

STATE OF CALIFORNIA
Budget Change Proposal - Cover Sheet
 DF-46 (REV 08/16)

Fiscal Year	Business Unit	Department	Priority No.
FY 2017-18	4260	Health Care Services	
Budget Request Name		Program	Subprogram
4260-017-BCP-2017-GB		3960	3960050

Budget Request Description

SUD Licensing Workload

Budget Request Summary
 The Department of Health Care Services, Substance Use Disorder - Compliance Division, requests a total of 20.0 permanent positions (conversion of 6.0 limited-term positions to permanent and 14.0 new permanent positions) and a combination of two-year and five-year limited-term resources to address increased workload and to carry out new and existing state and federal requirements for the expansion of services from the Affordable Care Act and the Drug Medi-Cal Organized Delivery System Waiver.

Total funding request: \$2,547,000 (\$2,016,000 Special Fund (NTP and ROPLF), and \$531,000 Reimbursement). DHCS does not request additional federal fund authority (non-add [\$1,046,000] for SAPT Federal Fund).

Requires Legislation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Code Section(s) to be Added/Amended/Repealed
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Does this BCP contain information technology (IT) components? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Department CIO	Date
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If yes, departmental Chief Information Officer must sign.

For IT requests, specify the project number, the most recent project approval document (FSR, SPR, S1BA, S2AA, S3SD, S4PRA), and the approval date.

Project No. Project Approval Document: Approval Date:

If proposal affects another department, does other department concur with proposal? Yes No
Attach comments of affected department, signed and dated by the department director or designee.

Prepared By	Date	Reviewed By	Date
Department Director	Date	Agency Secretary	Date

Department of Finance Use Only

Additional Review: Capital Outlay ITCU FSCU OSAE CALSTARS Dept. of Technology

BCP Type: Policy Workload Budget per Government Code 13308.05

PPBA	Original Signed By: Kris Cook	Date submitted to the Legislature JAN 10 2017
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BCP Fiscal Detail Sheet

BCP Title: SUD Licensing Workload

BR Name: 4260-017-BCP-2017-GB

Budget Request Summary

	FY17					
	CY	BY	BY+1	BY+2	BY+3	BY+4
Personal Services						
Positions - Permanent	0.0	20.0	20.0	20.0	20.0	20.0
Total Positions	0.0	20.0	20.0	20.0	20.0	20.0
Salaries and Wages						
Earnings - Permanent	0	849	849	849	849	849
Earnings - Temporary Help	0	380	380	131	131	131
Total Salaries and Wages	\$0	\$1,229	\$1,229	\$980	\$980	\$980
Total Staff Benefits	0	604	604	482	482	482
Total Personal Services	\$0	\$1,833	\$1,833	\$1,462	\$1,462	\$1,462
Operating Expenses and Equipment						
5301 - General Expense	0	108	80	64	64	64
5302 - Printing	0	40	40	32	32	32
5304 - Communications	0	40	40	32	32	32
5320 - Travel: In-State	0	208	208	160	160	160
5322 - Training	0	20	20	16	16	16
5324 - Facilities Operation	0	180	180	144	144	144
5344 - Consolidated Data Centers	0	20	20	16	16	16
539X - Other	0	98	0	0	0	0
Total Operating Expenses and Equipment	\$0	\$714	\$588	\$464	\$464	\$464
Total Budget Request	\$0	\$2,547	\$2,421	\$1,926	\$1,926	\$1,926

Fund Summary

Fund Source - State Operations						
0243 - Narcotic Treatment Program Licensing	0	290	268	268	268	268
0995 - Reimbursements	0	531	495	0	0	0
3113 - Residential and Outpatient Program	0	1,726	1,658	1,658	1,658	1,658
Total State Operations Expenditures	\$0	\$2,547	\$2,421	\$1,926	\$1,926	\$1,926
Total All Funds	\$0	\$2,547	\$2,421	\$1,926	\$1,926	\$1,926

Program Summary

Program Funding						
3960050 - Other Care Services	0	2,547	2,421	1,926	1,926	1,926
Total All Programs	\$0	\$2,547	\$2,421	\$1,926	\$1,926	\$1,926

Personal Services Details

Salary Information

Positions	Min	Mid	Max	<u>CY</u>	<u>BY</u>	<u>BY+1</u>	<u>BY+2</u>	<u>BY+3</u>	<u>BY+4</u>
1379 - Office Asst (Typing)				0.0	2.0	2.0	2.0	2.0	2.0
4800 - Staff Svcs Mgr I				0.0	2.0	2.0	2.0	2.0	2.0
5393 - Assoc Govtl Program Analyst				0.0	16.0	16.0	16.0	16.0	16.0
VR00 - Various (LT Term Exp. 06-30-2019)				0.0	0.0	0.0	0.0	0.0	0.0
VR00 - Various (LT Term Exp. 06-30-2022)				0.0	0.0	0.0	0.0	0.0	0.0
Total Positions				0.0	20.0	20.0	20.0	20.0	20.0

Salaries and Wages	<u>CY</u>	<u>BY</u>	<u>BY+1</u>	<u>BY+2</u>	<u>BY+3</u>	<u>BY+4</u>
1379 - Office Asst (Typing)	0	57	57	57	57	57
4800 - Staff Svcs Mgr I	0	108	108	108	108	108
5393 - Assoc Govtl Program Analyst	0	684	684	684	684	684
VR00 - Various (LT Term Exp. 06-30-2019)	0	249	249	0	0	0
VR00 - Various (LT Term Exp. 06-30-2022)	0	131	131	131	131	131
Total Salaries and Wages	\$0	\$1,229	\$1,229	\$980	\$980	\$980

Staff Benefits	<u>CY</u>	<u>BY</u>	<u>BY+1</u>	<u>BY+2</u>	<u>BY+3</u>	<u>BY+4</u>
5150350 - Health Insurance	0	296	296	236	236	236
5150600 - Retirement - General	0	308	308	246	246	246
Total Staff Benefits	\$0	\$604	\$604	\$482	\$482	\$482
Total Personal Services	\$0	\$1,833	\$1,833	\$1,462	\$1,462	\$1,462

Analysis of Problem

A. Budget Request Summary

The Department of Health Care Services (DHCS), Substance Use Disorder - Compliance Division (SUDCD) requests staff resources and associated expenditure authority to address increased workload and to carry out new and existing state and federal requirements for the expansion of services from the Affordable Care Act (ACA) and the Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver.

Specifically, the resources will build upon the existing infrastructure to:

- 1) reduce the application and complaint backlogs and conduct initial and renewal monitoring visits,
- 2) provide state level guidance and innovations in DMC-ODS Waiver opt-in counties to combat the opioid epidemic in California,
- 3) enact the federal requirements to designate and monitor facilities according to the American Society of Addiction Medicine (ASAM) levels,
- 4) address requirements to effectively regulate alcohol and other drug (AOD) treatment facilities, and
- 5) address the licensing and monitoring functions specific to Los Angeles (LA) County facilities.

This proposal requests funding of 14.0 new permanent positions, conversion of 6.0 Limited-Term (LT) positions to permanent and limited term funding equivalent to 8.0 LT positions.

Total Funding Requested: Special Fund (SF) - Residential and Outpatient Program Licensing Fund (ROPLF) is \$1,726,000 and Narcotic Treatment Program Licensing Trust Fund (NTPF) is \$290,000; Federal Fund (FF) - Substance Abuse Prevention and Treatment (SAPT) Grant; and Reimbursement is \$531,000.

Staff Resources	Funding	
20.0 Permanent positions <ul style="list-style-type: none"> • 14.0 new Permanent positions • Conversion of 5.0 Associate Governmental Program Analyst (AGPA) LT to permanent positions • Conversion of 1.0 Staff Services Manager I (SSMI) LT to permanent position 	\$1,746,000 [\$776,000]	Total Funds FF/SAPT: DHCS does not request additional Federal Funding (non-add). SF (Mixture of ROPLF & NTPF)
Two-Year LT Funding Equivalent to <ul style="list-style-type: none"> • 4.0 AGPA 	\$531,000	Reimbursement (Los Angeles County)
Five-Year LT Funding Equivalent to <ul style="list-style-type: none"> • 2.0 AGPA • 1.0 Health Program Specialist I (HPS) • 1.0 SSM I 	\$270,000 [\$270,000]	Total Funds FF/SAPT: DHCS does not request additional Federal Funding (non-add). \$ 270,000 SF (ROPLF)
Total:	\$2,547,000	

Analysis of Problem

B. Background/History

The ACA increased the proportion of criminal justice involved individuals eligible for health care coverage specifically those with a Substance Use Disorder (SUD). ACA parity protections require that coverage for SUD services be no more restrictive than coverage, provided for substantially all medical/surgical services. In anticipation of meeting increased demand for services due to healthcare reform, DHCS has identified current gaps in the existing system. DHCS has addressed some of the identified gaps with the approval and implementation of the DMC-ODS Waiver, which expands substance use disorder services. In addition, with the passage of Assembly Bill 848 (Stone, Chapter 744, Statutes of 2015), incidental medical services are available within the residential treatment programs and increase the care afforded to clients. With the expansion of government and non-government funded services due to state and national efforts, it requires an increase in licensing and monitoring activity across all treatment modalities.

DHCS is seeing a substantial growth trend in facilities seeking licensure, and estimates that this growth will continue over the next several years. As a part of the 2013-2014 Budget, the Department of Alcohol and Drug Programs (and all SUDCD services) transferred to DHCS on July 01, 2013. SUDCD is made up of four sections; Licensing & Certification Section (LCS), Narcotic Treatment Program Section (NTPS), Complaints Section (CS) and Driving-Under-the-Influence & Criminal Justice Section (DUI-CJS).

Licensing and Certification Section

LCS has sole authority in state government to license and certify all facilities, regardless of their funding source, that provide 24-hour residential and outpatient alcohol and other drug (AOD) treatment, detoxification, or recovery services to adults. LCS is responsible for processing initial and renewal applications for residential, outpatient, detoxification, adolescent waivers, incidental medical services, and ASAM designations and for conducting site visits for each initial and renewal. LCS is also responsible for monitoring compliance with state, federal and local laws, regulations and statutes by conducting reviews every two years. LCS is currently implementing the ASAM Designation process, which includes the provisional and final Level 3.1, 3.3 and/or 3.5 designation, collecting fees and fines, and providing technical assistance to facilities assisting individuals in need of recovery or treatment services. DHCS currently certifies 1,777 licensed and/or certified facilities - 356 residential, 560 residential/AOD, and 861 AOD outpatient.

Chapter 177 (Senate Bill 84), Statutes of 2007, Health and Safety Code (HSC) Section 11833.02 was signed into law on August 24, 2007, and requires DHCS to charge fees for licensure and certification of all residential AOD recovery or treatment facilities and for certification of outpatient AOD programs. The ROPLF consists of all fines, fees, and penalties assessed to licensed and certified AOD providers. HSC Section 11833.03 establishes the ROPLF in the State Treasury into which all fees, fines, and penalties collected from residential and outpatient programs; which are deposited and made available upon appropriation by the Legislature for supporting the licensing and certification activities of residential and outpatient facilities.

