

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	SUPT
	Policy Number	SUPT- 11-01
	Effective Date	01-21-2021
	Revision Date	N/A
Title: Maintenance of Provider Directories		Functional Area: Information Management
Approved By: Signed version available upon request Lori Miller, LCSW Division Manager, Substance Use Prevention and Treatment Services		

BACKGROUND/CONTEXT:

The State of California, Department of Health Care Services (DHCS) has outlined requirements for publishing and maintaining accurate provider directory information based on established comprehensive provider directory standards. In accordance with these standards, Substance Use Prevention and Treatment (SUPT) Services is mandated to make available to beneficiaries and potential beneficiaries of substance use prevention and treatment information about its provider network, manage specific information for the Drug Medi-Cal Organized Delivery System (DMC-ODS), the Substance Abuse Prevention and Treatment Block Grant (SABG), track the California Outcomes Measurement System (CalOMS) data reporting and the Drug Medi-Cal billing numbers for new and existing subcontracted providers, and ensure an adequate service network for all beneficiaries.

The maintenance of the DMC-ODS Provider Directory, Network Adequacy Certification Tool, and Master Provider File serves this purpose. As required by DHCS, SUPT tracks, updates and manages provider directory information in compliance with the existing DHCS regulatory framework.

DEFINITIONS:

- **Beneficiary:** an individual who is enrolled in California’s Medicaid program, Medi-Cal, a public health insurance program that provides free or low cost medical services for children and adults with limited income and resources.
- **Drug Medi-Cal:** a treatment funding source for substance use disorder services available to beneficiaries.
- **Substance Abuse Prevention and Treatment Block Grant (SABG):** a funding source administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) to prevent and treat substance abuse to certain targeted populations (i.e.: non-Drug Medi-Cal beneficiaries).
- **Provider:** community-based service providers contracted by SUPT to provide substance use prevention and treatment services. These are licensed, registered, and DMC-approved or certified SUD prevention or treatment programs that are operated in accordance with applicable laws and regulations.

- **Practitioner:** licensed, waived, or registered behavioral health providers and licensed substance use disorder services providers employed by the providers to deliver Medi-Cal services.
- **Network Adequacy Standards:** state-specific standards implemented by DHCS for provider networks to address key areas of care for all beneficiaries.
- **Master Provider File (MPF):** a database administered by DHCS, which houses identification information for substance use prevention and treatment providers.
- **CalOMS Treatment System:** California's data collection and reporting system for substance use disorder treatment services.

PURPOSE:

The purpose of this Policy and Procedure is to list the Provider Directories' content requirements and outline the process, roles, and responsibilities for maintaining provider information.

DETAILS:

- A. The DMC-ODS Provider Directory includes the following organizational and practitioner content for each SUPT DMC-ODS certified provider
 1. Organization information
 - a.) Provider name and group affiliation, if any;
 - b.) Business address;
 - c.) Telephone number(s);
 - d.) Email address(s), as appropriate;
 - e.) Website URL;
 - f.) Specialty, in terms of training, experience and specialization;
 - g.) Services/modalities provided, including information about populations served;
 - h.) Whether the provider accepts new beneficiaries;
 - i.) The provider's linguistic capabilities, including languages offered;
 - j.) Whether the provider's office/facility has accommodations for people with physical disabilities
 2. Practitioner information
 - a.) Type of practitioner;
 - b.) National Provider Identifier number;
 - c.) California license number and type of license, and;
 - d.) An indication of whether the practitioner has completed cultural competence training
 3. SUPT may choose to delegate the requirement to list individuals employed by its providers, or elect to maintain this information at the County level.
 4. Language and Formatting: The Provider Directory is provided in a manner and format that is easily understood and accessible, including the following
 - a.) Available in the six (6) threshold languages identified in Sacramento County in addition to English: Arabic, Chinese, Hmong, Russian, Spanish and Vietnamese

- b.) A tagline explaining the availability of free written translation and oral interpretation services in the six (6) threshold languages
- c.) Provided in 12 point font size
- d.) A tagline 18 point or larger font size on how to request auxiliary aids and services
- e.) The toll-free and TTY/TDD or California Relay Service telephone number

Drug Medi-Cal Organized Delivery System Provider Directory Template



Department of Health Services, Behavioral Health Services Division Substance Use Prevention and Treatment Services (SUPT) Drug Medi-Cal Organized Delivery System Provider List ENGLISH Effective Date: July 1, 2020					
Please contact the SUPT System of Care at (916) 874-9754 or 24 hours, 7 days per week toll free at 1-888-881-4881 for availability, accommodation needs, and assessment and referral to the listed providers. Deaf and hard of hearing individuals may contact TTY/TDD at (916) 876-8892.					
Please contact the SUPT System of Care at (916) 874-9754 for information on how to request auxiliary aids and services, including provision of materials in alternate formats at no cost.					
Provider Name and Group Affiliations					
Address(es) (physical location of clinic or office)					
Telephone Number(s)					
Website URL					
Specialties					
Service Modalities					
Populations Served					
Provider Accepts New Beneficiaries					
Cultural and linguistic capabilities					
Provider's office/facility has accommodations for people with physical disabilities					
List of Practitioners: [PROVIDER NAME]					
Last Name	First Name	NPI Number	License Number	License/Discipline Type	Cultural Competence Training

Services may be delivered by an individual provider, or a team providers, who is working under the direction of a licensed practitioner operating within the scope of practice. Only licensed, waived, or registered mental health providers and licensed substance use disorder services providers are listed on this Provider Directory.

