

1600 9th Street,, Sacramento, CA 95814 (916) 654-2309

August 13, 2008

DMH INFORMATION NOTICE NO.: 08-24

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

## SUBJECT: AUTHORIZATION OF OUT-OF-PLAN SERVICES

The proposed rulemaking package for the Authorization for Out-of-Plan Services was adopted by the California Office of Administrative Law and filed with the Secretary of State on July 11, 2008. The regulations become effective on **August 10, 2008**. This rulemaking package adopts Sections 1610.207.5; 1810.220.5 and amends Section 1830.220(b)(4)(A) of Title 9, California Code of Regulations (CCR).

The regulatory changes are consistent with Senate Bill (SB) 745, (Chapter 811, Statutes of 2000), which added Section 5777.6 to Welfare and Institutions Code (W&IC) requiring local mental health plans (MHPs) to establish a procedure to ensure access to outpatient specialty mental health services for foster children placed outside of their county of origin (adjudication).

Current statute requires each MHP to ensure access to outpatient specialty mental health services for foster children placed out of their county of origin; however, there are no specific time frames that govern the authorization and reimbursement process.

The following changes were made to the regulations:

- Title 9, CCR Section 1810.207.5 was adopted to define which county has legal authority for a specified group of beneficiaries.
- Title 9, CCR Section 1810.220.5 was adopted to define "host county" as it relates to the Foster Care, Adoption Assistance and Kin-GAP programs for mental health services.

Title 9, CCR Section 1830.220(b)(4)(A) was amended to incorporate the following:

 Subsection (1) to require the county of origin to authorize services for a child or youth placed outside his/her county within three (3) working days following the date of request for service and notify the host county and the requesting provider of the authorization decision. Specifically, this citation states the following:

If the MHP of the county of origin documents a need for additional information to evaluate the beneficiary's need for the service, an extension may be granted up to **three (3) working days** from the date the additional information is received, or **14 calendar days** from the receipt of the original Treatment Authorization Request, whichever is less.

- Subsection (2) to require the MHP of the county of origin within 30 calendar days of the date of authorization of service to arrange for reimbursement for the services provided to the child or youth through the host county or requesting provider.
- Subsection (3) to require the MHP of the county of origin and the MHP of the host county to resolve any disagreements through the arbitration process provided in Section 1850.405.

The changes to the regulations constitute a change in the authorization and reimbursement processes MHPs are required to follow to provide out-of-plan services. Therefore, as required by Exhibit A, Attachment 1, Section Y of the MHP contract, MHPs shall submit a revised report for providing out-of-plan services to: Medi-Cal and Health Care Benefits Branch, Department of Mental Health, 1600 9<sup>th</sup> Street, Room 100, Sacramento, CA 95814, within **30 days** from the issuance of this information notice. Although the reports may be provided at a later date, MHPs are required to be in compliance with the regulations as of August 10, 2008.

If you have questions regarding this notice, please contact your County Contract Manager listed on the following internet site: <u>http://www.dmh.ca.gov/docs/CoOpRoster.pdf</u>.

Sincerely,

Original signed by

STEPHEN W. MAYBERG, Ph.D. Director