Analysis of Problem

Narcotic Treatment Programs (NTP) Section

The NTP Section is responsible for the statutory and regulatory compliance of all NTPs in California through mandated annual on-site inspections. The NTP Section responsibilities include the review of initial licensure and annual renewal applications, follow-up on-site inspections for programs that present imminent danger to patients, administrative functions such as grant and contract management, facility complaint investigations, patient death investigations, the monitoring of requests for exceptions to regulations through the Center for Substance Abuse Treatment extranet, and providing technical assistance for the submission of various protocol amendments and capacity changes.

With the implementation of the DMC-ODS Waiver, there is the requirement for counties opting to participate to include NTP services. Of the 53 counties that have expressed interest in participating in the DMC-ODS Waiver, 24 currently do not provide NTP services. This has resulted in comprehensive efforts to work with counties and NTPs to license new facilities and expand medication-assisted treatment (MAT) services in these counties. Additionally, Drug Medi-Cal does not cover four new MAT medications which are required under the DMC-ODS Waiver. This has added the need to designate staff resources to establish new regulations, policies and procedures, on-site inspection tools, and subsequent extension of on-site monitoring processes.

DHCS SUDCD additionally has the sole authority to determine the appropriate skills and qualifications of an individual providing AOD counseling to clients in licensed residential and/or certified facilities, licensed NTPs, programs certified to receive Medi-Cal reimbursement and licensed DUI programs. California Code of Regulations stipulate that all individuals providing AOD counseling in any of the identified programs or facilities must be registered, certified or licensed pursuant to Title 9, Chapter 8. The regulatory requirements were developed to safeguard the health and safety of the population served and to maintain minimum AOD counselor education standards regardless of modality or geographic area.

Complaints Section

CS is responsible for investigating complaints brought against licensed residential treatment programs, outpatient programs and unlicensed programs. CS is also responsible for investigating all complaints brought against registered or certified counselors who are employed by a SUDCD program. CS investigates unusual incidents that occur at SUDCD locations, up to and including client deaths. Since securing the 6.0 LT positions in the FY 2014-2015 Substance Use Disorder Program Integrity BCP, CS has received 261 unlicensed complaint investigations, 222 counselor investigations, 76 death investigations and 593 general complaint investigations for a total of 1,152 investigations.

Pursuant to the Public Records Act, (PRA, government code section 6250 et seq.) the public has a right to inspect and/or obtain copies of any SUDCD investigations. CS works closely with the DUI-CJS to process PRA requests on a daily basis, which involves the retrieval of pertinent files, review and redaction of documents, which contain confidential and protected information as well as personal health information, including medical records, pending litigation documents, and other records containing private information about individuals. This process takes extensive coordination with other DHCS divisions to secure compliance with all applicable PRA requirements. DHCS may need to review requested records to determine if an exemption applies before a record is inspected or copied.

Analysis of Problem

SUDCD is responsible for investigating and taking action against AOD facilities operating outside the scope of their licensure. Once SUDCD determines a facility is in violation of the law, an action must be taken against non-compliant facilities including the revocation or suspension of these licenses. The process for revocation is detailed and requires more Personnel Year (PY) hours to complete than other investigations. Even when a facility is known to have been providing unsafe services, the facility has the right to appeal DHCS' decision and may still operate until the revocation is complete. On average, one revocation alone takes over eight months to complete. With the assistance provided by the 6.0 LT positions, SUDCD CS has uncovered five separate causes for revocation within the past three years, two of which are currently set for hearing.

Resource History
Substance Use Disorder – Compliance Division
(Dollars in thousands)

Program Budget	2011-12	2012-13	2013-14	2014-15	2015-16
Authorized Expenditures	N/A	N/A	11,221	13,092	16,067
Actual Expenditures	N/A	N/A	6,982	7,620	9,958
Revenues	N/A	N/A	N/A	N/A	N/A
Authorized Positions	N/A	N/A	72.0	80.0	90.0
Filled Positions	N/A	N/A	64.0	70.2	83.0
Vacancies	N/A	N/A	8.0	9.8	7.0

Effective FY 2013-14, former DADP transitioned to DHCS

Workload History
Licensing & Certification Section (LCS)

Workload Measure	2011-12	2012-13	2013-14	2014-15	2015-16
Total Licensed and/or Certified Programs	N/A	929	1113	1388	1777
Initial Applications	N/A	N/A	184	275	452
Renewal Applications	N/A	N/A	N/A	N/A	620
Other Applications	N/A	N/A	163	81	262
ASAM Designation	N/A	N/A	N/A	N/A	213

Complaints Section (CS)

Workload Measure	2011-12	2012-13	2013-14	2014-15	2015-16
Reporting to National Practitioner Databank	5	2	42	17	55
Complaints Received	545	266	322	382	434
Complaints Closed	333	192	354	337	503
Residential licenses, detox licenses, and certifications revoked/Temporarily Suspended	17	10	1	2	2
Notice of Operation in Violation of Law	14	13	17	7	2

Analysis of Problem

Workload Measure	2011-12	2012-13	2013-14	2014-15	2015-16
Annual number of inspection warrants/injunctions for deficient programs	0	0	1	0	5
Annual number of counselor complaints	114	61	90	58	65
Backlog remaining per FY	0	3	13	74	302
Client death investigations	25	19	28	27	21

Narcotic Treatment Program (NTP) Section

Workload Measure	2011-12	2012-13	2013-14	2014-15	2015-16
Complaint investigations	21	28	42	54	51
Applications received	204	212	220	234	241
Annual and follow-up inspections	97	112	110	125	143
Corrective action plans including notice of non-compliance	86	138	143	160	140
Physician requests for temporary exceptions to regulations	4258	4321	4726	8524	7428
Temp Incident & Death Reports	101	106	217	220	118
Deficiency reports	93	110	129	132	137

C. State Level Considerations

The DHCS Strategic Plan states that nearly one in three Californians receive health care services financed or organized by DHCS. One of the key commitments in DHCS' Strategic Plan is to develop effective, efficient and sustainable delivery systems. SUDCD oversees the SUD provider system in California regardless of the payment source for services. SUD treatment facilities serve Medi-Cal, insurance, private pay, criminal justice programs, grant, federal and other SUD funded programs that utilize DHCS licensed facilities. Maintaining effective oversight is an imperative function of DHCS and without the sufficient resources, SUDCD is unable to achieve the commitments outlined in the Strategic Plan. SUDCD is responsible providing clients with treatment services administered by qualified AOD counselors and for protecting client health and safety in all 1,777 licensed and/or certified programs and 162 narcotic treatment programs.

Implementing the DMC-ODS is one way, which the state is addressing rising overdose deaths, which is outlined in the Strategic Plan.

D. Justification

The new government and private health insurance funding sources available for SUD treatment are resulting in a substantially expanding the number of facilities requiring DHCS licensing and oversight. With system expansion and multiple funding streams available to

Analysis of Problem

providers, mitigation of fraudulent activity remains a top priority for SUDCD and appropriate staffing levels will greatly assist in this endeavor.

While DHCS is committed to Californians that require and utilize services provided by residential rehabilitation programs, outpatient programs and narcotic treatment programs, due to the increased focus on the SUD field, the SUDCD cannot sustain the substantial increase in licensing workload. There are backlogs of new applications, applications for expansion of current facilities, license and certification renewals that are not meeting the mandated timelines outlined in Statute, applications for new service designations such as the American Society of Addiction Medicine (ASAM), and facility complaints. These backlogs can delay the expansion of treatment services for new clients and potentially puts current clients at risk if there is not proper monitoring at the state level.

Licensing and Certification Section

LCS is responsible for the licensure of 24-hour residential facilities statewide with clients entering into treatment through various funding sources. The funding sources include Drug Medi-Cal, private pay and private insurance. Since ACA and parity to require coverage of mental health and substance use disorders, LCS has seen an increase in applications for licensure, which has created an increase in the availability of treatment facilities.

LCS requires the additional positions to address the ongoing nature of the work since the submission of applications for new licensed and certified facilities in the past three years has continued to grow. With the additional staff, LCS will be able to process applications within the regulatory requirements and conduct compliance visits within an appropriate time. In accordance with the regulations, the Department is required to issue or deny a license within 120 working days of determining an initial application is complete. After a program is licensed and/or certified, LCS staff must conduct biennial site visits when renewing a license or certification. Based on data from the past three fiscal years, it indicates there has been a steady increase in the receipt of initial applications for licensing and/or certification.

Fiscal Year	Number of applications
2013/2014	184
2014/2015	275
2015/2016	452

Percentage of initial applications to be licensed and/or certified in Fiscal Year 2016/17:

Fiscal Year	Initial Applications Received	Licenses and/or Certifications Issued	Percentage Licensed and/or Certified
2015/2016	424	384	91%
2016/2017	165	42	25%

Based on the number of initial applications received in LCS in FY 2015/2016, it is estimated that LCS will process approximately 92% of total applications received in the current fiscal year.

LCS is facing a backlog of 265 initial applications for providers to obtain licensure and/or certification and 150 renewal applications for licensure and/or certification. When an application backlog exists, it affects services available to the public and clients in need of

Analysis of Problem

treatment. LCS faced a similar situation of a backlog in 2010 and efforts were made at that time to eliminate the backlog. The efforts included a redirection of current LCS staff with a prioritization on completion of applications, a redirection of staff from other sections and an abbreviated application process. Initially, that effort was a success as the application backlog was eliminated within eight to nine months. However, the temporary fix created a larger gap in the workload and ultimately did not remedy the issue since now another backlog exists. When the temporary fix was used, it addressed the upfront issue of the applications, however, it also meant there are now more programs licensed or certified that require monitoring, biennial visits and technical assistance. The staff that was redirected returned to their previous work and the LCS analysts must address the growing workload. In the fall of 2015, due to the increasing licensing backlog, SUDCD recruited 5.0 AGPAs. These 5.0 staff are part of the current 23 analysts and the permanent positions for these 5.0 staff are being requested in this BCP.

