

## SUDPOH Summary of Changes – March 2019

SECTION	REVISION	WHAT HAS CHANGED
Cover Page	Updated Information	<ul style="list-style-type: none"> <li>Added reminder that DHCS is the DMC Authority (second cover page)</li> </ul>
Section A: Organized Delivery System	Updated Information	<ul style="list-style-type: none"> <li>Updated hyperlink to Intergovernmental Agreement (A.2)</li> <li>Replaced Perinatal Services Network Guidelines (PSNG) with Perinatal Practice Guidelines (PPG); updated hyperlink for FY18/19 document (A.2, A.19)</li> <li>Updated General Practice Guidelines for Care Coordination per DHCS guidance (A.6-27)</li> <li>Updated hyperlink for drug testing guidelines (A.9)</li> <li>Updated language for Physician Consultation to include using County-billable cost center to claim the cost on monthly invoices (A.12)</li> <li>Updated hyperlink to FY18/19 Perinatal Practice Guidelines (A.19)</li> <li>Updated language from Dual Diagnosis to Co-occurring (A.18)</li> <li>Updated hyperlink for SAMHSA Tip 51 (A.19)</li> <li>Updated hyperlink for SAMHSA Tip 56 (A.20)</li> </ul>
Section B: Continuum of Care & Services	Updated Information	<ul style="list-style-type: none"> <li>Added language about profession staff/scope of practice (B.4)</li> <li>Added requirements for mother/child groups in perinatal programs (B.5)</li> <li>Updated group counseling to include standards for groups facilitated in the field and standards for mixing groups (B.5)</li> <li>Updated Collateral Services to include no requirement for the client to be present (B.5)</li> <li>Updated Recovery Services to include standards for accepting clients from other providers requirements for accessing services after completing treatment (B.6)</li> <li>Updated verbiage regarding Recovery Residences, the community partner contracted to provide oversight, and funding guidelines (B.7)</li> </ul>
Section C: Prevention Services & Specialty Programs	Updated Information	<ul style="list-style-type: none"> <li>Added language to Justice-Involved SUD Services to include County will not pay for report writing (C.3)</li> <li>Added language about Justice Override clients (C.4)</li> </ul>
Section D: Service Delivery	Updated Information	<ul style="list-style-type: none"> <li>Updated language for Target Populations (D.3-D.4)</li> <li>Updated initial authorization to include requirement to submit to Optum within 24 hours of client's admission (D.5)</li> <li>Added DDN to list of required documents for continuing and extension authorization request (D.6-7)</li> <li>Added Relapse Plan standard for residential facilities (D.7-8)</li> </ul>

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Section D: Service Delivery (cont.)	Updated Information (cont.)	<ul style="list-style-type: none"> <li>• Updated bed day hold standard to include preapproval requirement for holds beyond 7 days and added weekend pass standards (D.8)</li> <li>• Updated language for Beneficiary Handbook requirement to specifically reflect Acknowledgement of DMC-ODS Beneficiary Handbook and BHS Provider Directory form on the list of required intake/admission documents (D.10)</li> <li>• Added requirement for client to be provided with name/contact information of primary counselor and case manager (D.14)</li> <li>• Added Self-Help/Program Structure standards (D.16-17)</li> <li>• Added reference to Quick Guide-Residential Service with hyperlink (D.16)</li> <li>• Added treatment continuation standards (D.17)</li> <li>• Added standard for Recovery Services (D.20-24)</li> <li>• Added Transition of Care process (D.26-28)</li> <li>• Updated documentation standards to include CA Senate Bill 241 requirements for access to client records (D.29)</li> <li>• Updated language for Residential Timeline Progress Notes, including a daily note (D.33-34)</li> <li>• Added DHCS definition that a week is from Sunday to Saturday (D.34)</li> </ul>
Section D: Service Delivery (cont.)	Removed	<ul style="list-style-type: none"> <li>• Removed diagnosis requirement for Discharge Summary (D.18)</li> </ul>
Section E: SUD Program Requirements	Updated Information	<ul style="list-style-type: none"> <li>• Added language for program exclusions in Admission Policies, Procedures, Protocols section (E.1)</li> <li>• Added language about AOD Certification requirements including submission 120 days prior to expiration date (E.2)</li> <li>• Updated DHCS Info Notice for IMS (E.4)</li> <li>• Added language for Senate Bill 992 prohibiting denying admission solely on an individual having a valid prescription for narcotic replacement or MAT (E.4)</li> <li>• Added language for TB Control (E.11)</li> <li>• Added DHCS requirements for temporary site location of DMC provider during emergency (E.11)</li> <li>• Updated language for Charitable Choice regulations (E.12-13)</li> <li>• Updated phone number for PWD County Access Coordinator (E.14)</li> <li>• Updated language for Criminal Background Check Requirements to identify a COSDBHS standard (E.19)</li> <li>• Added clarification from DHCS for RN's (E.20)</li> <li>• Added language for determining the salary cap of medical director (E.22-23)</li> </ul>

