The purpose of this handbook is to inform Network Providers on what to expect before, during, and after monitoring by Central Florida Cares.

Network Monitoring Handbook

CENTRAL FLORIDA Cares
behavioral health managing entity

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INTRODUCTION

It is the policy[1] of Central Florida Cares, Inc. (CFC) to monitor its provider network to ensure compliance with laws and regulations, negotiated program descriptions, clinical quality, and contract requirements. Frequency of monitoring is determined by the annual risk assessment performed at the beginning of each fiscal year considering the Department of Children and Families (Department) contractual requirements for monitoring subcontractors which include:

C.1.3.1.2.1 At least once every three years, for Network Service Providers with national accreditation,

C.1.3.1.2.2 At least annually for Network Services Providers without national accreditation for which the subcontract includes any level of residential or inpatient services, and

C.1.3.1.2.3 At least biennially for Network Service Providers without national accreditation for which the subcontract does not include any level of residential or inpatient services or does not include any client services.

CFC monitoring tools and the Network Monitoring Handbook are available on the CFC website to assist Network Providers (subcontractors) in understanding the monitoring process and planning operations to be successful in complying with requirements.

RISK ASSESSMENT

It is the policy[2] of Central Florida Cares (CFC), Inc., to assess each subcontractor annually to determine their level of risk utilizing the Subcontractor Risk Assessment tool. The level of risk assessed will be utilized in the development of the subcontracted provider monitoring schedule.

Risk factors include:

- Dollar value of the subcontract
- Financial Ratios calculated from latest Independent Audit
- Single Audit deficiencies/findings/recommendations

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[1] See Appendix A
[2] See Appendix A

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- Nature of services (type and intensity)
- Key Organizational Change
- Incident Reports
- Past monitoring results
- Data submission
- Funding utilization
- Performance Measures
- Accreditation Status
- Date of Last Contract Monitoring
- Historical Corrective Action Plans

MONITORING SCHEDULE
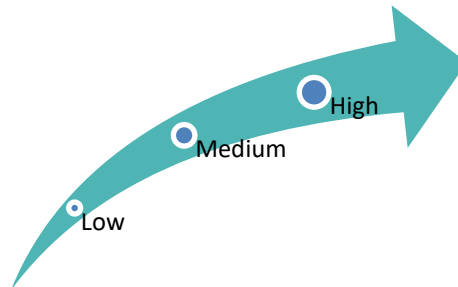
Subcontractors will be assigned a risk level of low, medium, or high calculated by the Risk Assessment Tool. During the duration of the contract, all subcontractors will be monitored, however, subcontractors deemed high risk will be scheduled more frequently than subcontractors deemed low risk. The monitoring scope will vary based on service provision, identified issues, and the Department Guidance Documents.

