ATTACHMENT A Corrective Action Plan Response Form

Plan: SCAN

Review Period: 03/01/2020 - 02/28/2021



Audit Type: Medical Audit

Onsite Review: 03/01/2021 – 03/12/2021

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, as applicable 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
1. Utilization Manage	ment			
2. Case Management	and Coordination of Care			
3. Access and Availab	bility of Care			
4. Member Rights 4.1.			1	-
4.1.1 Written	The Grievances & Appeals	EOC Review	Effective June	08/13/21 – The MCP submitted
Member Information (Grievance Filing	Department (GAD) has implemented the following EOC	DTP	2021, and annually	additional requested supporting documentation.
Timeframes)	Review Guidelines:	EOC Review	thereafter.	
,	Upon receipt of DHCS or	Sign Off_June		Supporting documentation has
	CMS communications (i.e.,	2021		been verified:
	HPMS Memo, APL, etc),			1. 4.1.1_Additional CAP Request
	GAD Auditor reviews and			8.11.21

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* (*Short-Term, Long-Term)	DHCS Comments
	 documents any regulatory changes in the "EOC Review Guide" log. In Approximately Quarter 2 of each year, SCAN Marketing releases the upcoming year's EOC drafts for review by Business Units. GAD has two assigned Reviewers. Reviewer #1 notes any applicable changes needed in the EOC and submits changes to Marketing. Reviewer #2 validates changes are made. Reviewers consist of two different members of the GAD Management Team Once EOC drafts have been signed off by both GAD Reviewers, a signed attestation is generated confirming the year's EOC review process has been successfully completed. 			 08/06/21 – Additional information was requested from the MCP. 07/22/21 – The MCP submitted additional requested supporting documentation. Supporting documentation has been verified: 2022 EOC_Connections at Home_Redline 2022 EOC_Connections_Redline EOC_Connections_Redline EOC Review Guide Website Redlined Update Website_Confirmed Update 07/13/21 – Additional information was requested from the MCP. 07/09/21 – The MCP submitted its Corrective Action Plan and supporting documentation. (See "Action Taken" column) Supporting documentation has been verified:

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* (*Short-Term, Long-Term)	DHCS Comments
4.1.2 Provider Operation Manual	The Grievances & Appeals Department (GAD) has	POM Review DTP	Effective June 2021, and	 EOC Review DTP EOC Review Sign Off_June 2021 Implementation completed. (See "Implementation Date" column) 2021 SCAN CAP 4.1.1 is accepted. 07/22/21 – The MCP submitted additional requested supporting
(Grievance Filing Timeframes)	 Department (GAD) has implemented the following POM Review Guidelines: Upon receipt of DHCS or CMS communications (i.e., HPMS Memo, APL, etc), GAD Auditor reviews and documents any regulatory changes in the "POM Review Guide" (provide review guide) log. In Approximately Quarter 2 of each year, SCAN Network Management releases the upcoming year's POM drafts for review by Business Units. GAD has two assigned Reviewers. Reviewer #1 notes any applicable 	POM Review Sign Off- PENDING (In progress)	annually thereafter.	 documentation. Supporting documentation has been verified: 2022 POM Redline Version POM Review Guide 07/13/21 – Additional information was requested from the MCP. 07/09/21 – The MCP submitted its Corrective Action Plan and supporting documentation. (See "Action Taken" column) Supporting documentation has been verified: POM Review DTP_4.1.2

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* (*Short-Term, Long-Term)	DHCS Comments
	 changes needed in the POM and submits changes to Network Management. Reviewer #2 validates changes are made. Reviewers consist of two different members of the GAD Management Team Once POM drafts have been signed off by both GAD Reviewers, a signed attestation is generated confirming the year's POM review process has been successfully completed. 			 POM Review Sign Off- PENDING_4.1.2 Implementation completed. (See "Implementation Date" column) 2021 SCAN CAP 4.1.2 is accepted.
4.1.3 Oversight of Contracted Vendors	SCAN is developing processes to support oversight and monitoring of the SCAN contracted homecare vendors, to ensure timely notification to SCAN in the event that they receive a member complaint/ grievance. (Home Care – i.e. Home Making, Personal Care and Home Delivered Meals) Below are the actions taken and/or in progress: • Sent communication to		May 2021 – Feb 2022 July 2021	 08/13/21 – The MCP submitted additional requested supporting documentation. Supporting documentation has been verified: 4.1.3 Workgroup Minutes 7_27_21 4.1.3_July 2021 Provider Today Newsletter 08/06/21 – Additional information was requested from the MCP.

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	 subcontractors reminding them of the grievance process (Will then follow up with revision to the POM) Review and update 		June 2021 – Q4	07/22/21 – The MCP submitted its Corrective Action Plan and supporting documentation. (See "Action Taken" column)
	Provider Operations Manual (POM) guidance for publication in 2022		2021	Supporting documentation has been verified: 1. Grievance Process Email
	• Develop and provide education for Home Care subcontractors to comply with reporting grievance requirements as defined in the POM		July 2021 – Feb 2022	 2. DHCS CAP 4.1.3_Additional Request 07/13/21 – Additional information was requested from the MCP. 07/09/21 – The MCP submitted its
	• Develop monitoring process to ensure subcontractor reporting is received. Develop a corrective action plan process for non- compliant subcontractors		July 2021 – Oct 2021	Corrective Action Plan and supporting documentation. (See "Action Taken" column) Supporting documentation has been verified:
	 Conduct SCAN internal staff training (Care Coordination and Grievance and Appeals Department (GAD) 		Nov 2021 – Feb 2022	 DHCS had no documentation to initially verify, additional documentation will be requested. Implementation completed. (See

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	 Review quarterly GAD Reporting to identify any trends and report to quarterly Network Performance Committee 		Q4 2021 - Ongoing	"Implementation Date" column) 2021 SCAN CAP 4.1.3 is accepted.	
5. Quality Managemen	nt				
	Organizational Capacity				
State Supported Services					

Submitted by:Ginette HawkinsTitle:Vice President Compliance, Compliance Officer

Date: July 9, 2021

