



# Medi-Cal Site Certification

Key points the ACBH Quality Assurance Office wants you to remember

June 11, 2020



# When is Site Certification needed?

- **New Sites**
- **Re-certification is required at a minimum every three years**
- **Program moves, including partial moves**
- **Program name changes**
- **Adding a new mode of service**
- **New provider to ACBH**
- **Structural changes to the facility (major renovation)**
- **Out of county certification (piggyback)**

**\* Beyond re-certifications, the above changes are communicated via the Program Change Request Form**

# Highlights from QA Medi-Cal Site Certification Policy and Procedure (P&P)

➤ **Link to Policy:**

[http://www.acbhcs.org/providers/QA/docs/qa\\_manual/16-1\\_MEDI-CAL\\_CERT\\_MHS.pdf](http://www.acbhcs.org/providers/QA/docs/qa_manual/16-1_MEDI-CAL_CERT_MHS.pdf)

## D. Contracted Provider Programs within the County

- i. A request for an initial Certification is initiated by the provider's BHCS Program Contract Manager.
- ii. If there are program changes, the provider must notify their BHCS Program Contract Manager who will submit a Program Change Request to the BHCS QA Office if a new site certification is needed. Program changes to be reported include all circumstances listed under 'B' above as well as the following:
  - a. When a provider makes major staffing changes, makes organizational and/or corporate structure changes;
  - b. When there is a change of ownership

# Highlights from QA Medi-Cal Site Certification Policy and Procedure (P&P)

- v. An on-site visit is required as part of the Certification process.
- vi. Prior to scheduling a site visit, Provider must submit all requested materials to the BHCS QA Office which includes, but is not limited to, the following:
  - a. A current fire clearance certificate for the Provider's program site address.
  - b. National Provider Identification (NPI) number which reflects the Provider's correct program name and program site address.
  - c. A copy of the Provider's policies and procedures as listed in the DHCS Provider Site Re/Certification Protocol.

# Highlights from QA Medi-Cal Site Certification Policy and Procedure (P&P)

- ix. Provider must maintain a current fire clearance (see definition) certificate in order to continue to claim to Medi-Cal and shall submit proof of a current fire clearance to the BHCS QA Office within 30 days prior to expiration.

[http://www.acbhcs.org/providers/QA/docs/qa\\_manual/16-7\\_FIRE\\_CLEAR\\_NOTIIF\\_w\\_FORM.pdf](http://www.acbhcs.org/providers/QA/docs/qa_manual/16-7_FIRE_CLEAR_NOTIIF_w_FORM.pdf)

A fire clearance is valid for one year unless otherwise indicated on the fire clearance document. A valid fire clearance document includes the following:

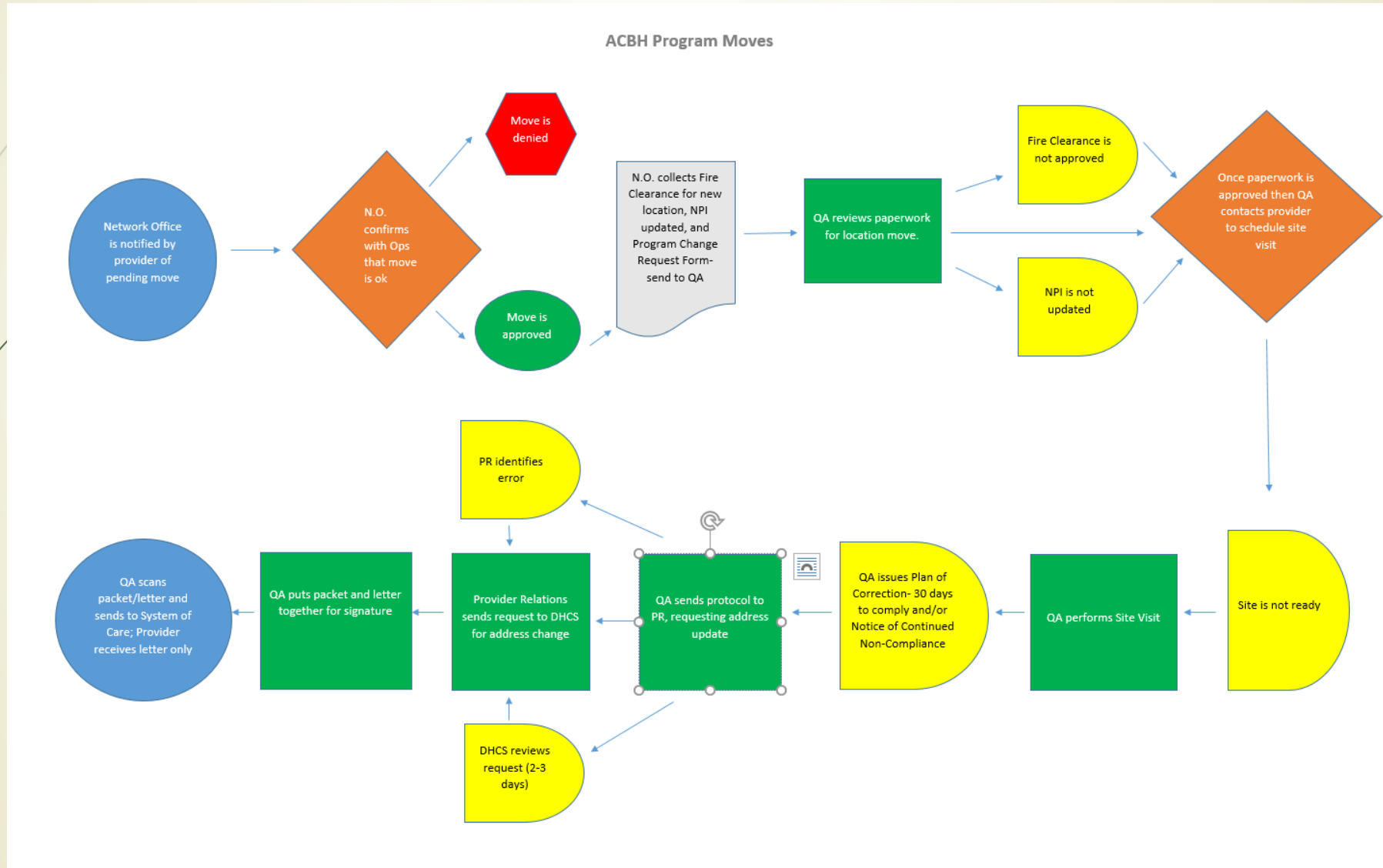
- Name of the fire district jurisdiction
- Signature of official
- Date of inspection
- Address of site inspected.