PRE-MONITORING ACTIVITIES
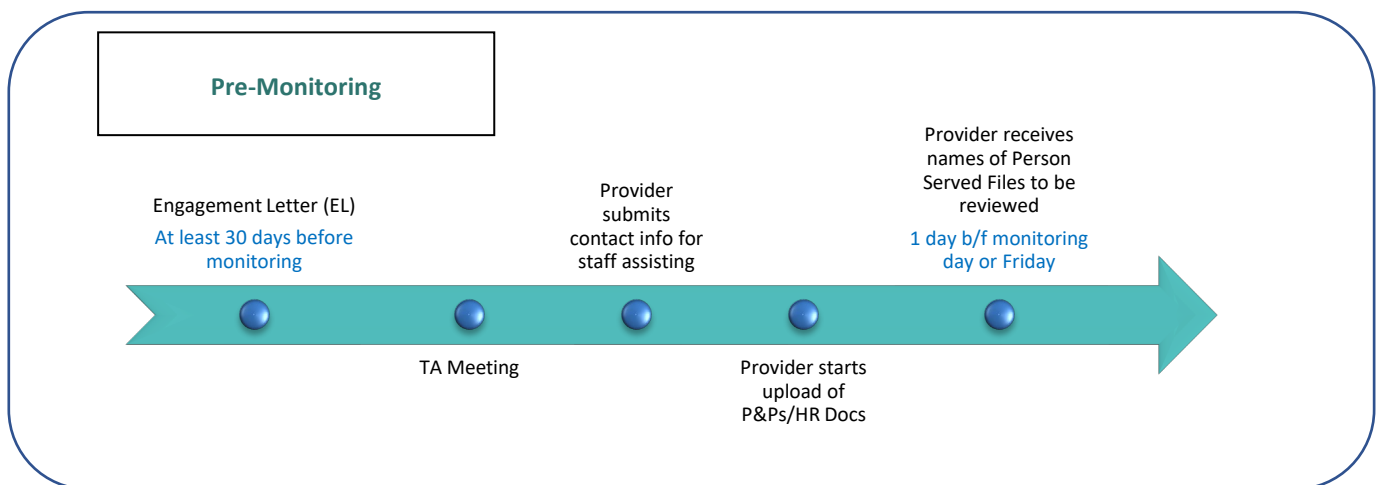
CENTRAL FLORIDA CARES

The CFC Compliance Department takes the lead and assembles a Monitoring Team to develop the scope of the monitoring and establish the sample size of records to be reviewed. Other activities include:

- The assigned Contract Manager is responsible for obtaining, distributing, and presenting to the Monitoring Team any external monitoring, corrective action plans,

licensure, and/or accreditation reports from reviews conducted within the past 12-36 months.

- Reviewing internal monitoring reports, corrective action plan follow-ups, complaints, performance measures, burn rates, mergers, acquisitions, changes in key administrative personnel, and any other variable that may influence changes in service provision.

- Based on the Monitoring Team's review outcome, the Compliance Department Monitoring Lead submits to the Provider the engagement letter at least 30 days prior to the monitoring. This would include the scope, sample size, establishing roles and responsibilities of the Monitoring Team.

- The Compliance Department takes the lead in coordinating the specified time that the monitoring will take place. Each individual CFC Subject Matter Expert (SME) assigned to a particular portion of the scope will coordinate with the designated subcontractor SME the exact dates and times within the allocated monitoring period as well as the document review method (screen share, Electronic Health Record access, document upload, etc.).

- Conducting with the subcontractor a Pre-Monitoring Technical Assistance Video Meeting to set up clear expectations and to answer any questions the subcontractor may have. This should include all subcontractor staff assigned to assist with any portion of the monitoring scope.

- Ensuring the Conflict-of-Interest form is signed by the CFC Monitoring Team.

- One business day prior to the start of the monitoring, send to the subcontractor a Person Served list and covered service included in the scope.

Pre-Monitoring

Engagement Letter (EL)
At least 30 days before monitoring

TA Meeting

Provider submits contact info for staff assisting

Provider starts upload of P&Ps/HR Docs

Provider receives names of Person Served Files to be reviewed
1 day b/f monitoring day or Friday

NETWORK PROVIDER (SUBCONTRACTOR)

It is highly recommended that the subcontractor assigns a single point of contact for the duration of the monitoring process, from preliminary activities through closure of a corrective action plan. This person, usually the subcontractor's contract manager, should be available by phone or email and present for monitoring.

Activities expected of the single point of contact at this stage include:

- Coordinate with each CFC SME in terms of dates, times, document submission, and platforms for virtual meetings. If there is a face-to-face meeting, confirm the location(s) of the site visit.
- Provide upon request any external monitoring, licensure, and/or accreditation reports from reviews conducted within the past 12-36 months.
- Provide any other lists, materials, policy/procedures, or documents upon request .
- Review and distribute to pertinent staff the monitoring scope, this monitoring handbook, and the CFC Monitoring Tools, which are available on the CFC website. **This is a critical step in ensuring the monitoring goes smoothly and efficiently**.

Coordinate with the subcontractor's internal team that will be assisting with the monitoring to ensure they understand the process, logistics and they are prepared.

MONITORING ACTIVITIES

ENTRANCE CONFERENCE

Introductions

Schedule and Process

Scope

Q & A
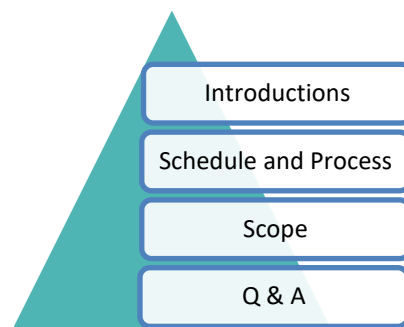
An entrance conference will occur before the monitoring begins. The Compliance Department Monitoring Team Lead will facilitate the meeting. The CFC Monitoring Team will be present at the entrance conference. The subcontractor should have present t. assigned single point of c. act, leadership, and any o. r individuals designated to assist

with the monitor. The main purpose of the meeting will be to introduce the team, finalize pending details related to the schedule, process, scope, and discuss any questions the subcontractor may still have about the monitoring.

