



Kern County Behavioral Health Board System Quality Improvement Committee

Monday, November 17, 2025

4:00-5:00 PM

In-Person Meeting Westchester Training Room

Meeting Minutes

The mission of the SQIC, as a QIC Subcommittee, is to review and evaluate Mental Health Plan (MHP) activities and where appropriate, make recommendations regarding policy decisions, institute needed Quality Improvement (QI) actions, or/and ensure follow-up of QI processes.

This meeting is recorded

Attendees:

Adan Valdez Luna	Camden Trapp	LaTisha Williams	Mariliea Prado
Alex Lopez	Heather Plaza	Lesleigh Davis	Rosi Granados
Arthur Morato	Hollie Davis	Marcie Lesser	Summer Baker
Belinda Vieyra	Juan Gonzalez Ramos	Maria Najera	Tammy Cates
Breanna Barajas	Kelsi Trolio	Maria Vasquez	

- I. Welcome and Introductions – David Kessler introduced himself and welcomed the attendees.
- II. Review & approval of the previous meeting minutes – Rosi Granados motioned to accept; Juan Gonzalez Ramos seconded.
- III. Public Comment – No public comments were made at this time.
- IV. Unfinished and New Business – There was no unfinished or new business at this time.
- V. Guest Presenters
 - A. Network Adequacy – Kelsi Trolio
 1. Shared and discussed handout titled Grievance & Appeal System, which covered; What is the Grievance and Appeal System, What is a Grievance, What is an Appeal, How to file a Grievance or Appeal, Grievance Tips, Tips for Resolving Grievances, and Grievance & Appeals Data.
 - a. The Grievance and Appeals system are a process through DHCS to assist Medi-Cal beneficiaries with resolving their concerns.
 - b. Grievance is any expression of dissatisfaction about any matter of a beneficiary’s mental health or substance use disorder treatment, not linked to an Adverse Benefit Determination
 - c. Grievances can be linked but not limited to quality of care of services provided, staff behavior concerns, and more as listed in handout.
 - d. An appeal is a review by the Plan of an Adverse Benefit Determination, which can only be filed in response to a Notice Of Adverse Benefit Determination (NOABD) letter.
 - e. Beneficiaries can file in a number of ways, but the easiest way is by completing a form that is provided by Kern BHRS as well as in contract providers’ lobbies. These forms require no postage paid, just filled out and mailed to the Patients’ Rights Office. Beneficiaries can also contact Patients’ Rights Office directly, or they also can go directly to Supervisors/Contract Providers who can submit the grievance or appeal into the web application.
 - f. A complaint should be filed whether it is formal or informal grievance. Even if it is just an expression of dissatisfaction, still file. Data collected is tracked and analyzed for quarterly reviews of any trends or concerns seen.
 - g. Supervisors, please review handout for tips for resolving grievances and be mindful that beneficiaries do receive a copy of your resolution.

- h. Quality Improvement Goal is 98% of all grievances and appeals will be resolved within 30 calendars from the complaint, which was previously 90 calendar days. Please do not delay in turning these in.

B. State Fair Hearings – Selma Gonzalez

- 1. Shared and discussed handout titled State Fair Hearings, which covered; What is a State Fair Hearing, Why Do We Have State Fair Hearings, When Can a Client Request a Hearing, What Happens During the Hearing, What We Provide to Clients, State Fair Hearings FY 25-26, Requests Over the Years, and Our Commitment.
 - a. State Fairing Hearings are a part of Medi-Cal beneficiaries entitlement program. Clients can appeal a decision and request a hearing with the hearing Officer as to why they feel they are entitled to the services that were denied, delayed, or if they disagree with the changes to their care.
 - i. QID will get contacted that a client wants a State Fair Hearing. QID will then contact all teams within the system that made the decision that is being appealed, and they will defend their decision in front of the hearing Officer.
 - b. FY25-26 Qtrs. 1 & 2 had 0 State Fair Hearing submissions.
 - c. FY24-25 did have 10 hearings but they have been resolved.
 - d. Our aim is to resolve issues before they escalate to hearings, when possible, but we make sure to stand by our clients.

VI. Kern Behavioral Health and Recovery Services – Current Projects and Issues

A. Quality Improvement Division – Lesleigh Davis

- 1. QID is participating in the Integrated Plan Submission, which is streaming from the behavioral health services administration transformation.
- 2. Continued work is being accomplished with the 23 indicators provided by the state and the HEDIS Measures.

B. Department Supports Administration – No longer an Administration

C. Substance Use Division – Alexander Lopez

- 1. Currently working with JPPS, as part of the Justice Incentive, to screen Adolescents in-person.
 - a. The goal is to link them to services before they are discharged from the site. We are waiting on clearance as of now, but referrals have already started to come in.