LCS staff are also responsible for the upcoming workload of ASAM designations and monitoring. Residential facilities will receive a new ASAM designation level of (3.1, 3.3 and/or 3.5) for each level of ASAM residential care, which they provide. This is the first ASAM designation process developed in the nation so all of the designation and monitoring tools need to be created by the LCS staff then piloted prior to use in California. DHCS has started the provisional designation process and there are currently 213 provisional designations already assigned to providers. Once additional staffing resources are obtained, all ASAM designation duties will be folded into the LCS initial application process. The LCS staff will be responsible for issuing and determining the appropriate provisional designations for residential facilities through the application process. Once the provisional is issued the LCS staff will then be responsible for conducting site visits to those programs to verify the services being provided are in alignment with their provisional designation. After the verification, a final ASAM designation will be granted. DHCS cannot issue the final ASAM designation or begin monitoring of the ASAM designation until new staff are in place. The ASAM workload will include the designation and ongoing monitoring of residential facilities (as required by Centers for Medicare and Medicaid Services (CMS)), initial processing for provisional designation, final designation and on-site monitoring for final designations. Once a program receives the ASAM designation, an LCS analyst is responsible for the ongoing monitoring to confirm program maintains the appropriate designation through the biennial visits.

With a population of more than ten million people, Los Angeles (LA) County is the most populous county in the United States and has the largest number of AOD facilities. With a uniquely dense population, LA County has experienced a surge in facilities seeking licensure. Along with the changes associated with the expansion of services from ACA and the implementation of the DMC-ODS Waiver, DHCS anticipates that these numbers will continue to grow, especially once LA County is approved to begin Waiver services. In addition to the expected influx of new applications and in order to meet regulatory timelines, DHCS needs to address the significant backlog of applications from programs in LA County, currently the county with the highest application backlog. With the additional licensure of AOD facilities, DHCS will not only see an increase in the number of applications for LA County facilities, but an increase in ongoing workload related to the licensure of a facility. This includes renewal applications, routine site inspections, complaint investigations, and follow-up of any deficiencies cited in order to comply with statutory mandates to protect health and safety of clients in DHCS licensed and/or certified facilities.

Analysis of Problem

Using projections from the last three fiscal years and the 30% growth trend, it is expected that LA County will have approximately 150 new facilities in fiscal year 2016-2017. In addition to the increase of the workload that the additional facilities create, there is also an additional workload associated with ASAM designations and monitoring. Currently, the Department has granted 200 ASAM designations statewide, 72 of which are in LA County. The positions under the LA County funding will be working in LA County and specifically addressing the LA County backlog to get their licenses and certifications current and compliant.

The addition of 4.0 LT staff dedicated to LA County will assist with the timely review and overall compliance of all licensing and/or certification components. It will also provide LCS the much-needed resources to conduct any follow-up compliance visits for deficiencies of concern. With the additional dedicated staff to LA County, it allows those analysts to concentrate in one geographical location and reduce travel times while other LCS analysts can focus on other counties.

LCS is requesting 14.0 positions to address the increasing and ongoing workload and application backlog that is currently present in LCS.

6.0 Full-time Permanent Positions

- 5.0 full-time permanent AGPA positions who will be responsible for formulating procedures, policies and making recommendations on administrative and program-related problems. In addition, staff will respond to calls and e-mail inquiries from applicants, providers, and county program representatives related to program requirements, the licensure process, and status of applications. AGPAs will develop and complete provider trainings and outreach on program requirements, conduct county outreach, and provide trainings to programs regarding the standards and licensure requirements. The 5.0 positions will complete multiple outreach and reviews for applicants and providers to foster program compliance.
- 1.0 full-time permanent OT position who will be responsible for providing a critical support role as the first point of contact in the receipt of, tracking and processing of all applications. The OT will also update and assist with the maintenance of the electronic database for all licensed and/or certified facilities. The OT is also responsible for the maintenance and tracking of the file room and assisting LCS analysts, Complaint Analysts and PRA analysts with obtaining files for review. There currently is a heavy workload for the OT's because there are so many applications in the backlog that need tracking and processing.

Five-Year Limited-Term Funding

- 1.0 full-time limited term SSM I position who will be responsible for providing guidance and expertise to LCS analysts. In addition, this staff will be responsible for the supervision of staff engaged in a wide variety of activities including the oversight of **analysis** and evaluation of current policy and procedures. The SSMI will also be responsible for recommending, implementing and monitoring changes as needed in addition to the preparation of written materials; including memos, policy statements, legislation, regulations, procedure manuals, and coordination with legal staff for interpretation of statute to bring program into compliance with state and federal laws and program integrity protections.

Analysis of Problem

- 1.0 full-time limited term HPS I position who will assist in promulgation of the California Code of Regulations, Title 9, Chapter 5 regulations package, act as liaison for LCS regarding bill analyses and ongoing legislation, and will write and analyze bills. The HPS I will also be responsible for updating the AOD Certification Standards, assisting in the preparation of memos and other public correspondence, updating processes in the section, conducting studies of LCS statistics and data analysis and establishing DHCS compliance with all documents and correspondence for LCS.
- 2.0 full-time limited term AGPA positions who will be responsible for assisting in the elimination of the application backlog. These positions will conduct a majority of similar duties as the permanent AGPA positions such as responding to calls and e-mail inquiries from applicants and providers and county program representatives relating to program requirements, the licensure process, and status of applications. The AGPAs will also be responsible for formulating procedures, policies and making recommendations on administrative and program-related problems. In addition, these limited term AGPAs would help reduce the backlog because it will reduce the amount of applications in the backlog waiting to be processed.

4.0 Full-time Limited-Term funding LA County

- 4.0 full-time permanent AGPAs who will be designated to LA County and given specific caseloads dedicated to programs in LA County. The analysts will be responsible for formulating procedures, policies and making recommendations on administrative and program-related problems. In addition, staff will respond to calls and e-mail inquiries from applicants, providers, and LA County program representatives related to program requirements, the licensure process, and status of applications. The AGPAs will also develop and complete provider trainings and outreach on program requirements, conduct county outreach and training on program standards and licensure requirements both in house and in the field, and complete multiple outreach and reviews for applicants and providers to foster understanding and program compliance.

LCS currently monitors the following programs:

Type of Program	Amount
Residential License Only	375
Residential License and AOD Certification	576
AOD Certified Outpatient Only	881
Total	1,832

Total Resident Capacity for the Residential Facilities:

Treatment Capacity	Total Facilities	Capacity
6 or fewer residents	506	2,976
7-20 residents	192	2,630
21-50 residents	168	5,381
Over 50 residents	85	7,618
Total Capacity	951	18,605

Analysis of Problem

Current Workload Gap:

Current Staffing	3 SSAs and 20 AGPAs
Caseload that meets statutory mandates for SSA level	50 cases x 3 SSA's = 150 total cases
Caseload that meets statutory mandates for AGPA level	70 cases x 20 AGPAs = 1400 total cases
Total Caseload Abilities	1550
Current Facilities	1,832
Current Application Backlog	154
Total number of Facilities	1,986
¹ Gap of Licensing Workload (total of projected facilities – total caseload abilities)	436

Initial Application Backlog:

Type of Program	Fiscal Year 2016/17
Residential License Only	56
Residential License and AOD Certification	32
AOD Certified Outpatient Only	66
Total	154

Renewal Application Backlog

Type of Program	Fiscal Year 2016/17
Residential License Only	26
Residential License and AOD Certification	35
AOD Certified Outpatient Only	43
Total	104

Miscellaneous Application Backlog (i.e., relocations, increase in treatment capacity, change in target population, etc.)

Type of Program	Fiscal Year 2016/17
Residential License Only	15
Residential License and AOD Certification	29
AOD Certified Outpatient Only	21
Total	65

¹ The gap in the licensing workload is determined by taking the total number of facilities (which includes established facilities and facility applications currently under review) and subtracting the total caseload abilities.

Analysis of Problem

The following numbers are specific to LA County:

LCS currently monitors the following facilities in LA County:

Type of Program	Amount
Residential License Only	110
Residential License and AOD Certification	129
AOD Certified Outpatient Only	256
Total	495

LCS is currently processing the following initial applications in LA County:

Type of Program	Amount
Residential License Only	13
Residential License and AOD Certification	9
AOD Certified Outpatient Only	23
Total	45

LCS currently has a site visit backlog for the following facilities in LA County:

Type of Program	Amount
Residential License Only	41
Residential License and AOD Certification	75
AOD Certified Outpatient Only	108
Total	224

LCS has an extension (renewal) applications backlog for the following facilities in LA County:

Type of Program	Amount
Residential License Only	32
Residential License and AOD Certification	31
AOD Certified Outpatient Only	65
Total	128

Current Caseload Gap

Current Staffing for Los Angeles County	1 SSA and 5 AGPA's
Caseload that meets statutory mandates – SSA level	50 cases (50 cases x 1 SSA)
Caseload that meets statutory mandates – AGPA level	350 cases (70 cases x 5 AGPA's)
*Total Caseload Abilities for LCS Staff	400
Current Facilities	495
Pending Initial Applications	45
*Total Caseload	540
*Overdue Site Visits	224
*Extension Applications	128
Total Backlog	352
*Gap of LCS Workload for Los Angeles County (Total caseload, Overdue Site Visits and Extension Applications – Total caseload abilities)	492

Based on the above workload gap, LCS is requesting the additional positions to meet increased demand in workload that has resulted in a backlog of applications. Further increases to the number of facilities seeking licensure are expected given the ACA and the implementation of the DMC-ODS Waiver, Medi-Cal 2020 Demonstration.

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LCS is also responsible for the upcoming workload of ASAM designations and monitoring. The ASAM workload will include the designation and ongoing monitoring of residential facilities (as outlined in the DMC-ODS Waiver standard terms and conditions), initial processing for provisional designation, final designation and on-site monitoring for final designations. There are currently 200 provisional designations already assigned to providers, and eventually all ASAM designation duties will be folded into the initial application process. Once a program receives the ASAM designation, an LCS analyst is responsible for the on-going monitoring to confirm the program's appropriate designation through the biennial visits.

Narcotic Treatment Programs Section

The United States Department of Health and Human Services (HHS) Secretary Burwell has made addressing opioid abuse, dependence, and overdose a priority. The current HHS evidence-based initiative focuses on three promising areas: informing opioid prescribing practices, increasing the use of naloxone, and using MAT. President Obama's current proposed 2017 fiscal year budget includes \$1.1 billion to combat opioid addiction. In the spring of 2014, the California Department of Public Health convened the Prescription Opioid Misuse and Overdose Prevention Workgroup, exploring opportunities to expand and strengthen prevention strategies and improving monitoring and surveillance.

One step taken related to MAT services is the DMC-ODS Waiver, approved by CMS in August 2015. Counties that choose to participate in the Waiver, are required to provide licensed NTP services, resulting in expected increases in new program applications and leading to an increased number of programs licensed and monitored by SUDCD. The provisions of the Waiver also require existing NTPs in opt-in counties, which are currently required only to administer methadone, to now order, prescribe and administer three additional medications, Buprenorphine, Disulfiram and Naloxone, in addition to optionally utilizing Vivitrol. Each medication has complex pharmacological requirements and ongoing State guidance necessary to maintain the health and safety of patients and the public. The introduction of these new medications will require regulatory amendments, revised or amended protocols from all existing NTPs utilizing the new medications, staff training and subsequent development of tracking and monitoring tools as well as additional on-site inspection policies and procedures. All of these being new projects for NTP Section and will require new staffing to address adequately.