Though greatly appreciated, please refrain from supplying free refreshments or gifts during face-to-face site visits. Gratuitous items may create the appearance of impropriety, which is against CFC ethical standards. CFC staff may purchase refreshments from the -subcontractor at fair market value if necessary or may bring their own refreshments or make other arrangements.

MONITORING

Team:

The CFC Monitoring Team will consist of a Lead Monitor and subject matter experts (SME) from the following CFC Departments:

- Contracts
- Compliance
- Finance
- Data
- System of Care

Length of Monitoring:

The monitoring could last anywhere from one day to one week or more depending on the scope and volume of records to be reviewed. There is also the possibility that the length may change once the monitoring commences, regardless of what was discussed during the pre-site monitoring meeting. If that occurs, the Lead Monitor will notify the subcontractor Single Point of Contact of the change.

Environment:

Face-to-face onsite visit - A private conference room or vacant office is necessary for the Monitoring Team to be able to work without disrupting subcontractor operations. Additionally, an environment absent of distractions will allow the team to complete the site visit timely and accurately. Access to wireless internet is preferred, but not mandatory.

Virtual Onsite - Access to a virtual platform for document sharing, or remote electronic health record (E.H.R) access may be required based on previously agreed terms. A private room may be needed to conduct staff or person served interviews, if applicable.

Person Served Record Access: If person served records need to be reviewed, the subcontractor must make those charts available in a timely manner either by providing access to the electronic health record or by screen share.

Method:

The specific agenda for the monitoring will be presented during the Entrance Conference. However, it can usually be expected for a combination of the following to occur during each monitoring:

- Entrance Conference
- Review of Policies and Procedures
- Review of Personnel and training records
- Review of Person Served Clinical files (via screen share or via electronic health record) and Service Activity Logs
- Review of Incident Report log
- Review of Complaints and Grievance log
- Interviews with Persons Served and Staff
- Tour of Facility
- Observation of data, financial, and billing processes
- Secret Shopper Calls
- Incidentals
- Performance Measures
- HIPAA and Confidentiality
- Outcomes
- Auxiliary Aid Services
- Exit Conference

The CFC Monitoring Team will make every effort to:

- Create as little disruption to the subcontractor's operations as possible while on site.
- Update the monitoring plan to include the scope, as needed, and communicate this to the subcontractor Single Point of Contact.
- Communicate frequently with subcontractor Single Point of Contact as well as staff to ensure expectations have been clearly communicated prior to the Exit Conference.
- Notify the Single Point of Contact the progress made each day.

Activities expected of the subcontractor Single Point of Contact at this stage include:

- Coordinate with the CFC Lead Monitor in terms of all on-site activities.

