



State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

February 21, 2014

MHSUDS INFORMATION NOTICE NO.: 14-005

TO: COUNTY ALCOHOL AND DRUG PROGRAM ADMINISTRATORS
COUNTY MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH BOARDS

SUBJECT: LICENSED PROFESSIONAL CLINICAL COUNSELORS AS
QUALIFIED PROVIDERS OF MEDI-CAL SPECIALTY MENTAL
HEALTH SERVICES

REFERENCE: BUSINESS AND PROFESSIONS CODE SECTIONS
4999.10 – 4999.129

The purpose of this Mental Health and Substance Use Disorder Services Information Notice is to inform Mental Health Plans (MHPs) that, effective July 1, 2012, Licensed Professional Clinical Counselors (LPCCs) were added to California's Medicaid State Plan (State Plan) as qualified providers of Targeted Case Management Services and Rehabilitative Mental Health Services, as specified in the State Plan. This information notice also serves to provide additional information about LPCCs as providers of Medi-Cal specialty mental health services. The applicable State Plan sections are Supplement 1 to Attachment 3.1-A, Supplement 3 to Attachment 3.1-A and Supplement 2 to Attachment 3.1-B which are posted on the Department of Health Care Services website, <http://www.dhcs.ca.gov/formsandpubs/laws/Pages/Section3.aspx>.

LPCCs are master's level mental health professionals qualified to perform counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems. Please refer to Business and Professions Code (BPC) Sections 4999.20 – 4999.76 for more information about LPCC scope of practice, licensure, and practice requirements.

Consistent with Welfare and Institutions Code Section 5751.2 and the State plan, an LPCC may be a waived/registered professional who has: (1) registered with the Board of Behavioral Sciences for the purpose of acquiring the supervised professional experience required for licensure, in accordance with applicable statutes and regulations, or (2) been granted a waiver by DHCS as a candidate who was recruited for employment from outside of California, whose experience is sufficient to gain

admission to the appropriate licensing examination but who requires time to make arrangements for and take the appropriate licensing examination.

As specified in the State Plan, LPCCs may provide Targeted Case Management, Mental Health Services, Day Treatment Intensive, Day Rehabilitation, Crisis Intervention, Crisis Stabilization, Adult Residential, Crisis Residential, and Psychiatric Health Facility services, consistent with the scope of practice requirements and when all other requirements for service delivery are met. LPCCs may provide these services as MHP employees, as MHP contracted individual providers, or as employees of MHP contracted organizational providers.

“Professional clinical counseling” as defined in BPC Section 4999.20 does not include the assessment or treatment of couples or families unless the LPCC has completed additional training and education, as specified in BPC Section 4999.20(a)(3), beyond the minimum training and education required for licensure. MHPs are responsible for verifying and ensuring that LPCCs providing Medi-Cal specialty mental health services meet the additional training and education requirements pursuant to BPC Section 4999.20, when they are providing services for which the additional training and education are required. This limitation in the LPCC scope of practice does not restrict LPCCs from working with children.

MHPs should work with their county human resources (or equivalent) departments and county counsel (as necessary) to determine the proper county job classifications in which to hire LPCCs, and the extent to which they may require the additional training and education specified in BPC Section 4999.20(a)(3) as a condition of employment.

As long as there is consistency with the State Plan, MHP contract, and all applicable federal and state laws, LPCCs may direct services, including directly providing Medi-Cal specialty mental health services, acting as clinical team leaders, providing direct or functional supervision of service delivery, and reviewing, approving, and signing client plans. When directing a service, the LPCC also assumes ultimate responsibility for the Medi-Cal specialty mental health service provided, whether or not the LPCC directly provides the service.

DHCS has determined that the provider taxonomy code 101YM0800X (classification: “counselor”/specialization: “Mental Health”) aligns with the definition of an LPCC. MHPs should use taxonomy code 101YM0800X on 837 claims to indicate an LPCC as the rendering provider. This taxonomy code will be added to the list of rendering provider taxonomy codes for which the Short Doyle/Medi-Cal Phase 2 (SD2) claiming system does not require claiming to Medicare prior to Medi-Cal for services provided to

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dually eligible (Medicare and Medi-Cal) beneficiaries. This taxonomy code will also be added to the list of providers for which MHPs may submit claims provided by an individual provider contracted with the MHP as indicated on the 837 claim with "FFS" in the note field. The planned effective date of these SD2 changes and additional information about these system changes will be added to the SD2 System Change schedule available on the DHCS website:

[http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-ShortDoyle2\(SD2\).aspx](http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-ShortDoyle2(SD2).aspx).

DHCS will identify a new provider number for each MHP to use for services provided by contracted individual LPCCs for cost reporting purposes. MHPs do not need to submit provider file update or legal entity file update forms to have an LPCC provider number added to its provider master file list. DHCS will add these provider numbers to the online provider system and will inform MHPs of their new LPCC provider numbers. Questions about this process may be directed to ProviderFile@dhcs.ca.gov.

Questions regarding the content of this information notice or the related State Plan sections may be directed to the DHCS MHSD County Support Unit liaison for your county. A current list of county assignments can be found at: http://www.dhcs.ca.gov/services/MH/Documents/County_Assignments_1-10-2014%20iii.pdf

Sincerely,

Karen Baylor, PhD, LMFT, Deputy Director
Mental Health & Substance Use Disorder Services