D. Adult System of Care (ASOC) –

- 1. No one present for updates.

E. Children’s System of Care (CSOC) – Rosi Granados

- 1. Youth Quest is opening a girl’s home, Short Term Residential Treatment Program (STRTP).
 - a. They are already licensed and should be taking in girls within a month.

F. Kern Linkage Division – Arthur Morato

- 1. The Great Point in Time Count is coming on January 28th, 2025.
 - a. This event provides an important opportunity for our community to better understand the needs of individuals experiencing homelessness. We are currently seeking volunteers.
- 2. There will be pet clinic held on December 2nd, 2025, at the “M” Street Navigation Center, and it is open to the homeless members of the community.
- 3. Psych testing referrals are open.
 - a. For additional help with psych diagnosis of a client, please email Dr. Fauni and Christian Campos to schedule.

G. Crisis Services Division – Maria Vasquez

- 1. The only updated impact for Crisis is the implementation of SB43 in January 2026, which will greatly impact the 5150 processes.

H. Medical Services Division –

- 1. No updates at this time.

I. Clinical Plan Services – Juan Gonzalez Ramos

- 1. Cultural Competency Resource Committee has the yearly final draft submission for Cultural Competence Plan, which will be submitted by December 2025, and will be presented to this committee in the near future.

VII. Mental Health Providers – Current Projects and Issues

A. Clarida –

- 1. No one present for updates

- B. Child Guidance Clinic (CGC) – Marcie Lesser
 - 1. SB43 expansion of the criteria and what it will do for the community.
- C. Clinica Sierra Vista (CSV) – Heather Plaza
 - 1. No updates at this time.

VIII. Substance Use Division Providers – Current Projects and Issues

- A. Clarvida –
 - 1. No one present for updates.
- B. Clinica Sierra Vista (CSV) – Heather Plaza
 - 1. Bakersfield Ebony has the mobile clinic coming out to help with attaining physicals as this continues to be a barrier in Bakersfield.
 - a. It was successful with roughly 34 clients completed.
 - b. This event will be held December 5th from 8 A.M. -12 P.M.

IX. Recommendations for Quality Improvement Committee (QIC) – There were no recommendations at this time.

X. Adjourn – Next scheduled meeting: **January 26, 2026, at 4:00-5:00 PM**, will be held in-person at the Westchester

This meeting is MH UR Code 3

Grievance & Appeal System

Presented by:

The Patients' Rights Office

What is the Grievance and Appeal System?

The Grievance and Appeal System is the process through the Department of Health Care Services (DHCS) to assist Medi-Cal beneficiaries with resolving their concerns.

What is a Grievance?

- A grievance is defined as an expression of dissatisfaction about any matter regarding a beneficiary's (client's) mental health or substance use disorder treatment, other than an Adverse Benefit Determination (defined on slide).

Grievances may include, but are not limited to

- The quality of care or services provided
 - Staff behavior concerns
- A Change of Provider request due to dissatisfaction with treatment
 - Cultural Appropriateness
- Concerns with prescribed medication

What is an Appeal?

- An appeal is a review by the Plan (Kern BHRS) of an Adverse Benefit Determination.
- An appeal can only be filed in response to a Notice of Adverse Benefit Determination (NOABD) letter.

How to file a Grievance or Appeal

- Beneficiaries may file a grievance or appeal by completing a form provided at all Kern BHRS and contract provider lobbies. These forms require no postage and may be sealed and mailed directly to the Patients' Rights Office. If a beneficiary submits the form to provider staff, please interoffice the sealed grievance form to the Patients' Rights Office.
 - Beneficiaries may contact the Patients' Rights Office directly at:
1(844) 360-8250
- Supervisors/Contract Providers may submit a grievance or appeal by submitting the information into the Grievance & Appeal Web Application.

Grievance Tips

- There is no distinction between an informal and formal grievance. A complaint IS the same as a grievance. The word grievance does not have to be stated for the complaint to be logged.
- If a beneficiary expresses dissatisfaction regarding their treatment, but declines to file a grievance, the provider is still required to notify Patients' Rights of the complaint within one day of receiving the beneficiary's concerns.
- The data collected from reported grievances is analyzed and reviewed quarterly to identify quality improvement needs. Without this information, our department would be unable to make necessary improvements or mend gaps in services.
- Reporting or resolving grievances regarding your team or treatment location will not reflect negatively on you.

Tips for Resolving Grievances

Description of Actions

- Clearly state what steps were taken to review and address the grievance.
 - Document attempts to contact the beneficiary
 - Note dates/timelines of actions taken.
 - Reference relevant policy, procedure, or regulation if applicable.