- Function as the main liaison between the CFC Monitoring Team and the subcontractor's staff during the site monitoring.
- Review and distribute completed tools to other Provider staff, as necessary.
- Provide any missing documents as outlined on completed tools preferably as soon as possible to allow review before the exit conference. The exit conference officially ends the monitoring. Any documents or requested information not provided by the exit conference will be accepted as part of a corrective action plan.
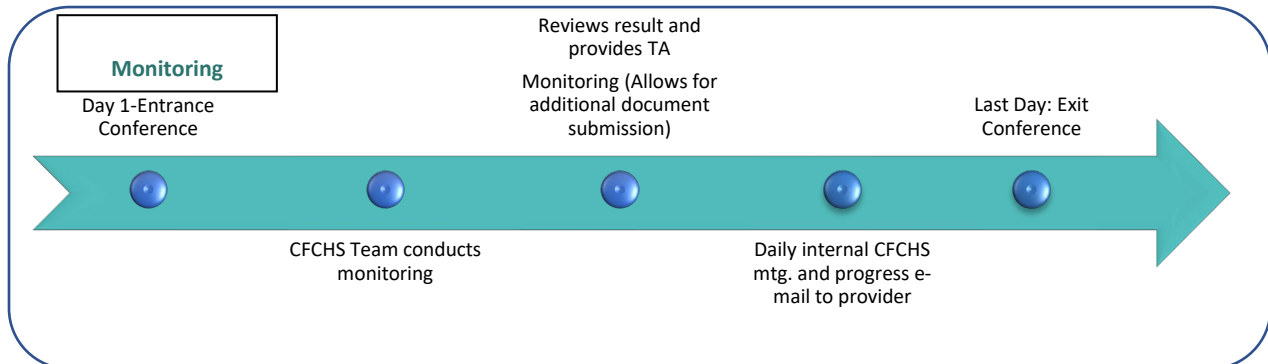
EXIT CONFERENCE
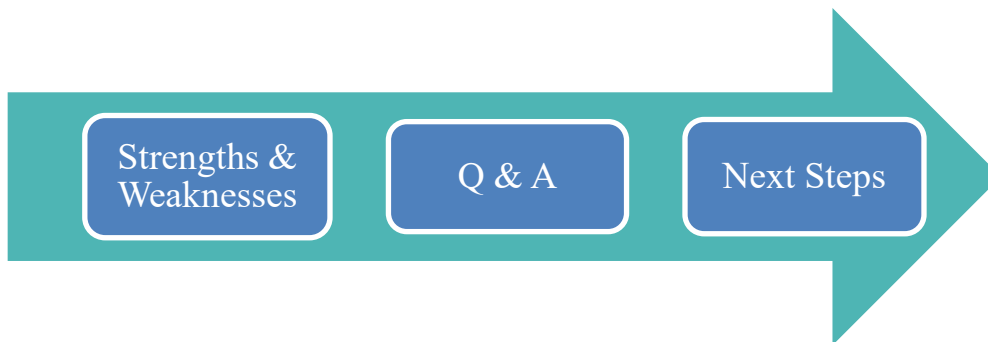
An exit conference will occur at the conclusion of the monitoring, after the CFC Monitoring Team has met to organize and clarify all work papers with the CFC Lead Monitor. The exit conference should last no longer than 60 minutes, depending on the scope of the monitoring. The CFC Compliance Monitoring Team Lead facilitate the meeting. If available or necessary, the entire CFC Monitoring Team will be present, either face to face, virtually, by phone, or a combination. The main purpose of the meeting will be to summarize the strengths and weaknesses discovered during the monitoring, provide opportunities for any final questions and answers, and to discuss a timeline for the next steps.

Activities expected of the subcontractor Single Point of Contact at this stage include:

- Gather pertinent subcontractor staff for the Exit Conference.
- Coordinate with the CFC Lead Monitor in terms of all post-monitoring activities.
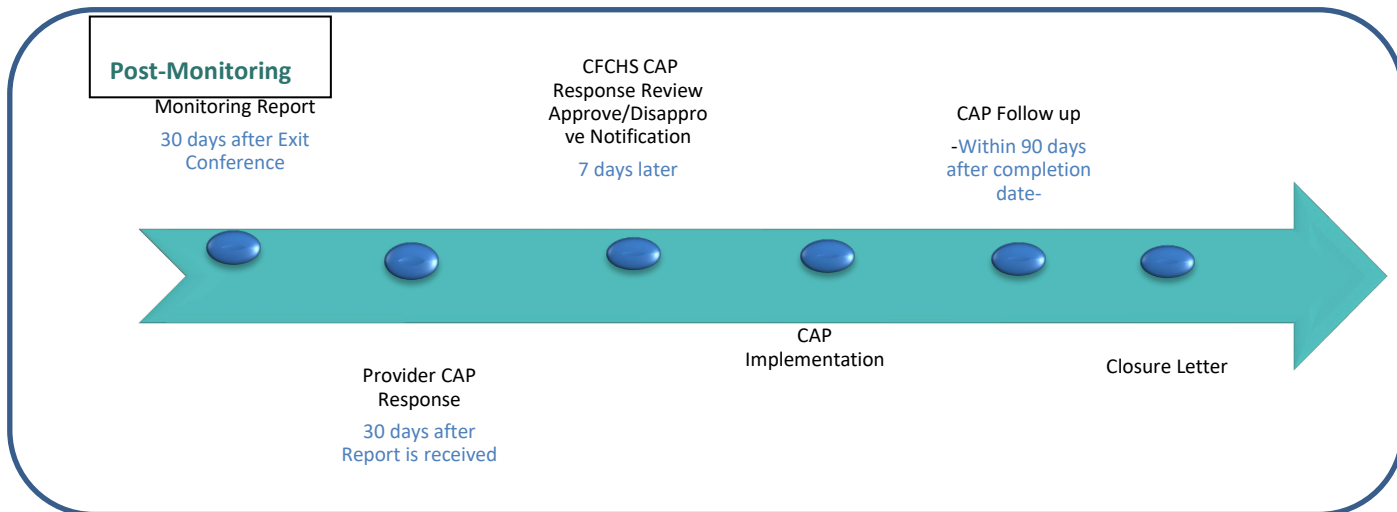
NOTE: The Exit Conference marks the end of the monitoring. Any findings reported at the Exit Conference cannot be disputed or further negotiated. Therefore, CFC encourages subcontractors to communicate any questions, concerns, or disputes to the CFC Monitoring Team DURING the monitoring. In the same manner, the CFC monitoring team will communicate all questions, concerns, and findings to the subcontractor DURING the monitoring, ensuring a fully transparent and open process.

