

SUDPOH Summary of Changes – November 2022

SECTION	REVISION	WHAT HAS CHANGED (Section page number in parenthesis)
Cover Page	N/A	<ul style="list-style-type: none"> N/A
Table of Contents/Appendix	Updated Information	<ul style="list-style-type: none"> Updated page numbers/hyperlinks
Section A: Organized Delivery System	Updated Information	<ul style="list-style-type: none"> Updated covered services (A.1) Added note about CalAIM and info notices section to include effective dates for changes to STC. (A.2) Added “harm reduction” to EBP (A.11) Updated “Physician Consultation” to “Clinician Consultation” to align with CalAIM updates; removed county billable information (A.12) Updated “case management” to remove redundancies and align with care coordination language for CalAIM (A.13) Added CalAIM section (A.23) <p>Removed:</p> <ul style="list-style-type: none"> Care coordination standard within 90 calendar days
Section B: Providing DMC Services	Renamed Section & Updated Information	<p>Renamed section from “Continuum of Care & Services” to “Providing DMC Services”</p> <p>Update/New Content:</p> <ul style="list-style-type: none"> Added CalMHSA Clinical Documentation Guides (B.1) Updated Levels of care to align with CalAIM updates, including Res 3.3 (B.1-8) Updated OTP to remove the counseling requirement up to 200 minutes per month (B.9) Updated Scope of Practice & Services to align with CalAIM updates, including adding Clinician Consultation and Peer Services (B.10-15) Updated care coordination to align with CalAIM and reduce redundancies (B.11)
Section C: Prevention Services & Specialty Programs	Updated	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> CYF, Peri and Adolescent Services (moved from A) Co-occurring Population (moved from a & another section A and E) <p>Updated/New Content:</p> <ul style="list-style-type: none"> Indian Health Care Providers (C.7-9)
Section D: Practice Guidelines	New Section & Updated Information	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> Admission Policies, Procedures Protocols (moved from E.1) Trauma Informed Services (moved from E.8) Medical Necessity & SUD Diagnosis (moved from D.15-17) Non-Residential Service Access (moved from D.12) Documentation Correction Guidelines (moved from D.31-D.39) Self-Help and Program Structure (moved from D.21) Care Coordination (moved from D.27-29)

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		<ul style="list-style-type: none"> • Medications (moved from E4-5) • Drug Testing, Co-occurring Disorders (moved from E.9-10) • Continued Service and Discharge Criteria (moved from A.17) • Group facilitation (moved from B) <p>Update/New Content:</p> <ul style="list-style-type: none"> • Updated screening process to include choices of tools for collecting information, ASAM reporting, client contact reporting (D.2) • Updated “Medical Necessity and SUD Diagnosis” to align with CalAIM changes (D.4) • Removed/replace treatment plans, PN, group sign in sheet, recovery plans, with CalMHS Clinical Documentation Guides (D.7) • Added CalMHS Clinical Documentation Guides (D.8) • Updated “documentation correction guidelines” to align with CalAIM changes/updates (D.8) • Updated “continued service and dc criteria” to align with CalAIM (D.9)
Section E: Access to Service	New Section & Updated Information	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> • Access (moved from D.1-D3) • Geographical Service Area (moved from E.1) • DMC Transition of Carey Policy (moved from D.29-D.31) • Telehealth (moved from D.4) • Referral Resource, Crisis Intervention Protocol, Eligibility Determination, (moved from D.4-8) • Coordination of Transitions in Care (A.18) • Residential Service Authorization (moved from D.8-11) • Charitable Choice, PWD (moved from E.14-17) • Language Requirement (moved from E.36) • Non-residential service access (moved from B.2, also updated to remove “non-res” to align with all access standards) <p>Update/New Content:</p> <ul style="list-style-type: none"> • Updated to include urgent standard, res standard of 10 days, and NOABD requirement (E.1) • Updated Network Adequacy section for collaboration for submission requirements to HPA team (E.2) • Added language for providing timely services for out of network clients (E.3) • Added language for providing prior authorization within 24 hours of the request being submitted (E.12) • Updated res authorization to align with CalAIM changes (E.12) <p>Removed Content:</p>