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Section E: SUD Program Requirements (cont.)	Updated Information (cont.)	<ul style="list-style-type: none"> <li>• Updated link for Federal System for Award Management (SAM) (E.23)</li> <li>• Added LVN as option for on-duty overnight staff (E.26)</li> <li>• Changed WM-3.2 IMS standard from required to recommended (E.26)</li> <li>• Changed WM-3.2 staffing standard for nursing staff from required to recommended (E.26)</li> <li>• Added standard for P&amp;P's when in-house 24/7 nursing staff is not used (E.26)</li> </ul>
Section F: Provider Contracting Section F: Provider Contracting (cont.)	Updated Information Updated Information (cont.)	<ul style="list-style-type: none"> <li>• Updated Restrictions on Salaries to reflect Level II with new hyperlink (F.5)</li> <li>• Updated DPC 203 Transfer of Disposition of Minor Equipment Form(s) and Procedures (F.11-17)</li> </ul>
Section G: Quality Management	Updated Information	<ul style="list-style-type: none"> <li>• Added QAR timeline from SUDURM instructions for QAR Forms (G.7-8)</li> <li>• Updated hyperlink for CHHS (G.10)</li> <li>• Updated SIR Line with new number (G.15-16)</li> <li>• Added language requiring self-addressed envelopes to be stamped; available upon request from advocacy organizations (G.19)</li> <li>• Added language for records requests by advocacy organizations (G.20)</li> <li>• Added Grievance Exemption definition and standards (G.20)</li> <li>• Updated grievance and appeal language with 14-day extension circumstances (G.22, G.23, G.24)</li> <li>• Updated Grievance/Appeal language to specify receipt of notification must be postmarked within five calendar days (G.23-table)</li> <li>• Updated requirements for NOABD logs (G.27)</li> </ul>
Section H: Administrative Oversight	Updated Information	<ul style="list-style-type: none"> <li>• Updated link for new CalOMS Data Dictionary-2018 (H.1)</li> <li>• Removed info about BHS CalOMS webinar (H.1)</li> <li>• Added language for creating encounter in SanWITS; included link the Provider Services Guide (H.2)</li> <li>• Updated contact information for County DATAR analyst (H.2)</li> <li>• Added hyperlink for SanWITS User's Guide (H.3)</li> <li>• Removed separate Optum contact number for SanWITS after hours/weekend help desk support; all support calls can now be made using the same number (H.3)</li> </ul>
Section I: Resources	Updated Information	<ul style="list-style-type: none"> <li>• Replaced Perinatal Services Network Guidelines (PSNG) with Perinatal Practice Guidelines (PPG); updated hyperlink for FY18/19 document (I.2)</li> <li>• Updated SIR Line with new number (I.2)</li> </ul>

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Section I: Resources (cont.)	Updated Information (cont.)	<ul style="list-style-type: none"> <li>Removed separate Optum contact number for SanWITS after hours/weekend help desk support; all support calls can now be made using the same number (I.2)</li> </ul>
Appendices	Updated Information	<ul style="list-style-type: none"> <li>Updated “System of Care Glossary of Common Terms” with clarifying information on Collateral Services and added definition of Justice Override (Appendix A.2)</li> <li>Added “DMC-ODS Staff Services Categories” (Appendix B.2)</li> <li>Added “Recovery Residences – Supplemental Funding Guidelines” (Appendix B.3)</li> <li>Added “Recovery Services Transition Flowchart” (Appendix B.3)</li> <li>Updated “SUD Residential Clinical Documentation and Authorization Request Timelines Quick Guide” (Appendix D.1)</li> <li>Updated PWD Referral List (E.5)</li> <li>Updated “Serious Incident Report of Findings (SIROF)” (Appendix G.2)</li> <li>Updated “Serious Incident Report (SIR)” (Appendix G.3)</li> </ul>
Appendices (cont.)	Removed	<ul style="list-style-type: none"> <li>Removed definition for Complaint from “System of Care Glossary of Terms” (Appendix A.2)</li> </ul>
All Sections	Updated Information	<ul style="list-style-type: none"> <li>Updated all hyperlinks for Optum, SUDURM, and BHS Billing Manual</li> </ul>
	Removed	<ul style="list-style-type: none"> <li>All references and language for “complaints”</li> </ul>