POSTMONITORING ACTIVITIES

After the Exit Conference, the Lead Monitor will conduct the following activities:

- Coordinate finalizing the report and obtain all appropriate signatures, including the CFC Monitoring Team and CFC management.
- Deliver the report to the provider within thirty (30) calendar days of the Exit Conference.
- Request provider response to the report within thirty (30) calendar days of receipt of report, unless another due date is specified. **Corrective actions due to safety issues must be submitted and implemented immediately upon discovery**. The subcontractor response must include specific steps and dates to implement the corrective action plan.
- CFC Monitoring Lead will distribute any corrective action plan responses to the appropriate CFC Monitoring Team for review.
- Within seven (7) business days of receipt of the Provider CAP response, CFC will notify in writing an acceptance or rejection of CAP response.
- CAP follow up should take place within 90 days after the completion date established for each corrective action plan. This follow-up can be via desk review, virtually or on-site
- Once the CAP is deemed 'Satisfactory,' the provider will receive a Monitoring Closure Letter.

- Report results to CFC Management Team and CFC Board Compliance Committee

Post-Monitoring

Monitoring Report

30 days after Exit Conference

Provider CAP Response

30 days after Report is received

CFCHS CAP Response Review Approve/Disapprove Notification

7 days later

CAP Implementation

CAP Follow up

-Within 90 days after completion date-

Closure Letter

REQUIREMENTS

All subcontractors are required to abide by the following[3] , and compliance will be evaluated during the monitoring:

- The subcontract between CFC and the subcontractor
- Contract GHME2 and all amendments which can be found at
  https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=600000&ContractId=GHME2.
- The submitted and approved Provider Program Description(s)
- Regulatory Authorities to include but not limited to:
  - Florida Administrative Codes
  - DCF CF Operating Procedures
  - DCF Guidance Documents
  - Florida Statutes
  - Federal Regulations

REGULATORY HYPERLINKS

Below is a listing of the Florida Administrative Codes that apply to the Department of Children and Families funded programs. Copies of these rules may be obtained by

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[3] This list is not exhaustive of all required laws, rules, and regulations that a provider must follow.

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clicking on the hyperlinks in the "Chapter No." column or from the Department of State website (https://www.flrules.org/default.asp).

Chapter No.	Chapter Title
	FLORIDA ADMINSTRATIVE CODES
65E-4	Community Mental Health Regulation
65E-5	Mental Health Act Regulation
65E-9	Licensure of Residential Treatment Centers
65E-10	Psychotic and Emotionally Disturbed Children - Purchase of Residential Services Rules
65E-11	Behavioral Health Services (Title XXI)
65E-12	Public Health Crisis Stabilization Units and Short-Term Residential Treatment Programs
65E-14	Community Substance Abuse and Mental Health Services - Financial Rules
65E-16	Indigent Psychiatric Medication Program
65E-20	Forensic Services Act Regulation
65E-25	Sexually Violent Predator Program
65E-26	Substance Abuse and Mental Health Priority Populations and Services
65D-30	Substance Abuse Services Office
58A-5	Assisted Living Facilities
	FLORIDA STATUES
394	Mental Health
397	Substance Abuse Services
408	Health Care Administration
427	Special Transportation and Communication Services
435	Employment Screening
	DCF INCORPORATED GUIDANCE DOCUMENTS (ME TEMPLATES) \ Managing Entities FY25-26 Templates | Florida DCF Note: Please choose the correct fiscal year by scrolling to the ME templates.
	42 Guidance Documents posted on the DCF Website

