



Utah Department of

Health & Human Services

Integrated Healthcare

SUMH G&O Narrative

State Fiscal Year 2027

Local Authority: Weber Human Services

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Overview

The purpose of this document is to meet contract compliance with the Local Authorities (LA) “Evergreen Contract” Article 1.2. “Office Directives” refers to the annual instructions promulgated by Department of Health and Human Services (DHHS), Office of Substance Use and Mental Health (SUMH), identified in Utah Code §26B-5-102(2). These directives describe the use and allowable expenditure of state and federal funds for the purpose of mental health and substance use prevention, crisis, treatment, and recovery support services.

This document is designed to be an addendum to the “Evergreen Contract”. It is updated prior to the start of the State Fiscal Year and may be updated during the State Fiscal Year when approved by the SUMH director or designee. DHHS will alert LA leadership via email to any updates to this document after the start of the State Fiscal Year. The LA is responsible to review both the “Evergreen Contract” and this document to ensure contract compliance.

Governance and Oversight (G&O)

General Auditing

Describe how auditing will be conducted, what items will be monitored and how required documentation will be kept up to date. [State Code 26-B-5-102\(2\)\(ee\)](#)

WHS maintains very few subcontracts for treatment services as services are typically delivered by staff that are directly employed by WHS. The WHS Contract Specialist is responsible for initiating, maintaining and monitoring all subcontracts for treatment of a mental health or substance use disorder, including MAT. She maintains a log of all contracts to track the contract expiration date (if applicable), the DHS treatment license expiration date (if applicable), and the liability insurance expiration date. She will contact the subcontractor when those dates are approaching to determine if the contract needs to be continued and if so to update the supporting documentation. She also conducts an annual audit, using the audit template provided by the OSUMH when applicable, of the entity and a sample of services/charts from the contractor to ensure that the services are appropriately delivered and documented in compliance with Medicaid and OSUMH standards. As we are requesting the annual documentation for audits, we include a request for the conflict of interest forms, which is stored in SharePoint along with the other documentation associated with the contract. A random sample of about 10% of billed services are selected for review. A letter is sent to the contractor with the service dates/clients selected and they are asked to submit documentation of those services. A brief summary of the audit results is kept in SharePoint. The documentation containing the PHI is scanned and stored on a network share drive with a password.

Fiscal Auditing

The [Service Code Auditing Guidelines](#) identify the mental health and substance use disorder treatment service codes that require documentation of services to be uploaded by spreadsheet for the audit. Services that can not be described by CPT/HCPSC code such as prevention, FRF and MCV (MCOT Vehicle costs) can be audited by providing a summary of invoices billed to Kissflow. There shall be a tab for each funding code utilized in the fiscal year.

Service Code Auditing Guidelines
The service code auditing guidelines are located at the end of the FFY for the Fiscal Year. These are the guidelines that the auditor uses to justify year end costs:
Has the LA read the guidelines provided in the FFH? Yes
Are there any issues with complying with these guidelines with any service code allocated to you for FY27? No
If there are any issues please identify each code and give an explanation: NA

Subcontractor Auditing and Tools
A list of subcontractors/subrecipients shall be provided prior to the audit. The subcontractor monitoring tool developed by SUMH shall be used in monitoring subcontractors. Subcontractor audits should be designed to evaluate the quality of services being provided, identify areas for improvement or training of subcontractors to help improve outcomes, ensure compliance with statute and office directives and provide accountability for state and federal funding. Explain how you use the provided state monitoring and other tools developed to fulfill the requirement of annually monitoring each subcontracted provider. (See FY27 Office Directives Subcontractor Monitoring Review (1) page (5))
See WHS Subcontractor Monitoring and Review Protocol

Mechanisms for Citizen Input
Are you currently receiving public input and comments in the development of the annual area plan and budgets? State Code 17-77-301(5)(a)(vii), 17-77-201(5)(g)
Yes
How do you, or will you, solicit public comments and input on your annual area plan and budgets?
Area plans and budgets are presented in a public Weber Human Services Board Meeting . Public comments are allowed in each board meeting as a regular agenda item.
How do you track this public input? (Please provide supporting docs)

Public input would be included in the board minutes that are submitted during our site visit.
Did you receive any input for the FY27 Area Plan?
No.
Who are the local advocates and coalitions that will be invited to the public review of the Area Plans and Budgets for FY27?
Our agendas are posted on the State's Open Meetings website. Anyone from the public is invited to attend.
If none were invited to participate, who are the local coalitions and advocates that should be invited to participate this year for FY27?
Anyone from the public is invited to attend.

Policies Procedures and Auditing

Per the [FY27 SUMH Office Directives](#), each LA shall develop, implement, and maintain written policies and procedures that encompass all requirements, including:

- i) governance and oversight,
- ii) substance use disorder prevention services,
- iii) suicide prevention services,
- iv) crisis services,
- v) mental health treatment services,
- vi) substance use disorder treatment services,
- vii) recovery support services,
- viii) data reporting, and
- ix) grant and contract reporting.

Does the Local Authority have the policies above in place? Yes
Are the policies up to date (5 years or less)? Yes

Please provide these policies with your uploads

Additional Policy Auditing
Does the Local Authority have the policies below in place? No (not sure what policies this is referring to) See A-F below . They are required policies. We uploaded "WHS Subcontractor Monitoring and Review Protocol" as well as "WHS Protocol-correctiveactionplan" that should suffice for this area.
Are the policies up to date (5 years or less)? yes
Please provide these policies with your uploads

The following audit items are located in the [SUMH FY27 Monitoring Handbook](#).

- A) Corrective Action Policy
- B) Standardized finding format
- C) Standardized CAP Tool/Root Cause Format
- D) Standardized Operating Procedure for CAP's
- E) Quality and Effectiveness Standards for Subcontractor Monitoring
- F) A Link to the FY27 Standardized Audit Tool