With the current caseload of licensed NTPs, the Department has not met the mandated minimum requirement of annual on-site inspections for all licensed NTPs for the last four years. With the expected increase in licensed NTPs resulting from the DMC-ODS Waiver, the caseload is expected to grow, leaving the current staffing levels unable to maintain the oversight requirements of these programs. The oversight requirements will include an increase in complaint investigations, death investigations, legal actions and applications for programs to change their capacity. Complaints and legal actions require on-site staff investigations that are time consuming and will increase demands of the NTP staff. These new positions will support program integrity, compliance with mandated activities, and the ability to provide appropriate oversight of the programs. This will support the increase of licensed NTPs and utilization of new medications for the treatment of substance use disorders under the waiver.

In addition to the licensing of NTPs, NTP performs other essential functions for the Division. The most critical is related to the oversight of the AOD workforce, including the counselor

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certifying organizations (COs). In this role, NTP continues to work with other entities to identify processes to achieve standardization and modernization for the certification of AOD counselors. The AOD counselor certification in California includes three separate COs issuing certifications of various levels of education and experience. While each certification meets the minimum regulatory requirements, they are not consistent among the three COs and are therefore time-consuming to maintain. Another integral responsibility includes legislative analyses, where State and Federal bills are tracked and distributed to relevant sections within the Division. Through the 2015-16 fiscal year, NTP tracked 23 bills, analyzing their relevancy, history, and potential impact to the Division. The Section also performs contract management, where oversight is provided through the External Quality Review Organization contract for the DMC-ODS Waiver. While contract monitoring is critical, the Section's familiarity with various legislative bills necessitates that the Section act as a subject matter expert on initiatives and provide technical assistance and training. Other major responsibilities related to administration include performing SUDCD website maintenance and data coordination.

NTP has additionally received a record number of initial applications for the 2016/17 fiscal year. The amount received in the first quarter of the current fiscal year are nearly twice as many as those received over the last two years (FY 2015/16 and FY 2014/15). There are currently 9 applications, and projecting application receipt over the next three quarters culminates in 36 Initial applications, or a 125% increase in one year over the previous four years combined.

Initial applications and Slot Changes (by Fiscal Year)	FY 2012-2013	FY 2013-2014	FY 2014-2015	FY 2015-2016	FY 2016-2017 (Through 1st Quarter)
Initial applications	5	6	3	2	9

The increase in the number of initial applications results in not only a higher workload for analysts during the review phase, but NTP projects that it will lead to elevated workloads in all phases of Section functions, including the number of complaint investigations, annual inspections, corrective action plans, reviewing Live Scan results, reports, and other secondary applications (e.g. relocation and capacity change requests). Below is a grid indicating the total workload of various NTP functions from 2012-13 to the projected numbers for the current fiscal year.

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Projected Increase in Workload Resulting from FY 2016/2017 Applications	2012-13	2013-14	2014-15	2015-16	2016-17 (Projected)
Complaint investigations	28	42	54	51	60
Annual and follow-up inspections	112	110	125	143	168
Corrective action plans including notice of non-compliance	138	143	160	140	165
Incident & Death Reports	106	217	220	118	139
Deficiency reports	110	129	132	137	161

With the addition of new Programs, NTP will be encumbered with a greater number of patient and Program requests, including exception requests. As it currently stands, NTP has a rotating Officer of the Day, who focuses on reviewing exceptions. The exceptions, which serve as a temporary modification to CCR Title 9, can demand significant time and resources, and require careful analysis, historical review of the requesting NTP, frequent consultation with multiple parties, and an overall determination on the validity of the request. The increase in the number of exception requests, as a result of new applications, could potentially require a greater allocation of resources by the Section and prevent adequate resources being channeled to initial applications, annual inspections, and other critical areas overseen by the NTP. The projected increase in all areas of NTP licensing workload will result in the current staff levels being overextended, culminating in the failure to inspect numerous NTP facilities, preventing adequate review of applications, and potentially, in the failure to maintain many of the core health and safety standards at NTPs set by CCR Title 9.

Data currently points to NTP staff already being overextended, with the Section unable to inspect a multitude of sites over the last four fiscal years. Over the last four years, from the 2012-13 fiscal year to 2015-16, NTP did not inspect a combined 56 facilities. The projected number for the 2016-17 fiscal year alone is 42 missed site visits. The inability to conduct site reviews does not prevent a delay in licensure, as licenses will automatically renew in the event of a missed inspection. Instead, the likelihood of potentially hazardous situations increases, as facilities continue to operate without the determination of their compliance status. This presents a potential health and safety issue as to whether patients should be receiving treatment from facilities that have not been verified to be operating at the standards set in place by State and Federal laws. Below is a grid indicating the number of missed site visits over the last four fiscal years, contrasted against the higher expected missed visits as a result of the increase in initial applications.

Missed Annual Inspections by Fiscal Year	FY 2012-2013	FY 2013-2014	FY 2014-2015	FY 2015-2016	FY 2016-2017 (Projected)
Missed Inspections	19	21	10	6	42

The typical NTP initial application ranges between 800 to 1500 pages, includes nearly a dozen standardized forms, requires coordination with other government agencies (e.g. DEA and SAMSHA), and the evaluation of a Program's budget, plan of operation, program goals,

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research data, personnel policies, patient records, security, diversion prevention measures, inspection of the program, in addition to a whole host of other areas critical to maintaining a clinically safe and fully functioning medical facility. Because of the essential work and the inherent risks of operating a medical facility with respect to diversion, security, and satisfactory patient treatment, each application requires a thorough and comprehensive review.

A crucial and protracted aspect of the initial application review process is in the necessity to carefully examine medical personnel documents. Each analyst must ascertain the legitimacy and fidelity of the qualifications and credentials of all expected medical staff, including Program and Medical Directors, Program Physicians, Physician Assistants, and Nurses. The simplest oversight, resulting in having unqualified personnel providing patient care, could have far-reaching consequences and could potentially lead to patient injury or death.

In addition to undertaking the above review process, analysts must adhere to state law requirements of notifying Programs of their licensure status within 45-days. This includes the intake and date stamping of every file, converting the entire package digitally, and assigning and regularly meeting with the designated staff to ensure the application review is progressing according to the mandated timeline. With current personnel levels and increasing applications expected, DHCS will not be able to maintain the same standards of thoroughness in reviewing the initial application while adhering to the 45-day regulatory timetable.

Upon completion of the initial review phase, NTP must perform an initial inspection prior to licensure. The requirements for the initial inspection are identical to those for annual inspections and demand the same standards of completeness and accuracy. This includes the often complex process of coordinating with other government agencies, such as the DEA, in inspecting new Programs. As a result of the projected new programs and current NTP personnel numbers, new applicants may not receive required inspection within the compulsory state timelines – delaying licensure.

Based on the record number of initial applications, NTP estimates current personnel levels are insufficient to adequately complete the review phase to the same standards currently in place, while still responding to applicants within the required regulatory timeline. Furthermore, the increase will overextend staff in a variety of other tasks, including complaint investigations, capacity changes, annual inspections, incident and death reports, among a variety of other core responsibilities.

NTPS is requesting the following 4.0 positions:

- 1.0 full-time permanent SSM I who will be responsible for providing guidance and expertise to NTP staff including planning, organizing and managing field operations. The SSM I duties also include leading and assisting with service of reviewing initial applications, temporary suspension orders, license revocations and directing investigations of complex and politically sensitive complaints and patient deaths. The SSM I will also oversee and contribute to bill analyses, budget change proposals, and the regulatory process.
- 2.0 full-time permanent AGPAs who will be responsible for reviewing initial applications, conducting annual and follow-up inspections of NTPs for compliance with State and

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federal laws and regulations, and reviewing exceptions. They will also conduct complaint investigations, death investigations, and special incident investigations. The AGPAs must develop a report of findings, substantiating related statutory and regulatory requirements, within specified timeframes, for each site visit and investigation conducted. Duties also include assisting with special assignments, including bill analyses, budget change proposals, and regulatory amendments.

- 1.0 full-time permanent OT who will assist in completing assignments related to the overall operation of the NTPS, including entering, tracking and confidentially maintaining NTP related data, updating the NTP website, developing, reviewing and revising standardized desk procedures and answering and screening NTP telephone lines. The OT will also coordinate the NTP advisory committee meeting and other stakeholder meetings.

Complaints Section

CS is responsible for investigating complaints brought against licensed residential treatment programs, outpatient programs and unlicensed programs statewide. CS is also responsible for investigating all complaints brought against registered or certified counselors who are employed by a SUDCD program. Unusual incidents and client deaths are reported to CS from programs statewide, which also require investigating. Investigations can yield three different types of deficiencies when a program fails to comply with any provisions of the Health & Safety Code and Title 9 of the California Code of Regulations. Class A deficiencies are any deficiency which presents an imminent danger to any resident of a facility, in which death or physical injury is a likely consequence (i.e., program practice leads to or assisted in a client's death or severe injury; program is storing bulk medications and distributing them as a pharmacy would). Class B deficiencies relate to the operation or maintenance of the facility which has a direct or immediate relationship to the physical health, mental health, or safety of facility residents (i.e., program has more beds on the premises than what their license dictates, program is allowing for non-registered nor certified staff to perform counseling sessions). Class C deficiencies are those relating to the operation or maintenance of the facility which SUDCD determines has only a minimal relationship to the health or safety of residents (i.e., program refrigerator is malfunctioning; window screens in poor repair). Failure to remedy all cited deficiencies results in the assessment of \$25 per day for each Class C deficiency and \$50 a day for each Class A and B deficiency until the date the program submits written verification that the deficiency is corrected and SUDCD approves the verification. Since FY 2012-2013, SUDCD has collected \$183,430 in civil penalty fines. The approval of additional CS staff will support the performance of ongoing follow-up site visits to establish that programs have indeed corrected all deficiencies.

Prior to 2011, three licenses were revoked by SUDCD (formerly the Department of Alcohol and Drug Programs). Since 2011, SUDCD has revoked and/or suspended thirty-two licenses or certifications. SUDCD has revoked two program licenses and denied an application for licensure at a third program. Successful litigation is contingent on a comprehensive investigation and requires additional workload for the assigned analyst and supervisor. The increase in litigation drives the need for informal Department hearings, formal Office of Administrative Hearings, depositions, discoveries, settlement hearings and formal revocation hearings. An increase in staff will allow for each complaint warranting revocation to be investigated and pursued through litigation as quickly as possible. It will also provide staff resources to follow up on unlicensed investigations where cease and

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desist orders were issued and to serve injunctions; previously SUDCD has not had the resources necessary to confirm that orders are being followed. Currently there are two active and ongoing trials due to licensure suspension or revocation, three scheduled hearings, and two pending license revocations. Authorization of requested positions will enable complaints to be adjudicated promptly and litigated successfully, securing client health and safety.