- B. Maintaining the Provider Directory**
1. The Provider Directory is updated at least monthly.
 2. The following processes are in place to allow providers to promptly verify or submit changes to the information required to be in the directory
 - a.) Designated Program Planner sends provider-specific directory templates to Contract Monitors by **second Monday of the month**
 - b.) Contract Monitors send provider-specific directory templates to provider agencies with a defined deadline
 - c.) Contract Monitors track provider responses and edits
 - d.) Contract Monitors submit edits to Program Planner by the **fourth Monday of the month**
 - e.) Program Planner makes required edits to update the DMC-ODS Provider Directory
 - f.) Program Planner posts the updated DMC-ODS Provider Directory to website by the **first business day of the month**

C. Network Adequacy

1. DHCS annually monitors the adequacy of SUPT's DMC-ODS provider network.
2. In order to maintain on-going compliance with Network Adequacy Standards requirements, SUPT will track the following information for each contracted provider in highlighted fields on the Provider Directory template
 - a.) Drug Medi-Cal Number
 - b.) Provider Agency NPI Number
 - c.) Chief Executive Officer Name
 - d.) Chief Financial Officer Name
 - e.) Practitioner Language(s) Capability
 - f.) Indicate Waivered Practitioners, if applicable
 - g.) Certifying Body of Practitioners' License/Discipline Type
 - h.) Number of Hours of Practitioners' Completed Cultural Competency Training
 - i.) Age Ranges Served by Modality, and
 - j.) Current (month) and Maximum Service Capacity by Modality
3. Providers will update this information as applicable for inclusion with their monthly Provider Directory submission as outlined in Section C: Maintaining the Provider Directory above. This provider information is compiled and utilized to complete the annual Network Adequacy Certification Tool (NACT), which is submitted to DHCS.
4. The NACT is utilized by DHCS to ensure Sacramento County has an adequate service network for all beneficiaries (number of service providers, geographic standards, service capacity and modalities, etc.)
5. Network Adequacy Standards information collected from providers is utilized by DHCS and for internal purposes. Any confidential Network Adequacy Standards information will be removed before posting to the County webpage for public access.

E. Master Provider File (MPF) Database

1. DHCS administers a MPF Database, which houses identification information for substance use prevention and treatment providers.
2. All providers are required to obtain a 6-digit reporting number (also known as a CalOMS or Provider ID number) from DHCS
 - a.) When they receive DMC-ODS certification or
 - b.) When they contract with SUPT to provide SABG-covered services
3. Any provider who receives SABG and/or DMC-ODS funds for substance use prevention or treatment services is required to report data, on a monthly basis, to DHCS through the CalOMS Treatment System.
4. The primary point of contact for all MPF-related matters is the Sacramento County CalOMS Administrator who is designated by the Sacramento County Alcohol and Drug Administrator and is responsible for the following:
 - a.) Managing treatment and prevention provider information, ensuring data integrity, maintaining accurate records, and completing and submitting required forms to the DHCS MPF Team at DHCSMPF@dhcs.ca.gov

- i. To add a new SABG funded Treatment and/or Prevention provider: *Non-Drug Medi-Cal New Provider Information Form*
 - ii. To make a change of contract status for any Treatment and /or Prevention provider, whether funded through SABG or contracted for DMC services: *Existing Provider Information Update/Change Form*
 - iii. To make changes to identification information on a SABG funded Treatment and/or Prevention provider: *Existing Provider Information Update/Change Form*
 - iv. To add a new, or terminate a DMC-ODS Provider: *Drug Medi-Cal Organized Delivery System Provider Form*
 - v. For a data reporting number for Out-of-County: *Drug Medi-Cal Organized Delivery System Provider Form (special section within the form)*
- b.) Conducting a thorough analysis of the MPF at a minimum of monthly.
 - c.) Rectifying any errors/discrepancies immediately by completing the appropriate form and submitting the form to the MPF Team.

REFERENCE(S)/ATTACHMENTS:

- Exhibit A, Attachment I, Informational Requirements, County of Sacramento Intergovernmental Agreement
- Title 42 CFR § 438.10 - Informational Requirements
- Mental Health & Substance Use Disorder Services Information Notice No: 18-020
- Master Provider File Database Forms
<https://www.dhcs.ca.gov/provgovpart/Pages/Master-Provider-File.aspx>
- Drug Medi-Cal Organized Delivery System Provider Directory
https://dhs.saccounty.net/BHS/Pages/SUPT/Drug_Medi-Cal_Organized_Delivery_System.aspx
- State of California – Health and Human Services Agency, Department of Health Care Services Medicaid Managed Care Final Rule: Network Adequacy Standards, Updated March 26, 2018

RELATED POLICIES:

N/A

DISTRIBUTION:

Enter X	DL Name	Enter X	DL Name
X	SUPT Administration		SUPT Prevention Providers
	SUPT County Counselors	X	SUPT Adult Treatment Providers
	SUPT Collaborative Courts	X	SUPT Youth Treatment Providers
X	SUPT System of Care		Advisory Board
X	SUPT Administrative Support Staff		BHS Mental Health Services
X	SUPT Options for Recovery		BHS Quality Management
	SUPT Proposition 36		

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