



C A L I F O R N I A D E P A R T M E N T O F

Mental Health

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

February 19, 2004

DMH LETTER NO.: 04-04

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

SUBJECT: EARLY AND PERIODIC SCREENING, DIAGNOSIS AND
TREATMENT AND THERAPEUTIC BEHAVIORAL SERVICES
NOTICES AT THE TIME OF EMERGENCY PSYCHIATRIC
ADMISSION TO MENTAL HEALTH PLAN CONTRACT
HOSPITALS

REFERENCE DMH Letter No. 01-07

As described in DMH Letter No. 01-07, the Judgment and Permanent Injunction in Emily Q. v. Bontá (C.D.Cal., 2001, CV 98-4181 AHM (AIJx)), requires that certain notices regarding Early and Periodic Screening, Diagnosis and Treatment (EPSDT) and Therapeutic Behavioral Services (TBS) be provided to full scope Medi-Cal beneficiaries who are under 21 years of age and their representatives. At the time DMH Letter No. 01- 07 was issued, no decision had been made as to how to provide such notices at the time of emergency psychiatric admission to a Mental Health Plan (MHP) contract hospital.

The determination has now been made that, effective immediately, MHPs have the responsibility to provide the EPSDT and TBS notices to any Medi-Cal beneficiary who is under 21 years of age and has been admitted with an emergency psychiatric condition to a hospital with which the MHP has a contract. MHPs are also required to provide these notices to the beneficiary's representative. Copies of the EPSDT and TBS notices are attached for your convenience.

The MHP should design a strategy to accomplish this task in accordance with local needs and resources. Options the MHP may want to consider include:

- Including this notice requirement as a hospital responsibility in contracts with hospitals.

- Delivering the notices to the beneficiary at the hospital when the MHP is notified of the beneficiary's admission.
- Faxing the notices to the beneficiary at the hospital when the MHP is notified of the beneficiary's admission.

MHPs must establish a system for providing the EPSDT and TBS notices within 60 days of the date of this letter. If the MHP intends to establish a permanent system that cannot be implemented within 60 days, the MHP must establish interim procedures whereby the EPSDT and TBS notices are provided pending the development of a permanent system.

DMH may follow up with the MHP to determine how the notice requirement has been implemented. If you have questions or need additional information, please contact your Medi-Cal contract manager in the County Operations Sections below.

DMH County Operations Medi-Cal Contract Managers

Bay Region

Ruth Walz (Regional Lead) Contra Costa, San Francisco, San Mateo, Solano	(707) 252-3168
Douglas Mudgett Marin, Santa Clara, Santa Cruz, Sonoma	(916) 654-3623
Peter Best Alameda, Monterey, Napa, San Benito	(916) 657-3487

Northern Region

Kathleen Carter (Interim) Lassen, Modoc, Plumas, Shasta, Siskiyou, Trinity	(916) 651-6613
Kathleen Carter Del Norte, Inyo, Lake, Mendocino, Nevada, Sierra	(916) 651-6613
Stacy Hoang Glenn, Humboldt, Tehama	(916) 654-4016
Jacqui Naud Butte, Colusa	(916) 654-2996

Central Region

Vivian Lee (Regional Lead) (916) 651-6281
Fresno, Madera, Mariposa, Sacramento, Kings, San Joaquin, Tulare, Tuolumne

Lori Hokerson (916) 651-6296
Amador, El Dorado, Merced, Placer, Stanislaus, Sutter-Yuba, Yolo

Joseph Kim (916) 651-6339
Alpine, Calaveras, Mono

Southern Region

Eddie Gabriel (Regional Lead) (916) 654-3263
Orange, Los Angeles, San Diego, Ventura

Linda Brophy (916) 654-7357
Imperial, San Luis Obispo

Troy Konarski (916) 654-2643
Kern, Riverside, Santa Barbara, San Bernardino

Sincerely,

(Original Signed By John Rodriguez for)

STEPHEN W. MAYBERG, Ph.D.
Director

Enclosures

cc: California Mental Health Planning Council
Chief, County Operations Section, North and Bay Area Regions
Chief, County Operations Section, South and Central Regions