DHCS recognizes that the September 4, 2012 California Senate Office of Oversight and Outcomes (SOOO) report on residential AOD treatment overseen by SUDCD (titled, "Rogue Rehabs: State failed to police drug and alcohol homes, with deadly results") highlighted areas of concern where SUDCD performance could be improved with increased resources. SUDCD addressed the need for resources by proposing (and obtaining) the 6.0 limited-term positions within CS, however new state and federal changes to the substance use disorder system further affects the Department's already strained resources.

The 5.0 LT AGPA positions in CS are currently carrying a caseload of over 400 complaints. The four additional AGPA positions will allow CS to assign the new staff to the backlog, which as of today consists of 436 complaints and it continues to grow. However, these four staff will not be able to fully eliminate the backlog. DHCS will utilize the four staff to triage the high and medium level complaints. CS has experienced a 57% increase in complaints due to an increase in facilities over the last two years. If this trend continues, without the four additional resources, the complaints will increase to approximately 800 in FY 2017-18.

There has been a direct correlation between the increase in facilities and the increase in the amount of complaints received against licensed and certified programs. In addition, there has been an increase in the amount of the unlicensed complaints which often result in the time consuming process of determining if a program is operating in violation of the law and issuing cease and desist orders. Once the determination is made that a facility is out of compliance or operating in violation of law, CS must take action, which may include the assessment of civil penalty fines and/or possible suspension or revocation of a residential license or certification. The increase in actions taken results in more time being committed to a complaint, taking away time that can be used to investigate other complaints.

CS has experienced an increase in number of high-level complaints. This results in the necessity to collaborate with the FBI, local law enforcement, and other governmental agencies due to the complexity and serious nature of these complaints. This is in addition to the CS analyst's current workload. A high-level complaint will often go through an administrative action which can include depositions, testifying in court, multiple meetings with Legal or other agencies and personal service of legal documents. High-level complaints often garner media attention that require the analyst to verify and produce information regarding their complaint and specific to the information requested. With public scrutiny through media, it is crucial that CS have the ability to respond timely and effectively. This type of work can last for up to two years or longer and consume up to 75% of the analyst's time.

With the expansion of reimbursement for treatment outside of government systems due to ACA, complaints against non-government funded facilities is on the rise. For these complaints, DHCS is often the only oversight for these facilities. Counties and local governments work with DHCS on these cases in order to protect clients in these facilities. This makes the complaints far more complex. In addition, with California becoming a 'destination for treatment services', DHCS is receiving more media, legislative and citizen

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requests and inquiries regarding facilities operating outside the scope of their licensure, unlicensed facilities and/or issues with sober living facilities. Responding to all of the various requests takes a significant amount of staff time and continues to add to the complexity of already sensitive cases

CS Complaints Received

	2012-13	2013-14	2014-15	2015-16	2016-17
Complaints Received per FY	266	322	382	509	636 (projected)
% Increase per FY	No increase	21%	19%	33%	25% (projected)

% increase = [(current year complaints received/ prior year complaints received) x 100%] - 100

DHCS recognizes that the September 4, 2012 California Senate Office of Oversight and Outcomes (SOOO) report on residential AOD treatment overseen by SUDCD (titled, "Rogue Rehabs: State failed to police drug and alcohol homes, with deadly results") highlighted areas of concern where SUDCD performance could be improved with increased resources. SUDCD addressed the need for resources by proposing (and obtaining) the 6.0 LT positions within CS, however new state and federal changes to the substance use disorder system further affects the Department's resources. For example, CS is only able to conduct follow up visits on some of the facilities that have been issued cease and desist orders to ensure the services have ceased, conduct research to better identify facilities that may be operating without a license, and create a quality assurance unit or create processes for the health and safety of the clients in California facilities. DHCS will continue to assess resources and workload in the coming years.

CS is requesting 10.0 positions to address the ongoing and increasing workload in CS including current backlog.

5.0 Full-Time AGPA Permanent Positions (formerly Limited Term)

- Convert 5.0 full-time limited term AGPA positions into permanent positions. These 5.0 AGPAs will continue to conduct investigations of complaints brought against licensed residential treatment facilities, certified outpatient programs and unlicensed residential treatment programs. They will also conduct investigations of unusual incidents occurring at programs (including deaths), investigate allegations of counselor misconduct, and conduct follow-up site visits to verify that deficiencies have been corrected.

4.0 Full-Time AGPA Permanent Positions

- 4.0 additional full-time permanent AGPAs. These 4.0 AGPAs will join the 5.0 above in conducting investigations of complaints brought against licensed residential treatment facilities, certified outpatient programs and unlicensed residential treatment programs. Just as the AGPAs above, they would also conduct investigations of unusual incidents occurring at programs (including deaths), investigate allegations of counselor misconduct, and conduct follow-up site visits to verify that deficiencies have been corrected.

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1.0 Full-Time SSMI Permanent Position (formerly Limited Term)

- Convert 1.0 full-time limited term SSM I into a permanent position. The SSM I will supervise and be responsible for supervising and reviewing the work of staff for accuracy, consistency and compliance with laws, policy, regulations and standards. The SSM I will also be responsible for providing guidance and expertise to CS staff including planning, organizing and managing field operations. The SSM I duties also include leading and assisting with service of temporary suspension orders and inspection warrants, license revocations and directing investigations of complex and politically sensitive complaints and patient deaths. The SSM I will also oversee and contribute to bill analyses, budget change proposals, and the regulatory process.

CS Complaint Intake

Complaints received annually (on average)	400
Hours to complete one complaint (including subsequent legislative or media requests)	75
Total number of complaints investigated and processed annually by one analyst (on average)	24
Open and ongoing CS Complaints (spanning FY 12/13 – current)	421

The SOOO report made recommendations for SUDCD to provide timely and adequate death investigations, pursue evidence of non-compliance, and encouraged the use of DHCS' statutory powers to shut down programs that pose a danger to the health and safety of the individuals that utilize these services. With the approval of the requested resources, SUDCD will continue to address the issues highlighted in the SOOO report and will reduce the existing backlog of complaints identified in the following chart.

CS Backlog Breakdown

Backlog classifications (by year)	FY 2012-2013	FY 2013-2014	FY 2014-2015	FY 2015-2016	FY 2016-2017	Total (FY 2012-2013 through current)
Total Unlicensed Backlog	1	4	24	57	4	90
Total Counselor Backlog	0	0	0	16	11	27
Total Death Backlog	0	0	2	7	0	9
Total General Backlog	2	9	48	222	29	310
Grand Total	3	13	74	302	44	436

The SOOO report recommended amending current statute to allow specific medical services and to provide accurate guidance to provide safe, effective treatment. As the SOOO report made clear, many facilities are operating outside the scope of their license, resulting in client deaths. One consequence, if additional resources are not provided, will result in the inability to detect life-threatening program issues, and a limited ability to stop dangerous practices.

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Redirecting resources is not an option. The ACA and the DMC-ODS have created more licensable functions for providers, which in turn creates an increased workload including initial licensing reviews and complaint investigations for SUDCD staff and progress. It results in backlogged assignments which will not be remedied without the approval for the requested and required positions. With lack of adequate DHCS staffing and oversight, there could be providers that provide compromised quality of care, negatively affecting client health and safety. In an effort to address the increasing work demands, there was an initial attempt to redirect workloads to other areas within the section where feasible, however, on-going system reform and increasing demands have now exceeded SUDCD's ability to maintain workload, because all sections are working at maximum capacity, and continuing to fall behind. There has not been a decrease in complaints nor in overall SUDCD workload. The requested position authority is crucial in assuring SUDCD programs are running suitably, complying with all mandated requirements and regulations.

E. Outcomes and Accountability

SUDCD engages in multiple stakeholder efforts in order to demonstrate DHCS' commitment to transparency and accountability. SUDCD staffs four advisory groups: Narcotic Treatment Program Advisory Group, Counselor Certification Advisory Group, DUI Advisory Group and the Waiver Advisory Group. Through consultation with these advisory groups, SUDCD seeks stakeholder input on current and upcoming projects, regulatory changes, and the intersection with other Department efforts. DHCS shares information regarding the number of new facilities, closures and completed Department actions.

The short-term benefits of approving the requested position authority include the ability to expedite and work through the more serious complaints in need of investigation and monitoring the three certifying organizations. SUDCD would have the ability to re-establish regular meetings with the Counselor Certifying Organizations, strengthen current compliance with the Federal Health Databank requirements, increase collaborative efforts with the National Commission for Certifying Agencies, and reduce NTP investigation and site visit backlogs. In addition, SUDCD will be able to identify regulations in need of revision, initiate regulation packages, establish policy and procedures for oversight of new medications delivered through the NTP section, and develop and test new on-site monitoring tools. LCS will continue to process the backlog of applications for residential and outpatient facilities and to address increased workload based on the increased number of licensing and certification applications and the increase in treatment facilities providing incidental medical services.

The medium to long-term benefits are specific to the ability of SUDCD to continue addressing the recommendations of the SOOO report and to update regulations and analyze counselor related legislative proposals. With the approval of this Budget Concept Proposal (BCP), SUDCD would have the ability to conduct ongoing complaint investigations for statutory and regulatory compliance and to subsequently require corrective action or close facilities not in compliance with current law. NTP will be equipped to provide ongoing technical assistance for those NTP programs under the waiver licensed to dispense the four new NTP medications.

The long-term benefits include SUDCD's ability to reduce the existing backlog throughout the division, to develop long-term goals and strategic processes to avoid future backlog issues. After addressing the backlog, there is still ongoing workload for the staff to complete. Analysts will have the ability to maintain caseloads by allowing for timely

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compliance reviews and to provide additional monitoring oversight of residential and outpatient treatment facilities by conducting frequent follow-up compliance visits. Long-term benefits also include the development, adoption and implementation of more stringent regulations pertaining to residential and outpatient treatment facilities, securing the health and safety of residential and outpatient clients.

SUDCD has internal policy in place to confirm that resources are continually monitored, so that SUDCD's desired and projected outcomes are realized while maintaining accountability.