	CF Operating Procedures Policies & Procedures | Florida DCF (myflfamilies.com)
40-5	Acquisition of Vehicles for Transporting Disadvantage Clients
50-2	Security of Data and Information Technology Resources
60-10	Auxiliary Aids and Services for Persons Who Are Deaf or Hard-of-Hearing
60-16	Methods of Administration-Equal Opportunity in Service Delivery
60-17	Chapter 7 HIPAA Breach Notification Procedure
60-25	Employee Security Background Screening
155-01-65	Mental Health and Substance Use
170-3	Prevention, Reporting and Services to Missing Children
180-4	Mandatory Reporting to the Inspector General
	Incident Reporting and Analysis System (IRAS)
215-7	Child Fatality Notification Requirements
	CODE OF FEDERAL REGULATIONS
20 CFR	Employees' Benefits
45 CFR	Public Welfare
31 CFR	Money and Finance: Treasury
	OTHER
	Executive Order No. 11-116
	Section 504 ADA
	Public Health Service Act Title V Sec. 522.290cc-22 (b)(7) A)

MONITORING TOOLS AND PROTOCOLS

FORMAT

All CFC Monitoring Tools can be found on the CFC website under [Network Monitoring](#). Each Monitoring tool is labeled for the program or service being monitored[4].

Each monitoring tool contains a heading where the Monitoring Team will record the following information:

- Reviewer Name
- Date
- Provider Name

Each monitoring tool lists the reference and the requirements to be assessed for compliance. From left to right on each tool you will find the following columns:

- Citation: Indicates the reference citation from law, rule, policy, or contract
- Requirement: the verbiage of the citation to be tested during monitoring.
- Record one, record two, Record N: The monitoring team will use the columns to document a record identifier and compliance status with the requirement.
- Comments: This column is for pertinent notations about compliance or non-compliance.

SCORING

Compliance with each requirement will be scored using the following point system:

- Yes = 1 point
- No = 0 points
- N/A = will not be figured into the denominator of the total score

Compliance rate for an individual tool will be calculated as follows:

1. Sum the points earned for each requirement.
2. Divide the total points earned by the number of requirements applicable.

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[4] See Appendix B

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Thresholds:

- 85% or above – full compliance
- 84% or below – requires a corrective action plan.

Scoring exception: If any one requirement on a tool scores 84% or below, it is up to the discretion of the Monitoring Team if a CAP is requested.

Any deficiencies discovered during the monitoring that affect safety will require immediate corrective action by the Provider.

APPENDICES

Appendix A – CFC Policies

1. Subcontractor Risk Assessment
2. Subcontractor Monitoring

Appendix B – CFC Monitoring Tools

1. For all Providers:
   a. Administrative/ Policies and Procedures
   b. Human Resources
   c. Service Validation
   d. Auxiliary Aid
   e. Incident Reporting
   f. Performance Measures
   g. HIPPAA Security and Privacy
   h. Fiscal Administrative
   i. Outcomes
   j. Person Served and Staff Interviews
   k. Secret Shopper

2. Program specific:

   a. Block Grant Requirements
   b. Behavioral Health Network (BNET)
   c. Behavioral Health Consultant (BHC) for Substance Use
   d. Children's Care Coordination
   e. Adult Care Coordination
   f. Community Action Treatment (CAT) Team
   g. Child Welfare Integration Protocol

h. Civil / Forensic Case Management
i. Clinical Performance Measures
j. Dependency Outpatient Treatment Team (DOTT)
k. Florida Assertive Community Team (FACT)
l. Family Intensive Treatment Team (FITT)
m. Mental Health Residential Treatment
n. Mental Health Crisis Stabilization / Short-Term Residential Treatment
o. Mental Health Functional Family Therapy (FFT) Clinical Records
p. Mental Health Assisted Living Facilities with a Limited Health License (ALF-LMHL)
q. Mobile Response Team (MRT)
r. NAVIGATE Model Fidelity
s. Project for Assistance in Transition from Homelessness (PATH)
t. Recovery Oriented System of Care (ROSC) Services
u. Temporary Assistance for Needy Families (TANF)