

**DEPARTMENT OF MENTAL HEALTH**

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October 8, 1996

**RECEIVED****OCT 21 1996**DEPARTMENT OF MENTAL HEALTH  
Program Support Branch

DMH LETTER NO.: 96-05

TO: LOCAL MENTAL HEALTH DIRECTORS  
LOCAL MENTAL HEALTH PROGRAM CHIEFS  
LOCAL MENTAL HEALTH ADMINISTRATORS  
COUNTY ADMINISTRATIVE OFFICERS  
CHAIRPERSONS, MENTAL HEALTH ADVISORY BOARDS

SUBJECT: EPSDT DAY TREATMENT INTENSIVE PROVIDERS

EXPIRES: Retain Until Rescinded

With the goal of insuring that Early and Periodic Screening, Diagnosis and Treatment (EPSDT) beneficiaries (full scope Medi-Cal beneficiaries under 21 years of age) have access to Medicaid services when medically necessary, the Department of Health Services requested that the Department of Mental Health (DMH) evaluate partial hospitalization services and consider whether such services are included in current state plan services.

DMH determined that the state plan service day treatment intensive has characteristics comparable to partial hospitalization programs including services provided in blocks of time on a daily basis, services rendered to beneficiaries as they exit an inpatient facility, and services designed to assist in maintaining beneficiaries in the community without hospitalization.

Therefore, effective immediately, for the purposes of providing day treatment intensive services to EPSDT eligible beneficiaries in need of system of care services, Fee for Service/Medi-Cal (FFS/MC) hospital outpatient departments operating partial hospitalization programs may be certified as Short Doyle/Medi-Cal (SD/MC) mental health rehabilitation providers if they meet the SD/MC mental health rehabilitation providers certification standards specified in the SD/MC Manual for the Rehabilitation Option and Targeted Case Management. Such providers may not be certified as mental health rehabilitation providers to provide day treatment intensive services to any population other than EPSDT beneficiaries.

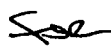
In order for requests for certification to be approved, the county requesting certification of a FFS/MC hospital outpatient departments must specify mechanisms which will ensure that duplicate billing of FFS/MC and SD/MC does not occur and that an adequate audit trail is maintained for review by both the county and DMH. DMH's review of requests for certification of such providers will include assessing the feasibility and accountability of these strategies.

Hospitals providing partial hospitalization and enrolled both as FFS/MC hospital outpatient departments and SD/MC mental health rehabilitation providers will not be certified or reimbursed for any SD/MC service other than day treatment intensive.

If you or your staff have any questions on this matter please contact Bob Cacic, Medi-Cal Oversight North at (916) 654-3607 or Moss Nader, Medi-Cal Oversight South at (310) 868-2275.

Sincerely,



 STEPHEN W. MAYBERG, Ph.D.  
Director

cc: California Mental Health Planning Council  
Chief, Technical Assistance and Training