**Projected Outcomes
Licensing & Certification Section (LCS)**

Workload Measure	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Total Licensed and Certified Programs	2,246	2,583	2,970	3,415	3,927	4,516
Initial Applications	520	337	337	337	337	337
Renewal Applications	820	896	1,303	994	1,640	1,331
Other Applications	100	100	100	100	100	100
ASAM Designation	300	100	100	100	100	100
Incidental Medical Services	500	100	100	100	100	100

Complaints Section (CS)

Workload Measure	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Decrease Complaint Backlog of 412 annually by:	72	68	68	68	68	68
Decrease the number of deaths from provider negligence by:	2	4	6	8	10	12
Continue level of licensing actions, as warranted	10	12	14	16	18	20
Meet mandated 90-day review for Counselor Misconduct Investigations	71	75	79	83	87	91
Conduct follow-up investigations	10	15	20	25	30	35

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Narcotic Treatment Programs Section (NTPS)

Workload Measure	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Complaint investigations	60	65	68	68	68	68
Applications received	245	262	270	270	270	270
Annual and follow up inspections	147	162	177	177	177	177
Corrective action plans including notice of non-compliance	168	175	182	182	182	182
Physician requests for temporary exceptions to regulations	8200	8215	8307	8307	8307	8307
Incident & Death Reports	210	218	224	224	224	224
Deficiency reports	145	149	165	165	165	165

F. Analysis of All Feasible Alternatives

Alternative 1: Approve the request for staff resources (20.0 permanent positions and LT resources equivalent to 8.0 positions) and expenditure authority of \$2,547,000 (\$1,726,000 ROPLF; \$290,000 NTPF; and \$531,000 Reimbursement). DHCS does not request additional federal fund authority (non-add [\$1,046,000] for SAPT Federal Fund).

Pros:

- Assists in timely review of the existing backlog of over 400 complaints division wide.
- Increases DHCS' ability to conduct timely and thorough investigations.
- Allows high and medium level complaints to receive timely on-site investigations.
- Increases ability to take legal action against additional non-compliant providers.
- Allows SUDCD to draft more stringent regulations.
- Increases ability to provide additional follow-up visits and reporting on unlicensed facilities.
- Follow-up visits will improve public safety through the reduction of regulatory violations and increased statutory compliance.
- Improves DHCS' ability to carry out all non-compliant counselor certification and registration actions.

Cons:

- Increases state staff.
- Burdens the ROPLF.

Alternative 2: Approve 20.0 permanent positions and the 4.0 positions for a 2-year limited term period instead of a 5-year limited term period at a cost of \$ 2,016,000.

Pros:

- Assists in timely review of the existing complaint and licensing backlogs.
- Increases DHCS' ability to conduct timely and thorough investigations.
- Allows high and medium level complaints to receive timely on-site investigations.
- Increases ability to take legal action against additional non-compliant providers.
- Allows SUDCD to draft more stringent and timely regulations.

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- Increases ability to provide additional follow-up visits and reporting on unlicensed facilities.
- Follow-up visits will improve public safety through the reduction of regulatory violations and increased statutory compliance.
- Improves DHCS' ability to carry out all non-compliant counselor certification and registration actions.
- Reduces the establishment of 4.0 additional LT positions (LA County) and shortens the limited term time frame for 4.0 positions.

Cons:

- Reduces the resources dedicated to LA County to process backlogged applications.
- Lengthens the timeframe for LA County to implement the DMC-ODS waiver.
- Puts clients at greater risk due to a lack of staff to preform required site visits.

Alternative 3: Approve 9.0 permanent positions, convert the 6.0 LT positions in CS into permanent positions, approve the 4.0 LA County positions and approve 4.0 positions for a 2-year limited term period at cost of \$2,209,000.

Pros:

- Reduced expenditures for ROPLF or other SUDCD funding sources.
- LA County specific resources would minimize timeframes to process applications thereby shortening the timeframe for LA to stand-up the DMC-ODS.
- Provides minimal additional resources to address the workload issues in SUDCD.

Cons:

- Fails to address all of the current staffing and workload issues within SUDCD.
- Delays SUDCD's ability to investigate client deaths.
- Reduces the ability to take action against licensed and unlicensed facilities, including temporary suspensions and/or revocations at problem facilities.
- Decreases the ability to improve and maintain client health and safety.
- Limits the resources to take action against counselors who have committed offenses within SUDCD treatment programs.
- Ongoing complaint backlog will continue to increase.
- Application backlog will continue to increase.
- Decreases the number of programs and services available to the clients.

Alternative 4: Convert the 6.0 LT positions in CS into permanent positions and approve 9.0 permanent positions at a cost of \$1,408,000.

Pros:

- Limited expenditures for ROPLF or other SUDCD funding sources.

Cons:

- Results in a severe lack of compliance with state and federal requirements.
- Retains current staffing levels to investigate complaints; however, this does not address the complaint backlog.
- Decreases the ability to improve and maintain client health and safety.
- Decreases the capability to take action against licensed and unlicensed facilities, including temporary suspensions and/or revocations at problem facilities.

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- Application backlog will not be addressed and will continue to increase.
- Ongoing complaint backlog will continue to increase.
- Delays SUDCD's ability to investigate client deaths.
- Less ability to address the need for resources due to SUDCD's growing responsibilities.
- Inability to take timely action against counselors who have committed offenses within SUDCD treatment programs.
- Decreases the amount of programs and services available to the clients.
- Reduces the resources dedicated to LA County to process backlogged applications.
- Lengthens the timeframe for LA County to implement the DMC-ODS waiver.

G. Implementation Plan

Upon approval of this BCP, SUDCD will fill and manage the new positions using fees deposited in the ROPLF, in addition to the NTPF, and SAPT. In addition, SUDCD will secure a contract with LA County for two-year funding of the 4.0 LA County specific positions. SUDCD will begin hiring for the positions immediately upon receiving position funding and authority.

H. Supplemental Information

- Request for one-time funding for cubicle buildouts, including cabling at a cost of \$98,000.
- Travel cost (In-state): \$126,000 for on-going; \$34,000 for 5-year LT; and \$48,000 for 2-year LT.
- Limited-term contract with Los Angeles County (Reimbursement) at a cost of \$531,000 in FY 2017-18 and \$495,000 in FY 2018-19. The staff, funded by this contract, will be dedicated to Los Angeles County issues.

I. Recommendation

DHCS recommends Alternative 1: approves the request of staff resources (20.0 permanent positions and LT resources equivalent to 8.0 positions) and expenditure authority of \$2,547,000 (\$1,726,000 ROPLF; \$290,000 NTPF; and \$531,000 Reimbursement). DHCS does not request additional federal fund authority (non-add). The requested resources is to address: 1) the reduction of the application and complaint backlogs and the ability to conduct initial and renewal monitoring visits, 2) the ability to provide state level guidance for NTPs in counties opting into the DMC-ODS waiver, 3) the federal requirements to designate and monitor facilities according to the American Society of Addiction Medicine (ASAM) levels, 4) the requirements to effectively regulate alcohol and other drug (AOD) treatment facilities, and 5) the licensing and monitoring functions specific to Los Angeles (LA) County facilities.

This total is adequate to reduce the ongoing complaint backlog, to assure the closure of complaints in a timely manner and to allow for more on-site investigations. Alternative 1 allows SUDCD to move towards completion of necessary workload associated with informal and formal hearings for LCS, NTP and CS and to properly monitor certifying organizations and establish compliance with the Federal Health Databank requirements. With Alternative 1, SUDCD will have the resources available to continue to respond to the recommendations of the SOOO report by submitting a revised counselor regulations package and analyzing counselor legislation.

Analysis of Problem

Without approval of Alternative 1, program integrity is impacted. SUDCD have reduced ability to prevent programs from providing inappropriate services and SUDCD will be at risk for a loss of federal dollars due to the resulting delays in DMC-ODS.

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Licensing & Certification Section
1.0 Staff Services Manager I, 808-956-4800-XXX
5-year Limited Term

Activities	Number of Items	Hours per Item	Total Hours
<p>Plan and direct work for operational efficiency, cost effectiveness, and compliance with federal and State laws rules and regulations including:</p> <ul style="list-style-type: none"> • Conducting succession planning, staff recruitment, hiring, training, and development • Review and revise procedures and policies as necessary • Prepare and present reports for management and staff • Evaluate program authorities, policies, procedures, production data, reports from information systems relating to ongoing collection activity to track productivity and identify opportunities for improvement • Set priorities and due dates for special assignments • Lead and assist with service of temporary license and certification suspension and revocation orders • Plan, assign, organize and authorize work assignments • Review staff work for accuracy, consistency and compliance with laws, policy, regulation and standards 	1	1,000	1,000
<p>Propose, develop and review legislation, regulations and standards related to new licensing and certification requirements including:</p> <ul style="list-style-type: none"> • Assist in the consultation and collaboration with legal counsel on LCS administrative actions • Information sharing with staff of the implementation of new program requirements • Assist with the review and development of policies and procedures stemming from the implementation of new licensing and certification processes, requirements, and regulations • Respond to requests and issues related to findings, requirements, and procedures • Research current events related to LCS • Oversee and assist with bill analyses, budget change proposals, and regulatory amendments 	1	600	600

Activities	Number of Items	Hours per Item	Total Hours
Support the quality and improvement of the Section, Division and the Department including: <ul style="list-style-type: none"> • Participate in the implementation and support of quality improvement • Direct and participate in the development and completion of presentation and trainings related to licensing and certification • Participate in advisory committee groups and special interest groups related to licensing and certification 	1	200	200
Total hours worked			1,800
1,800 hours = 1.0 Position			
Actual number of Positions requested:			1.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Licensing & Certification Section
1.0 Health Program Specialist I 808-956-8338-XXX
5-year Limited Term

Activities	Number of Items	Hours per Item	Total Hours
<p>Serve as a subject matter expert on legislation and policy for Licensing and Certification including:</p> <ul style="list-style-type: none"> • Consult and collaborate with the Office of Legislation Affairs • Prepare, track, and monitor all legislative proposals related to licensing and certification • Implement policies and procedures within the structure of the American Society of Addiction Medicine (ASAM designation) • Implement policies and procedures within the structure of Incidental Medical Services (IMS) pursuant to the passage of AB 848 • Coordinate, monitor, and track all LCS regulation packages with the Office of Regulations • Prepare and analyze reports related to the legislative and regulatory mandates for LCS compliance • Prepare, review, track, and monitor Budget Change Proposals for LCS • Lead implementation of policies and procedures to allow for consistency with the Division's mission 	1	900	900
<p>Serving as subject matter expert on licensing and certification statutes and regulations including:</p> <ul style="list-style-type: none"> • Identify and define improvement of LCS requirements for monitoring compliance of licensed and/or certified programs • Identify and define improvements for monitoring compliance with ASAM designation • Identify and define improvements for monitoring compliance with Incidental Medical Services • Research and problem solving high-profile and sensitive LCS issues • Collaborate and consult with stakeholders on various projects related to licensing and certification • Identify and address areas of concern related to licensed and certified programs • Formulate reports to resolve complex licensing and certification issues • Provide technical assistance and respond to complex inquiries related to LCS operations 	1	700	700

Activities	Number of Items	Hours per Item	Total Hours
Lead the quality and improvement of the section, division and the Department. This includes: <ul style="list-style-type: none"> • Coordination with Division management on workforce development related issues for continued SUDCD enhancements • Preparation of talking points, power points, charts and graphs for Division management for meetings and presentations related to SUDCD projects • Preparation and assisting management with preparing and generating Power Point documentation related SUDCD conferences and other public trainings 	1	200	200
Total hours worked			1,800
1,800 hours = 1.0 Position			
Actual number of Positions requested:			1.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Licensing & Certification Section
5.0 AGPA 808-956-5393-XXX Permanent
2.0 AGPA 808-956-5393-XXX 5-year Limited Term
4.0 LA County AGPA 808-956-5393-XXX 2-year Limited Term

