

SUDPOH Summary of Changes – July 2019

SECTION	REVISION	WHAT HAS CHANGED (section page number in parenthesis)
Cover Page	N/A	<ul style="list-style-type: none"> • N/A
Section A: Organized Delivery System	Updated Information	<ul style="list-style-type: none"> • Added language for requirements for TRC’s, school based TRC’s serving clients with appendix reference. Added requirement for School Link (A.22)
Section B: Continuum of Care & Services	Updated Information	<ul style="list-style-type: none"> • Included hyperlink to new Appendix B.1- “WM Standards” (B.2) • Changes IMS requirement for WM 3.2 programs to strongly encouraged (B.3) • Reworded group counseling to specify that children do not count toward group totals for mother/child habilitative/rehabilitative services (B.5) • Added link to Section D for Group Sign-in Sheet standards (B.5)
Section C: Prevention Services & Specialty Programs	Updated Information	<ul style="list-style-type: none"> • Added note to contact COR for questions related to any justice-involved clients. (C.5)
Section D: Service Delivery	Updated Information	<ul style="list-style-type: none"> • Updated timely access standards to include residential standards and no waitlists for all programs (D.1) • Added Network Adequacy requirements (D.1) • Added Telehealth requirements (D.2) • Added daily admissions standards (D.11) • Added Risk Assessment and Safety Management Plan to required admission documents; High Risk Assessment no longer required, identified as an optional form (D.12) • Added Safety Management Plan guidelines (D.15) • Added DHCS documentation requirement to support physician review of the physical examination results, including the specific format for signature and date (D.16) • Added start/end time requirement for individual and group services for clients receiving Naltrexone (D.34) • Updated group sign-in sheet requirements to include date LPHA/counselor signed; must be signed same day as session; signature must be adjacent to the typed/legibly printed name. (D.36)
Section E: SUD Program Requirements	Updated Information	<ul style="list-style-type: none"> • Inserted hyperlink to new Appendix E.1 - “Tip Sheet: Required Policies and Procedures and Where to Locate in SUDPOH” (E.1) • Updated Initial DMC Certification and re-certification application process to reflect electronic applications submitted via PAVE (E.3) • Added DHCS information about Naloxone and permission to utilize at program (E.5)

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Section E: SUD Program Requirements (cont.)	Updated Information (cont.)	<ul style="list-style-type: none"> • Updated drug testing standards and included hyperlink to new Appendix E.3, NADCP Standards for Witnessed Collection (E.8) • Added requirement for promotional materials for County funded programs to include HHS and LWSD logos (E.10) • Updated Charitable Choice language and link (E.12) • Updated Code of Conduct standard to include Trauma Informed Care Code of Conduct guide for polices and procedure development (E.15) • Added credentialing requirements (E.19) • Added requirement for counselors/registrant to be certified when providing intake, assessment, treatment, recovery planning, case management, individual/group counseling and added hyperlink to new Appendix E.9, a list of Certifying Organizations with their corresponding credentials and links for credential verification (E.23) • Corrected CADTP acronym (E.23) • Updated approved Certifying Organizations with CADE (E.23) • Added DHCS requirement to MD responsibilities to include reviewing client health/medical info and drug hx and document any orders/recommendations (E.25) • Added DCHS requirement for written roles/responsibilities, code of conduct for MD, signed/dated (E.25) • Added DHCS requirement for Code of Conduct requirement to clarify that registered/certified SUD counselors' personnel files must include a copy of the Code of Conduct from their Certifying Organization in addition to the program's Code of Conduct (E.27) • Added reference to Personnel File Tip Sheet in appendix (E.27) • Added webpage for staff training resources (E.30) • Updated staff requirement for ASAM training to include supervising staff, i.e. LPHA, Medical Director, and tracking on MSR/QSR (E.30)
Section F: Provider Contracting	Updated Information	<ul style="list-style-type: none"> • Updated the payment recovery process for all providers completing self-reviews and QM related compliance reviews (QAR, TA, MRR) to include encrypted emails sent to QI Matters and Billing Unit (F.10) • Updated procedures for DPC 203 transfer/disposition (F.14-16) • Updated procedure for mobile device disposals (F.16-17)

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Section F: Provider Contracting	Removed	<ul style="list-style-type: none"> Removed QAR payment recovery process with MHS
Section G: Quality Management	Updated Information	<ul style="list-style-type: none"> Updated DHCS requirement for Code of Conduct requirement to clarify that registered/certified SUD counselors' personnel files must include a copy of the Code of Conduct from their Certifying Organization in addition to the program's Code of Conduct (G.4) Updated DHCS requirement regarding specifics for MD/LPHA documentation of the basis of diagnosis, including signature requirements (G.6) Updated QAR requirements for QM and provider self-reviews (G.7) Updated Medication Monitoring standards with reporting tool information and instructions (G.8) Updated PSPP review appeals process information (G.15) Added DHCS residential reporting requirement for unusual incident/injury/death SIR's (G.18) Client satisfaction survey updated to reflect use of only the UCLA survey (G.31)
Section G: Quality Management	Removed	<ul style="list-style-type: none"> Removed medication monitoring requirement for OTP's to submit report DEA reports quarterly Removed QAR Services Assistance
Section H: Administrative Oversight	Updated Information	<ul style="list-style-type: none"> Updated link to 2019 DMC Billing Manual (H.3)
Section I: Resources	Removed	<ul style="list-style-type: none"> Network of Care
Appendices	Updated Information	<p>Appendices for Section A, B, E have been renumbered</p> <ul style="list-style-type: none"> Added "CYF Guidance for TRC Sites" (Appendix A.2) Updated "System of Care Glossary of Terms" (Appendix A.3) Added "Withdrawal Management Standards" (Appendix B.1) Updated "Group Counseling Sign-In Sheet" (Appendix D.4") Added "List of Policies & Procedures" (Appendix E.1) Added "Witnessed Collection" (Appendix E.3) Added "How to Access RIHS Trainings" (Appendix E.5) Updated "Person with Disabilities Provider List" (Appendix E.7) Added "Trauma Informed Care Code of Conduct" (Appendix E.8) Added "SUD Credentials" (Appendix E.9) Added "DMC Personnel File Review Tip Sheet" (Appendix E.10)

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Appendices (cont.)	Updated Information (cont.)	<ul style="list-style-type: none"> • Updated “Payment Recovery Form” (Appendix F.4) • Updated “Claims Adjustment Form” (Appendix F.5) • Updated “BHS Property Inventory Form” (Appendix F.6) • Updated “DPC 203 Form” (Appendix F.7) • Updated “DPC 203 Mobile Devices Form” (Appendix F.8) • Added “DPC 203 Flowcharts” (Appendix F.10) • Updated “NOABD Table” (Appendix G.6)
Appendices	Removed	<ul style="list-style-type: none"> • Training Matrix • BHETA Trainings
All Sections	Updated Information	<ul style="list-style-type: none"> • Updated AOD Counselor with SUD Counselor • Updated BHETA to RHIS • Updated all links to websites/documents/emails