

DIRECTOR'S DESIGNEE ATTESTATION INSTRUCTIONS

County Behavioral Health Directors: The "Director's Designee Attestation," is to be completed by the County Behavioral Health Director (CBHD).

The attestation designates who is approved by the CBHD to submit Lanterman-Petris-Short (LPS) Act data pursuant to Welfare and Institutions (W&I) Code section 5402 via the online data collection platform.

The CBHD's and their Designee's contact information is required on the online data collection platform to attest that the information provided to Department of Health Care Services (DHCS) is accurate and complete.

The DHCS LPS Unit will retain this attestation and will not accept anyone's signature other than the Director, the Director's Designee, or the Director's Alternate Designee to submit LPS data pursuant to W&I Code section 5402.

Thank you,

LPS Unit

E-MAIL signed and completed attestation to: MHDATA@dhcs.ca.gov.

If you need additional information, please email questions to MHDATA@dhcs.ca.gov or call (916) 323-1864.

DIRECTOR'S DESIGNEE ATTESTATION

Director's Designee Information

I, _____
(Print Name)

Behavioral Health Director of _____
(County)

Designate the following individuals:

Primary Designee Name: _____ Title: _____

Phone Number: _____ Email Address: _____

and/or

Alternate Designee Name: _____ Title: _____

Phone Number: _____ Email Address: _____

to submit LPS Data pursuant to W&I Code section 5402 to the Department of Health Care Services (DHCS) for

_____, effective _____.
(County) (Date)

Note: The CBHD must notify DHCS when the Director's Designees change or if the contact information changes. Return this attestation to <mailto:MHDATA@dhcs.ca.gov>.

Signature of Behavioral Health Director (Date)