Activities	Number of Items	Hours per Item	Number of positions	Total Hours
<p>Independently process, track and maintain license and certification applications, including:</p> <ul style="list-style-type: none"> • Receive, review and analyze initial applications, extension application, change in service applications and supporting documents • Process initial licenses and/or certification application within 45 working days for compliance with regulations • Prepare and issue incomplete or complete letters within the regulatory requirement of 45 working days • Prepare and issue initial application termination letters to providers who do not submit the required missing documentation within 60 days from the date of the initial letter as required • Manage assigned caseload to assure timely completion of mandated processing times • Develop and manage electronic program files • Prepare, review and issue various written correspondences related to the application process • Prepare and process license and certification closures, terminations and suspensions • Review and respond to various written requests • Format and type LCS licenses and certifications • Generate letters, forms, memorandums and processing highly sensitive, confidential or complex correspondence • Prepare and track legal service request • Develop, write, respond and prepare appeal documents for civil penalties, denials, closures, suspension, and termination • Schedule and hold informal civil penalty conference within 15 working days of provider's appeal 	1	600	11.0	6,600

Activities	Number of Items	Hours per Item	Number of positions	Total Hours
<ul style="list-style-type: none"> • Respond to licensing and certification inquiries, phone calls, fax, and email • Update program information in the LCS database • Collaborate with local, city, county, and state agencies regarding the inspection findings, compliance issues, and administrative actions. • Generating and tracking revised residential licenses to reflect the provisional ASAM level of services designated for the facility • Generating licensing reports related to the issuance of the provisional ASAM designations within 10 working days from the date of the on-site visit, confirming the appropriate ASAM designation was issued • Conducting in house reviews to verify and confirm the appropriate provisional ASAM designations have been issued to providers based on the submission and telephone verification of the ASAM questionnaire • Reviewing ASAM questionnaires and contacting providers, by telephone, to assess the submitted questionnaire and evaluate program treatment services to determine the appropriate ASAM designation based on the provider's level of treatment services 				
<p>Independently conduct biennial and follow-up inspections of LCS facilities to determine and promote compliance with State and federal laws and regulations. This includes:</p> <ul style="list-style-type: none"> • Manage assigned caseload to assure timely completion of mandated on-site compliance reviews • Prepare site visit documents • Review and analyze previous inspection reports and corrective action plans • Conduct entrance interviews to discuss audit process and gain knowledge of program operation • Conduct facility walkthrough inspection of program building and grounds • Review prescription medication security, policies and procedures • Audit client and program personnel records • Interview clients and various licensing and certification staff 	1	600	11.0	6,600

Activities	Number of Items	Hours per Item	Number of positions	Total Hours
<ul style="list-style-type: none"> • Evaluate written program protocols • Conducting exit interviews to discuss inspection findings • Prepare notice of deficiency report 				
<p>Preparing reports derived from on-site reviews. This includes:</p> <ul style="list-style-type: none"> • Gather and analyze data gathered during on-site review • Develop and write reports of findings related to statutory and regulatory requirements within 10 working days from the date of the compliance visit • Analyze reports of findings to determine if further action is required • Process, save, and scan of signed reports • Review and subsequently approving or denying corrective action plans • Assess and tracking civil penalties • Provide continuous technical assistance • Collaborate with local, city, county, and state agencies regarding the inspection findings, compliance issues, and administrative actions 	1	600	11.0	6,600
<p>Responding to licensing and certification inquiries. This includes:</p> <ul style="list-style-type: none"> • Responding to phone calls, faxes, email; routing calls to assigned analysts • Route calls to CCCS complaints coordinator, management, PRA office, legal office, other entities 	1	60	11.0	660
Total hours worked				20,460
1,800 hours = 1.0 Position				
Actual number of Positions requested:				11.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Licensing & Certification Section
1.0 OT 808-956-1139-XXX
Permanent

Activities	Number of Items	Hours per Item	Total Hours
<p>Assisting in completing assignments related to the overall operation of the section. This includes:</p> <ul style="list-style-type: none"> • Answer and screen SUDCD telephone lines to provide general information or route calls to appropriate staff • Develop, review, and revise standardized desk procedures for processing LCS applications • Date stamping and processing all incoming/outgoing correspondence • Update the licensing and certification computer data for system accuracy • Generate monthly licensing and certification reports for management • Generate and format general LCS correspondence to providers and the general public • Type, format and generate LCS licenses and certification certificates • Review documentation for accuracy, correct grammar and consistency of style and format • Photocopy, scan, mail and file reports, memorandums, correspondence, and other LCS related documentation • Create and maintain folders for incoming applications • Process payments for applications • Coordinate various LCS meetings, reserving and clearing meeting space, and preparing meeting packets 	1	1,350	1,350
<p>Accurately entering and tracking LCS related data. This includes:</p> <ul style="list-style-type: none"> • Update program information in the LCS database • Receive, monitor and track LCS applications • Assist in maintaining LCS website by confirming accuracy of posted information and that all postings are in a format compliant with the Americans with Disabilities Act (ADA) • Aid in Public Records Act requests by locating, tracking and monitoring program files, and gathering documentation • Shred confidential documentation or evidence gathered from site reviews 	1	450	450

Activities	Number of Items	Hours per Item	Total Hours
<ul style="list-style-type: none"> • Document and track documentation for records retention and destruction time lines <p>Attendance Liaison/Coordinate including:</p> <ul style="list-style-type: none"> • Prepare, review and organize documents for new LCS employees and employees separating from LCS • Conduct new employee orientation • Gather, track, and issue timesheets and 634's to LCS staff • Review and enter LCS staff timesheets into the HRIS data system • Act as the liaison between LCS staff and Human Resources • Prepare and process merit increase documentation for LCS staff • Inform LCS management of upcoming performance and probation reports for staff 			
Total hours worked			1,800
1,800 hours = 1.0 Position			
Actual number of Positions requested:			1.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Complaints Section
1.0 Staff Services Manager I 808-956-4800-XXX
Permanent

Activities	Number of Items	Hours per Item	Total Hours
Provide guidance and expertise to CS staff including: <ul style="list-style-type: none"> • Reviewing staff work for accuracy, consistency and compliance with laws, policy, regulations and standards • Reviewing, critiquing and approving work • Providing guidance, training and coaching needed for staff development • Completing staff probation reports and performance appraisals • Planning, organizing and managing the operations of field staff to include accompanying staff on more complex reviews • Setting priorities and due dates for special assignments • Providing guidance on corrective action plans • Leading and assisting with service of temporary suspension orders, license revocations and the service of inspection warrants • Directing investigations of complex and politically sensitive complaints or deaths 	1	810	810
Propose, develop and review legislation, regulations and standards, which includes: <ul style="list-style-type: none"> • Consulting and working with legal counsel on administrative actions • Assist with reviewing and developing internal policies and procedures • Responding to requests and issues regarding procedures, investigations and findings • Developing and reviewing data collections systems • Conducting time management studies • Assisting with servicing Temporary Suspension Orders, revocations and inspection warrants • Submitting revised regulations packages pertaining to Title 9, Chapter 5 	1	630	630
Assist with bill analyses, budget change proposals, and regulatory amendments	1	200	200
Participate in the implementation and support of quality improvement with the division and Department	1	90	90
Direct and participate in the development and completion of presentations and trainings	1	70	70
Total hours worked			1,800
1,800 hours = 1.0 Position			
Actual number of Positions requested:			1.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Complaints Section
9.0 Associate Governmental Program Analyst 808-956-5393-XXX
Permanent

Activities	Number of Items	Hours per Item	Number of Positions	Total Hours
<p>Independently conduct complaint investigations at licensed and/or certified drug treatment and recovery programs, which includes:</p> <ul style="list-style-type: none"> • Reviewing the initial complaint • Calling the complainant • Entering complaint information on analyst's excel tracking log • Entering complaint information on master CS database • Researching program history • Creating a work plan for site visit • Preparing site visit documents • Meeting with Program Director or representative • Conducting facility walk-through inspection • Interviewing residents and program staff • Review and scanning documents, including resident files and personnel records • Preparing Notice of Deficiency • Conducting an exit interview • Reviewing and analyzing evidence to determine if the complaint is substantiated • Logging and tracking complaint information in analyst's excel tracking log • Logging and tracking complaint information in master CS database 	15	40	9.0	5,400
<p>Independently conduct death investigations at licensed and/or certified SUDCD drug treatment and recovery programs, which includes:</p> <ul style="list-style-type: none"> • Reviewing the initial complaint • Calling the program to complete a first contact form and memo, which details issues surrounding death and decedent's status at time of death • Entering complaint information on analyst's excel tracking log • Entering complaint information on master CS database • Researching program history 	3	40	9.0	1,080

Activities	Number of Items	Hours per Item	Number of Positions	Total Hours
<ul style="list-style-type: none"> • Meeting with management and DHCS legal prior to site visit • Creating a work plan for site visit • Preparing site visit documents • Checking out necessary equipment to include portable scanner, camera and cell phone • Conducting site visit, which includes: • Meeting with Program Director or representative • Conduct facility walk-through inspection • Interview residents and program staff that may have witnessed the death • Reviewing and scanning documents, including resident files and personnel records • Preparing Notice of Deficiency • Conducting an exit interview • Reviewing and analyzing evidence to determine if the complaint is substantiated • Contacting Coroner from county where death occurred to obtain death report • Logging and tracking complaint information in analyst's excel tracking log • Logging and tracking complaint information in master CS database 				
<p>Independently conduct complaint investigations against certified or registered AOD counselors at licensed and/or certified drug treatment and recovery programs, which includes:</p> <ul style="list-style-type: none"> • Reviewing the initial complaint • Calling the complainant • Entering complaint information on analyst's excel tracking log • Entering complaint information on master CS database • Researching counselor history • Obtaining counselor file from certifying organization • Creating a work plan for site visit • Preparing site visit documents • Checking out necessary equipment to include portable scanner, camera and cell phone • Meeting with Program Director or representative • Conducting facility walk-through inspection • Interviewing residents and program staff 	6	40	9.0	2,160