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		<ul style="list-style-type: none"> Under insured removed from eligible pop as it applied to active clients prior to 2018 DMC implementation.
Section F: Compliance/ Confidentiality	New Section & Updated Information	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> Documentation Requirements, Claiming, False Claims Act, mandated reporting, Program Integrity, Confidentiality, client file storage, client records, privacy incidents, (moved from Section E, F, G) <p>Update/New Content:</p> <ul style="list-style-type: none"> Updated “record retention” to reflect 10-year standard (F.1) Updated “Mandated Reporting” to include PC and WIC (F.2) Added NPP information (F.6-7; previously missing) Updated Privacy Incident section to include examples and guidance and reporting process (F7) <p>Removed:</p> <ul style="list-style-type: none"> Removed requirement to notify DHCS if clients are moved offsite permanently
Section G: Beneficiary Rights	New Section	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> Grievances, Appeals, SFH, NOABD, client rights (moved from Section G)
Section H: Cultural Competence	New Section	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> CLAS Standards, Training Opportunities, Monitoring/Evaluation (moved from Section E) <p>Update/New Content:</p> <ul style="list-style-type: none"> Updated CC Plan submission requirement with new email address (H.3)
Section I: Quality Assurance	Renamed Section & Updated Information	<p>Content about QA is not new information; the section was renamed.</p> <p>Update/New Content:</p> <ul style="list-style-type: none"> Added QRC information (I.22) Added PIP & External Quality Review requirement (I.22)
Section J: Management Information Systems (MIS)	Renamed Section	<p>Content about MIS is not new information; the section was renamed, and some information was moved to new sections.</p>
Section K: Data Requirements	New Section	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> Data Entry Standards, CalOMS, Billing, DATAR, Capacity (moved from Section H)
Section L: Training	New Section	<p>Content about training requirements is not new information but was added to centralize training requirements for easy reference.</p>

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Section M: Staff Qualifications & Requirements	New Section & Updated Information	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> • Various staffing sections such as credentialing, residential staffing requirements, ethical standards, training plans, (moved from section E) <p>Update/New Content:</p> <ul style="list-style-type: none"> • Added PM expectations regarding experience, duties, coverage of one program, etc (M.4) • Added information about Peer Support Specialists qualifications (M.7) • Updated COSD standard for staff with history of parole/probation (M.12) • Updated staffing requirements in “Residential Programs & Overnight Staffing” (M.13)
Section N: Facility Licensing, Certification, & Other Requirements	New Section & Updated Information	<p>Content moved from other sections:</p> <ul style="list-style-type: none"> • Various sections related to space, facilities, certification, licensing, emergency services, etc (moved from section E) • Moved NVRA (from where D.15) • DMC Transition of Carey Policy (moved from D.29-D.31) <p>Update/New Content:</p> <ul style="list-style-type: none"> • Updated “Licensing – AOD Certification” to include requirement for outpatient wm programs update certification to include “non-residential detox” (N.2)
Section O: Provider Contracting	Updated Information	<ul style="list-style-type: none"> • Updated NPI Verification to include requirement for each facility to also have an NPI number (O.2) • Updated location of DPC 203 forms (O.15) • Added “Sliding Scale Fee” (O.18)
Section P: Funding Source Requirements	N/A	<ul style="list-style-type: none"> • N/A
Section Q: Resources	Updated Information	<ul style="list-style-type: none"> • Updated entire section to remove redundant links identified in the body of the SUDPOH
Appendix	Updated Information	<ul style="list-style-type: none"> • Updated appendices to align with reorganization of the SUDPOH sections • Updated “System of Care Glossary of Terms” to align with CalAIM (Appendix A.3) • Updated PIR Process (Appendix F.2) • Added Sliding Scale Fee table – Appendix O.2 <p>Removed to eliminate duplication; items posted on Optum:</p> <ul style="list-style-type: none"> • MD Training (MD tab) • RIHS training info (Training tab – posting in process) • Dx guide (Toolbox tab) • Optum guide (Toolbox tab – posting in process) • Recovery residence (RR tab) • RS flow chart (Toolbox tab – posting in process)

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		<ul style="list-style-type: none"> • Wm standards (Toolbox tab – revision in process) • CYF memo (Comms tab) • PWD assessment (Forms tab – posting in process) • Removed PWD Referral list (Forms tab – posting in process) • Removed same day billing matrix (Billing tab) <p>Removed due to being outdated:</p> <ul style="list-style-type: none"> • P&P's (outdated) • Group sign in sheet • DMC Staff Services Categories
All Sections	Updated Information	<ul style="list-style-type: none"> • Removed YTG and replaced with Adolescent SUD Best Practice Guide • Updated hyperlinks to websites • Language “drug of choice” replaced with “Primary Substance Use” or “self-reported Primary Substance Use” • Added “harm reduction” language • Removed requirement for “continuing services justification”