# Medi-Cal Site Certifications During COVID-19 Emergency

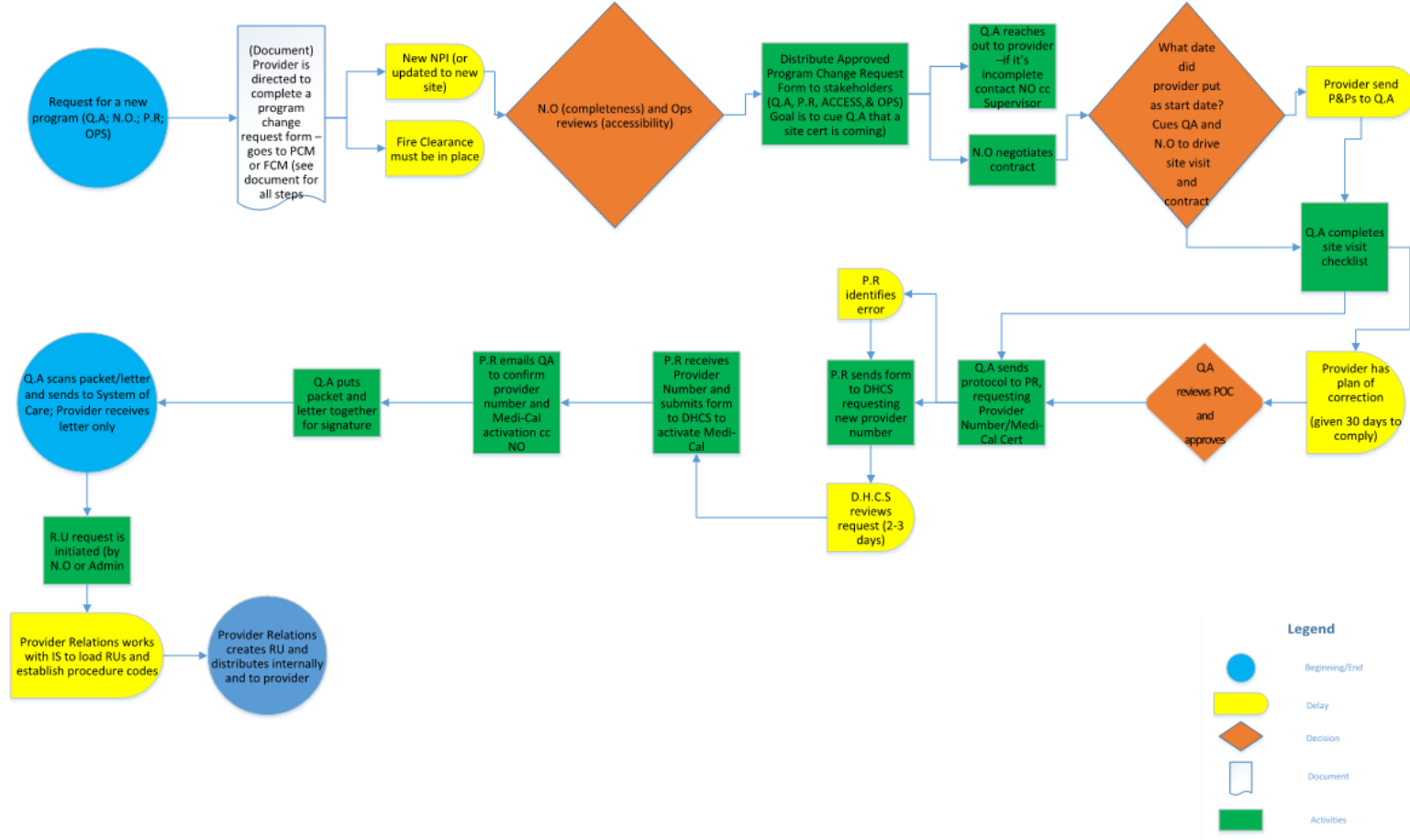
- ▶ **Refer to April 13, 2020 Memo**
  - ▶ **DHCS Temporary Streamlined Process**
  - ▶ **Waiving onsite review and fire clearance**
  - ▶ **We are requesting providers submit missing items 90 days post-emergency to complete their application**
- ▶ **COVID-19 Waiver Site Certification Insert**
  - ▶ **QA memorializes items that will be due upon lifting of the public health emergency (i.e. onsite review, fire clearance)**

# Site Certification Workflow



# Site Certification Workflow

## ACBH Request for a New Program/Program Change







# Questions?

- ▶ **Email QA Site Certification Team:  
SiteCertification@acgov.org**