

SUDPOH Updates – Sept 2017

| Section: | Revision based on: | What has changed: |
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| Section A: System of Care | Updated information | <ul style="list-style-type: none"> • Added “Customer Service” and “ASAM” to the System of Care Principles (A.1-3). |
| Section D: Facility and Operation Requirements | Clarification of requirements | <ul style="list-style-type: none"> • DHCS program certification (and licensing for residential) and DMC certifications (if applicable) are required of programs in the County SUD system of care (D.1-2). • Local health emergency contractor requirements (D. 5) |
| | Moved topics more related to this section | <ul style="list-style-type: none"> • The following topics were moved from Section E: <ul style="list-style-type: none"> - CYF Program requirements (D.4) - Operational procedures (D.4) - Public contact (D.4) - Program registrar (D.5) - Emergency Critical services (D.5) - Charitable choice regulations (D.6) |
| Section E: Requirements for Service Delivery | Updated information | <ul style="list-style-type: none"> • Release of Info to Referrals (E.1) • Added “Missed Scheduled Appointments” guidelines (E.1-2) • Exceptions to Confidentiality (E.3) |
| Section F: Management and Staff Development | Moved topics more related to this section | <ul style="list-style-type: none"> • The following topics were moved from Section E: <ul style="list-style-type: none"> - Ethical/legal standards (E.1) - Counselor/client relationships (E.1) - Sexual contact (E.1) - Cultural and Language... (F.7-8) - Trafficking Victims... (F.10-11) |
| | Updated information | <ul style="list-style-type: none"> • Staff training requirements/resources (F.6) • Cultural Competence (F.6-10) • Trafficking Victims Protection Act (F.10-11) |
| | DHCS input of missed compliance review items | <ul style="list-style-type: none"> • Addition of Medical Director’s responsibilities from Title 22 (F.4). |
| Section G: Budget/Financial | Moved topics more related to this section | <ul style="list-style-type: none"> • The following topics were moved from Section E: <ul style="list-style-type: none"> - Financial status evaluation and merged in “Health Insurance Coverage Information” (G.1) - Service eligibility (G.1) - Fee for Service... (G.1) - False Claims Act (G.2) - Funding restrictions (G.2) - Inventory (G. 4) - “General relief” added to Revenue Match topic (G.5) |

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| Section G: Budget/Financial | Updated information from County and DHCS | <ul style="list-style-type: none"> • Financial Status Evaluation updated (G.1) • “County of Responsibility and Residency” topic added (G.1) • “Publicity, Announcements, and Materials” topic added (G.2) • “Gift Card Usage” topic added per contracts (G.4-5) |
| Section H: DMC Title 22 Regulations | Moved topics more related to this section | <ul style="list-style-type: none"> • The following topics were moved from Section J (Documentation Requirements): <ul style="list-style-type: none"> - QAR Services (H.2) - Appeals (H.4) - Follow up and Monitoring (H.5) - Intent to Terminate... (H.6) |
| | Updated information from County and DHCS | <ul style="list-style-type: none"> • DMC certification and Re-certification requirements (H.1) • QAR Services and QAR Processes topics were updated about requirements and potential DMC billing denials (H.2-3) • “Reviews by DHCS” topic added about various potential reviews and audits (H.3) • “DMC Monitoring Reviews” topic added about specific requirements (H.5) • “Determination of Diagnosis and Medical Necessity” (H.6) |
| Section I: Quality Management | New section added to combine QM related topics | <ul style="list-style-type: none"> • “Quality Assurance & Quality Improvement” topic added (I.1) • The following topics were moved from Section E: <ul style="list-style-type: none"> - Internal Program Review... (I.1) - Client Satisfaction Surveys (I.2) - National Voter Registration... (I.3) - Serious Incident Reporting (I.3-8) |
| | Updated information from County and DHCS | <ul style="list-style-type: none"> • “Monthly/Quarterly Status Reports” topic added (I.1-2) • “Client Satisfaction Surveys” updated for new process (I.2) • “Complaints” topic added, per DHCS requirements for complaint process (I.2) • “National Voter Registration...” updated (I.3) • “SIR” topic updated to not require a Report of Findings for Tarasoffs (I.5) • “Clinical Case Reviews” topic added (I.6) |

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| Section J: Data Collection and Reporting Requirements | Updated information from County and DHCS | <ul style="list-style-type: none"> • “SanWITS” information updated (J.1) • “DATAR” topic added (J.1) • DMC Billing Manual link added (J.2) • “PC 1000 Data” updated (J.2) • “Email” updated about notification of email changes (J.3) • Removed “Prop 36 Data” topic as it is no longer required by DHCS |
| Section K: Documentation Requirements and Definitions | Combined sections based on related topics | <ul style="list-style-type: none"> • “Uniformed Record Manual” previous section K was moved to this section (K.1) |
| | Updated information from County and DHCS | <ul style="list-style-type: none"> • Added “Multiple Billing Override Certification” for DMC services (K.5) • “Documentation of Missed Appointments” added (K.7) • “Electronic Health Records” topic added for DHCS requirements and to notify BHS COR prior to implementation of EHR (K.7) |
| Appendices | Updated information from County and DHCS | <ul style="list-style-type: none"> • “Program Accessibility Assessment” was updated (Appendix D.2) • “PWD SUD Services Provider List” was updated (Appendix D.3) • “Sliding Fee Scale” moved from section E (Appendix G.1) • “Gift Card Approval Form” added (Appendix G.2) • “SUD Complaint Report Form” added (Appendix I.1) • “Serious Incident Report (SIR)” added (Appendix I.2) • “Serious Incident Report of Findings (SIROF)” added (Appendix I.3) • “Root Cause Analysis (RCA) Worksheet” added (Appendix I.4) • “SanWITS Encounters” added (Appendix J.1) • “Title 22 DMC Diagnosis...” moved from section J (Appendix K.2) • “Multiple Billing Override Certification Form (DHCS 6700)” added (Appendix K.3) |