Resolution by Plan or Provider

- State the outcome clearly
 - Describe what was done to resolve the issue
 - Confirm that actions were completed within required timelines.
- Indicate how and when the beneficiary was informed of the outcome (letter, phone call, in person).
 - Use plain, easy-to-understand language appropriate for the beneficiary.

Grievance & Appeals Data

Quality Improvement Goal: 98% of all grievances and appeals will be resolved within 30 calendar days from receipt of complaint.

- FY 25-26 Q1 data shows there was a total of 143 grievances submitted and 1 appeal.
- For Mental Health Division (MH), there were 116 grievances submitted
- For Substance Use Division (SUD) there were 27 grievances submitted

Standards:

- Grievances must be submitted to the office of Patients' Rights within one business day
- Each grievance and appeal will be resolved within 30 days.

Patients' Rights Office Contact Information

BHRSPatientsRights@KernBHRS.org

1 (844) 360-8250



STATE FAIR HEARINGS

By Selma Gonzalez, QID

November 17, 2025



WHAT IS A STATE FAIR HEARING?

Regulation:

Any Medi-Cal or Drug Medi-Cal Organized Delivery System client who does not agree with the plans decision has a right to a “State Hearing”



WHY DO WE HAVE STATE FAIR HEARINGS?

- 1.** Protect Client Rights
- 2.** Safeguard to Promote Justice and Equity

WHEN CAN A CLIENT REQUEST A HEARING?

Clients can request a hearing if they're denied services, experience delays, or disagree with changes to their care.





WHAT HAPPENS DURING THE HEARING?

- Client can submit documents supporting their position.
- An Administrative Judge hears both sides and makes a decision based on the facts.



WHAT WE PROVIDE TO CLIENTS

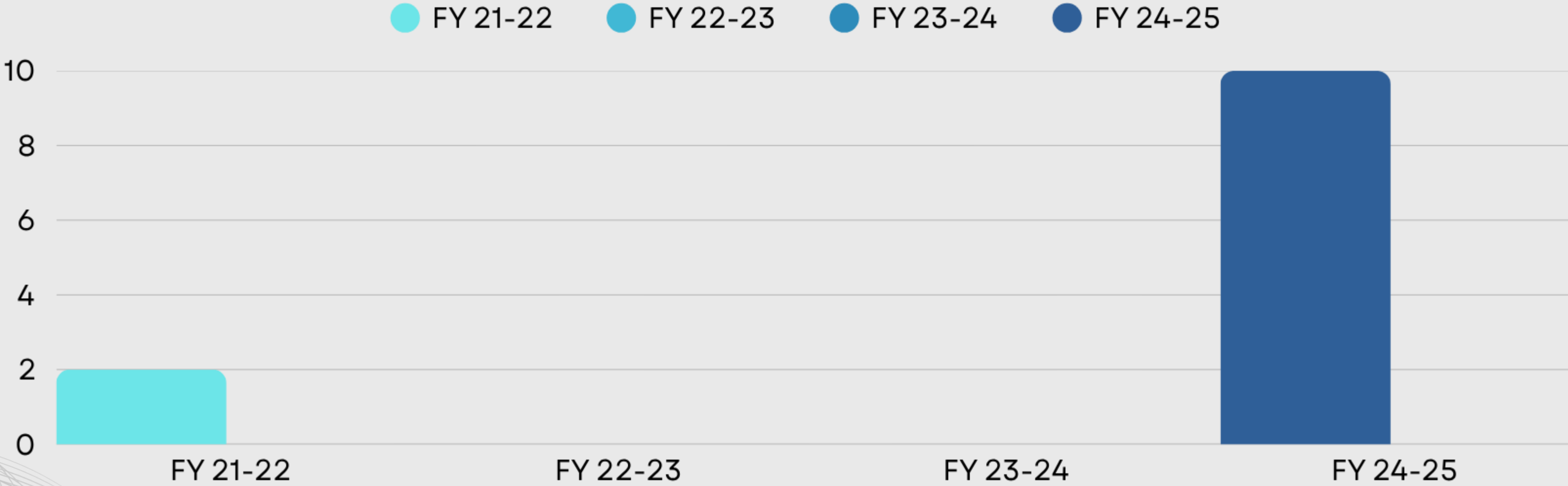
- Clear communication about their rights.
- Assistance preparing documentation
- Coordination of hearing logistics and support throughout the process.

STATE FAIR HEARINGS

FY 25-26

Fiscal Year: 25-26	Quarter 1 Jul-Sept	Quarter 2 Oct-Dec	FY Total
# State Fair Hearing Submissions	0	0	0

REQUESTS OVER THE YEARS





OUR COMMITMENT

- We aim to resolve issues **before** they escalate to hearings whenever possible.
- But when they do, we stand by our clients every step of the way.



THANK YOU

Contact:

Selma Gonzalez, QID

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