Activities	Number of Items	Hours per Item	Number of Positions	Total Hours
<ul style="list-style-type: none"> • Interviewing counselor alleged misconduct • Reviewing and scanning documents, including resident files and personnel records • Conducting an exit interview • Reviewing and analyzing evidence to determine if the complaint is substantiated • Meeting with DHCS legal staff to review evidence • Logging and tracking complaint information in analyst's excel tracking log • Logging and tracking complaint information in master CS database • Preparing "Notice to Counselor and Certifying Organization" stating action to be taken against the counselor • Closing case within the mandated 90-day timeframe 				
<p>Independently conduct complaint investigations at unlicensed drug treatment and recovery programs, which includes:</p> <ul style="list-style-type: none"> • Reviewing the initial complaint • Calling the complainant • Entering complaint information on analyst's excel tracking log • Entering complaint information on master CS database • Researching facility location • Creating a work plan for site visit • Preparing site visit documents • Attempting to establish staff contacts • Attempting to establish licensable services provided in an unlicensed setting • Conducting facility walk-through inspection • Interviewing occupants • Reviewing and scanning documents, including resident files and personnel records if possible • Reviewing and analyzing evidence to determine if the complaint is substantiated • Logging and tracking complaint information in analyst's excel tracking log • Logging and tracking complaint information in master CS database 	10	40	9.0	3,600

Activities	Number of Items	Hours per Item	Number of Positions	Total Hours
Conducting Intake Coordinator duties, including: <ul style="list-style-type: none"> • Taking complaints by phone, fax or email • Entering data onto complaint form • Entering data into PRIME and CS database 	15	8	9.0	1,080
Researching and processing of PRA requests	10	4	9.0	360
Preparing investigative reports for licensed programs, certified programs, unlicensed programs, death investigations and unusual incidents, which include: <ul style="list-style-type: none"> • Developing and writing reports of findings, as related to statutory and regulatory requirements, within specified timeframes • Analyzing reports of finding to determine if further action is needed • Organizing evidence and identifying statutory and regulatory violations • Reviewing and subsequently approving or denying corrective action plans received from provider addressing deficiencies • Assessing and tracking civil penalties 	35	8	9.0	2,520
Preparing appeal documents from programs and counselors: <ul style="list-style-type: none"> • Participating in informal hearings and assisting with the service of Temporary Suspension Orders, revocations and inspection warrants; • Preparing Legal Service Requests for action or consultation • Assisting with the development of internal policies and procedures • Drafting memos and controlled correspondence • Responding to inquiries from the public; service providers; complainants; certifying organizations and other agencies • Assisting with bill analyses, budget change proposals and regulatory amendments 	3	10	9	270
Total hours worked				16,470
1,800 hours = 1.0 Position				
Actual number of Positions requested:				9.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Narcotics Treatment Program
1.0 SSM | 808-956-4800-XXX
Permanent

Activities	Number of Items	Hours per Item	Total Hours
<p>Provide guidance and expertise to NTP staff including:</p> <ul style="list-style-type: none"> • Reviewing staff work for accuracy, consistency and compliance with laws, policy, regulations and standards • Reviewing, critiquing and approving work • Providing guidance, training and coaching needed for staff development • Completing staff probation reports and performance appraisals • Planning, organizing and managing the operations of field staff to include accompanying staff on more complex reviews • Setting priorities and due dates for special assignments • Providing oversight and managing the allocation and completion of initial applications • Providing guidance on corrective action plans • Leading and assisting with service of temporary suspension orders, license revocations for NTP and the service of inspection warrants • Directing investigations of complex and politically sensitive complaints or deaths • Development of new tracking and monitoring tools as well as onsite inspection of policy and procedures at NTP facilities • Monitoring and approving request for exceptions to regulations through the center for substance abuse treatment extranet • Applying and monitoring request for federal funds through grants disbursed through substance abuse and mental health services administration 	1	790	790

Activities	Number of Items	Hours per Item	Total Hours
Propose, develop and review legislation, regulations and standards relating to new NTP medications including: <ul style="list-style-type: none"> • Consulting and working with legal counsel on NTP administrative actions • Keeping staff informed of the implementation of new medications • Assist with reviewing and developing internal policies and procedures stemming from implementation of new medications • Responding to requests and issues regarding procedures, investigations and findings • Researching current events related to NTP 	1	600	600
Oversee, assist, and contribute to: <ul style="list-style-type: none"> • Bill analyses • Budget Change Proposals • Regulatory amendments 	1	240	240
Participating in the implementation and support of quality improvement within the division and Department	1	90	90
Direct and participate in the development and completion of presentations and trainings for: <ul style="list-style-type: none"> • NTP Advisory Committee group • Substance Abuse and Mental Health Services Administration (SAMHSA) Grant Program • DHCS Opioid Workgroup • Statewide Prescription Opioid Misuse and Overdose Prevention Workgroup 	1	80	80
Total hours worked			1,800
1,800 hours = 1.0 Position			
Actual number of Positions requested:			1.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Narcotics Treatment Program
2.0 AGPA 808-956-5393-XXX
Permanent

Activities	Number of Items	Hours per Item	Total Hours
<p>Independently conduct annual and follow-up inspections of NTPs to determine and promote compliance with State and federal laws and regulations. This includes:</p> <ul style="list-style-type: none"> • Managing assigned caseload to assure timely completion of mandated annual on-site compliance reviews • Preparing site visit documents • Reviewing and analyzing previous inspection reports and retrieving exception requests submitted through the CSAT extranet • Conducting facility walkthrough inspection of program building and grounds • Reviewing narcotic medication security and handling including a reconciliation of medication inventory • Auditing patient files and program personnel records • Interviewing patients and various NTP staff • Evaluating written protocol program administration • Conducting an exit interview to discuss inspection findings • Preparing notice of deficiency • Reviewing initial applications, performing initial application inspections, and preparing notices of deficiencies and approval • Processing annual renewal applications for narcotic treatment providers to confirm providers license and certification are issued prior to expiration date, if provider is in compliance • Development of new tracking and monitoring tools as well as onsite inspection of policy and procedures at NTP facilities • Monitoring and approving request for exceptions to regulations through the center for substance abuse treatment extranet • Applying and monitoring request for federal funds through grants disbursed through substance abuse and mental health services administration • Analyzing and approving/disapproving exceptions 	60 items annually	32	1,920
<p>Prepare reports derived from on-site reviews to include:</p> <ul style="list-style-type: none"> • Developing and writing reports of findings, as related to statutory and regulatory requirements, within specified timeframes 	60 items annually	25	1,500

Activities	Number of Items	Hours per Item	Total Hours
<ul style="list-style-type: none"> • Analyzing reports of finding to determine if further action is needed • Determining areas requiring corrective action plans • Substantiate findings in the event of provider appeal • Reviewing and subsequently approving or denying corrective action plans received from provider addressing deficiencies • Providing continuous technical assistance on the implementation of narcotic treatment program corrective action plans • Assessing and tracking civil penalties • Collaborating with local, city, county, State, and federal agencies regarding inspection findings, compliance issues and administrative actions 			
<p>Conduct complex complaint investigations, death investigations, and special incident investigations. These activities involve:</p> <ul style="list-style-type: none"> • Intake by phone, fax or email • Reviewing initial complaint and maintain contact with the complainant throughout the investigation • Entering information into tracking log and create complaint folder in personal database • Researching and analyzing program history • Fact gathering via interviews with staff, complainants, patients, various agencies and the public • Drafting death report memorandum • Contacting program to obtain information surrounding the death and coroner to obtain death report • Reviewing and analyzing patient files and other pertinent documents • Retaining and image scan patient files • Analyzing facts and data • Developing and writing reports of investigation findings 	2	38	76
<p>Other assignments and projects:</p> <ul style="list-style-type: none"> • Reviewing and subsequently approving or denying capacity increase or decreases, relocations expansions and any protocol amendment change • Monitoring CSAT extranet daily • Assisting with the development of internal policies and procedures • Managing operations of Narcotic Treatment Program Advisory committee • Preparing statistical and narrative reports, issue memos • Offering direct technical assistance via email, letter, telephone or in person to departmental staff, federal, 	2	37	74

Activities	Number of Items	Hours per Item	Total Hours
<p>and other State Department representatives, service providers, county administrators, and general public regarding compliance with State and federal laws and regulations, and on-site compliance review procedures</p> <ul style="list-style-type: none"> • Submitting revised regulations packages pertaining to Title 9, Chapter 4 • Responding to inquiries via phone, fax or email from the public, service providers, certifying organizations and other agencies • Independently analyzing and interpreting current statutes and regulations • Assisting with special assignments, including bill analyses; Budget Change Proposals; regulatory amendments; trainings and conferences • Processing Public Record Act requests 			
<p>Participate, present and provide orders for disciplinary action of narcotic treatment program misconduct to include:</p> <ul style="list-style-type: none"> • Preparing appeal documents • Completing penalty process for all investigations • Issuing orders to suspend the administration of take-home doses • Preparing requests for legal advice, action or consultation • Scheduling and attending informal hearings • Assisting with the service of inspection warrants • Assisting with service of temporary suspension orders or revocations 	2	32	64
Total hours worked			3,634
1,800 hours = 1.0 Position			
Actual number of Positions requested:			2.0

WORKLOAD STANDARDS
Substance Use Disorder Compliance Division
Narcotics Treatment Program
1.0 OT 808-956-1139-XXX
Permanent

Activities	Number of Items	Hours per Item	Total Hours
<p>Assist in completing assignments related to the overall operation of the section. This includes:</p> <ul style="list-style-type: none"> • Answering and screening NTP telephone lines to provide general information or route the telephone call to appropriate NTP staff • Developing, reviewing and revising standardized desk procedures for processing licenses, incoming/outgoing correspondence, updating computer data, computer generated reports and general correspondence • Formatting, typing and printing NTP license certificates • Generating letters, reports, forms, memorandums and processing highly sensitive, confidential or complex correspondence • Reviewing documentation for accuracy, correct grammar and consistency of style and format • Photocopying, mail, and file reports, memorandums, correspondence, and other documents • Creating folders for incoming applications, capacity/slot changes, and relocations for NTP licensing • Serving as backup officer of the day to screen incoming inquiries 	1	810	810
<p>Accurately enter, track and confidentially maintain NTP related data. This includes:</p> <ul style="list-style-type: none"> • Updating program information in the NTP database • Tracking and monitoring CAPs that are sent and received within established timeframes • Assisting in maintaining NTP website by confirming accuracy of posted information and that all postings are in a format compliant with the Americans with Disabilities Act (ADA) • Aiding in Public Records Act requests by gathering documentation • Shredding confidential documents or evidence gathered from site reviews • Documenting and tracking documentation for records retention and destruction time lines 	1	620	620

Activities	Number of Items	Hours per Item	Total Hours
Coordinate NTP Advisory committee and various meetings. This includes: <ul style="list-style-type: none"> • Informing attendees of meeting time and location • Reserving, setting up and cleaning meeting space • Assembling meeting packets for members, printing name plates and sign in sheets • Recording and distributing meeting minutes • Confirming that meeting minutes are posted on the DHCS website and are in a format compliant with the Americans with Disabilities Act (ADA) 	1	370	370
Total hours worked			1,800
1,800 hours = 1.0 Position			
Actual number of Positions requested:			1.0