



COUNTY OF SANTA CLARA
Behavioral Health Services
 Supporting Wellness and Recovery

TO: Caminar Leadership
 Indian Health Center Leadership
 Las Plumas Clinic Leadership
 Narvaez Clinic Leadership

FROM: Courtney Gray, Quality Director

DocuSigned by:

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RE: FY24 Pilot Provider Audit Process

DATE: October 20, 2023

Congratulations, you have been chosen as a pilot provider for our first annual Behavioral Health Services Department (BHSD) Integrated Audit! The BHSD will be piloting our fully integrated annual audit for the following County Clinics and County Contracted Providers: Caminar, Indian Health Center, Las Plumas, and Narvaez. This process will allow us to ensure all the new audit tools are working effectively and give you as pilot providers an advantage on earlier feedback and informing the audit process.

Key Points of Contact

Staff Name	Role	Email Address
Steve Castro	Primary Lead for Caminar	Steve.castro@hhs.sccgov.org
Suzana Costa	Clinical Chart Lead for Caminar	suzana.costa@hhs.sccgov.org
Alicia Partee	Primary Lead for Indian Health Center	Alicia.partee@hhs.sccgov.org
Nguyet Ly	Clinical Chart Lead for Indian Health Center	nguyet.ly@hhs.sccgov.org
Martha Martinez	Primary Lead for Narvaez	Martha.martinez@hhs.sccgov.org
Emily P. Esparza	Clinical Chart Lead for Narvaez	emilyp.esparza@hhs.sccgov.org
Renee Marquett	Primary Lead for Las Plumas	Renee.marquett@hhs.sccgov.org
Sam Hall	Clinical Chart Lead for Las Plumas	sam.hall@hhs.sccgov.org



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Key Dates

Meeting/Deliverable	Date/Time	Location
Notification of Audit	10/20/23	Memo sent by email
Kick Off Q&A Session	10/25/23 from 12noon-1pm	Click here to join the meeting
Points of Contact Identified	11/3/23	Provider submits by email
Chart and Personnel Universe Submitted (Excel list)	11/10/23	One Drive
BHSD Notifies Provider of Charts and Personnel Files to be prepared	11/21/23	One Drive
All Audit Material to be loaded to One Drive	12/8/23	One Drive
Audit Documentation Review Period	12/11/23-12/22/23	
Draft Audit Results Issued	1/5/24	Results sent by email
Submit Questions/ Additional Evidence	1/15/24	Provider submits by email and/or one drive
Final Audit Findings Issued	1/22/24	Findings submit by email
Corrective Action Plan Due to BHSD	2/22/24	Provider submits by email and/or one drive

Summary of Audit Process

The integrated audit process will include the following components for the specified time periods:

1. Chart Review for the period January 1, 2023 – November 1, 2023
 CPT Code Audit for the period July 1, 2023 - November 1, 2023
2. Administrative Audit (including personnel files review) for the period January 1, 2023 – November 1, 2023

The audit tools will be distributed to CCPs and County Clinics via posting to the respective provider OneDrive folder. The Provider Relations Network Oversight team will send a follow-up email to request a list of each provider's primary contacts for this review process. The contact person(s) should be accessible throughout the time that their agency or clinic audit is being conducted.



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Chart Review

Excel file with the list of potential clients for audit will include:

- Client First Initial
- Client Last Initial
- Date of Birth (MM/DD/YYYY)
- Program Name

It should include all clients who meet the FY 24 Chart Audit Criteria:

- Medi-Cal Member/Beneficiary
- Episode open January 1, 2023- October 1, 2023
- There are at least 3 billable services since July 1, 2023
- First Initial
- Last Initial
- Date of Birth
- Program Name

BHSD staff will randomly select and order charts to be prepared and submitted for audit.

- A randomized list will be shared with the provider through the OneDrive platform, and a follow-up email will be sent to the Provider leads.
- All charts and billing documents must be posted by the deadline specified in the schedule above.
- The posted PDFed client chart needs to include all relevant notes, assessments, other clinical and billing summaries for each service. The billing summary should include a minimum: code, date of service, modifiers (if applicable), units (if applicable)

8/30 Sampling Methodology for Charts

BHSD will implement the NCQA 8/30 methodology for clinical chart audits in alignment with the documentation and clinical standards established under CalAIM. Here's how it will work:

- Each provider will be responsible for preparing 40 charts randomly selected by the County.
- Initially, a full review will be conducted on a sample of eight files. If any of these initial eight files fail the review, an additional sample of 22 files will be reviewed (for a total of 30 records).



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- In addition to the 30 records, there will be an oversampling of ten charts. These oversampled charts will serve as a backup in case any of the original 30 do not meet the minimum standards outlined above.

Please note that BHSD reserves the right to request multiple universes based on the provider's contracted programs, which may deviate from the new CalAIM standards.

Administrative Review

Administrative review includes two components which are program/agency documents and personnel files. Files must include the following:

1. Documentation demonstrating evidence for items in the tool. (i.e. policies)
2. Excel List of program personnel in the following format:
 - a. First Name
 - b. Last Name
 - c. Job Code/Position Name
 - d. Credential Type, i.e. Licensed Clinical Social Worker, Mental Health Rehabilitation Specialist, Certified Counselor

BHSD staff will randomly select personnel files to be prepared and submitted for audit.

8/30 Sampling Methodology for Personnel Files

BHSD will implement the NCQA 8/30 methodology for personnel files in alignment with documentation standards across programs under CalAIM. Here's how it will work:

- Each provider is responsible for preparing 40 personnel files randomly selected by the County.
- Initially, a full review will be conducted on a sample of eight files. If any of these initial eight files fail the review, an additional sample of 22 files will be reviewed (for a total of 30 records).
- In addition to the 30 records, there will be an oversampling of ten files. These oversampled files will serve as a backup in case any of the original 30 do not meet the minimum standards outlined above.
- If a provider is contracted for both Mental Health (MH) and Substance Use Treatment Services



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(SUTS), a separate universe for each is required to ensure the efficacy of the methodology.

Please note that staff included in these personnel files should encompass employed individuals who were with the agency for at least six months during the audit period, even if they are no longer with the agency.

The randomized list will be shared with the provider via the OneDrive platform, and a follow-up email will be sent to Provider leads.

Instructions

Additional details will be provided at kick-off including how to prepare and submit document and charts.

Questions

For chart review and CPT Code review questions, please contact by email QA@hhs.sccgov.org

For administrative review questions, please contact BHSD Provider Relations by email BHSDPR@hhs.sccgov.org