020	The following documentation supports the MCPs efforts to correct the finding: a. Policy "CA.HNT.MBRS.58 10.12.2020_FINAL"
The Plan did not	criteria per policy			This policy was updated and



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ensure that the subcontractor obtained a signed PCS form prior to providing transportation	guidelines.b. Implement a new NEMT audit tool to audit the PCS form process.	b. NEMT Audit Tool FINAL	b. May 2020	implemented (April 2020) to limit courtesy rides to one Round trip or two one-way transports if a PCS form is not on file, unless it meets urgent criteria per policy guidelines.
services for some NEMT services to members. The PCS form provides the justification for the service, determines the appropriate level of services, dates of service, and the mode	c. Update the transportation vendor's policy and procedure for monitoring and reporting pending and expired PCS forms to the Plan.	c. Pending_Expi red_Approved PCS Policy v2 6.2020 FINAL	c. June 2020	 b. NEMT Audit Tool Final A new NEMT audit tool to audit the PCS form process was created and implemented (May 2020). cPending_Expired_Approved PCS Policy v2 6.2020 FINAL -Pending_Expired PCS Reporting Template v2 6.16.2020
of transportation.	 d. Establish the status of PCS form receipts and provider outreach as standing agenda items for the Joint Operations and Vendor Operations Committee meetings. e. Conduct an annual audit of LogistiCare. 	Pending_Expi red PCS Reporting Template v2 6.16.2020 d. LOC and VOC Agendas and Minutes (folder)	d. October 2019 e. October 2019	The transportation vendor's policy and procedure for monitoring and reporting pending and expired PCS forms to the Plan was updated and implemented (June 2020). d. LOC and VOC Agendas and Minutes (folder) Established the status of PCS form receipts and provider outreach as
		e. LogistiCare 2019 Annual Audit		standing agenda items for the Joint Operations and Vendor Operations Committee meetings. This was

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		Summary_CH W 2020 LogistiCare Validation Audit Report_CHW		 implemented (October 2019). e. LogistiCare Validation Audit Report_CHW Annual audits of LogistiCare will be conducted.
State Supported Servi	ices			

Submitted	by:
Title:	2

Date: