

DATE:

Behavioral Health Information Notice No: 25-XXX  
[Supersedes Behavioral Health Information Notice No: 20-005](#)

TO: California Alliance of Child and Family Services  
California Association for Alcohol/Drug Educators  
California Association of Alcohol & Drug Program Executives, Inc.  
California Association of DUI Treatment Programs  
California Association of Social Rehabilitation Agencies  
California Consortium of Addiction Programs and Professionals  
California Council of Community Behavioral Health Agencies  
California Hospital Association  
California Opioid Maintenance Providers  
California State Association of Counties  
Coalition of Alcohol and Drug Associations  
County Behavioral Health Directors  
County Behavioral Health Directors Association of California  
County Drug & Alcohol Administrators

SUBJECT: Statewide Criteria for Mental Health Program Approval for Short-Term Residential Therapeutic Program

PURPOSE: This information notice establishes the regulatory requirements and procedures for Short-Term Residential Therapeutic Programs (STRTPs) to obtain a Mental Health Program Approval (MHPA). Assembly Bill 1997, Section 131(b) (Stone, Chapter 612, Statutes of 2016) authorizes the Department of Health Care Services (Department) to adopt regulations by way of information notice regarding the MHPA standards applicable to STRTPs. The STRTP Interim Regulations specifying the requirements are effective immediately and enclosed.

REFERENCE: [Behavioral Health Information Notice No: 20-005](#)

**BACKGROUND:**

In 2020 interim STRTP MHPA Version II regulations were published as an enclosure to MHSUDS Information Notice 20-005. Policy guidance was provided regarding the process for applying for MHPA, the duration of approval, and requirements for annual reviews.



**POLICY:**

The Department has updated MHPA program requirements in a third version of the Interim STRTP MHPA regulations and have enclosed the “Interim STRTP MHPA Regulations Version III.” (See Enclosure 1). Any California Department of Social Services (CDSS) provisionally licensed STRTP shall use the updated DHCS 3131 application form entitled “Application for Mental Health Program Approval” when applying for a MHPA (See Enclosure 2).

Welfare and Institutions Code Section 4096.5 subdivision (g) grants the Department authority to delegate to County Mental Health Plans (MHPs), approval, oversight, enforcement and other responsibilities for STRTP MHPA within the county’s geographic region, referred to as a Delegate County (See [BHIN 20-2022](#)).

To obtain MHPA approval, the STRTP shall meet the requirements of the Interim STRTP MHPA Regulations Version III, including becoming Medi-Cal site certified and obtaining a contract with a county MHP to provide onsite Specialty Mental Health Services (SMHS) in accordance with Title 9 of California Code of Regulations (CCR) Section 1810.435. MHPA will not be issued by the Department or Delegate County until the applicant can provide onsite SMHS pursuant to Title 9 CCR Section 1810.435 and meet all the MHPA regulatory requirements.

A STRTP with an existing MHPA shall demonstrate compliance with the requirements specified in the Interim STRTP Regulations Version III through updates to the Mental Health Program statement and previously submitted policies and procedures. The Department or the Delegate County will work with STRTP’s to align compliance with Interim STRTP MHPA Regulations Version III during existing scheduled annual onsite reviews in the 2026 calendar year. All STRTPs with a MHPA shall demonstrate compliance prior to June 30, 2026.

The following provides a review of the application process and timeframes for MHPA application reviews and notifications.

**Application Process for Initial MHPA and Timeframes**

A provisionally licensed STRTP has 12 months from the date of licensure by CDSS to obtain MHPA. MHPA requires the completion of a Medi-Cal site certification and a contract with a MHP to provide onsite SMHS, in accordance with Title 9 CCR Section 18410.435.

An applicant shall e-mail a completed “Application for Mental Health Program Approval” (Enclosure 2) to the Department at [CHILDRENSMHPA@dhcs.ca.gov](mailto:CHILDRENSMHPA@dhcs.ca.gov).

An applicant submitting a MHPA application to a Delegate County shall submit via certified mail or utilize an e-mail box, as directed by the applicable Delegate County.

The Department or Delegate County shall provide written notice via e-mail to an applicant if the application is incomplete. If additional information is required, the applicant shall provide the required information within 30 calendar days of the date the Department or Delegate issued the notice. After the application is complete, if the Department or Delegate County has determined that the application and supporting documentation demonstrate that the applicant meets the requirements, the Department or Delegate will conduct an onsite review to verify that the applicant meets the interim regulation MHPA requirements.

If the Department or Delegate County determines that the submitted information demonstrates that the applicant does not meet the requirements, the Department or Delegate may deny the application for MHPA without conducting an onsite review. A written notification will be issued via e-mail, with an explanation of the reasons for denial.

The Department or Delegate County shall approve or deny a MHPA request within 45 calendar days of receipt of the completed application. In cases where the Department or Delegate County has denied an application for MHPA, the applicant shall have the right to request a review of the denial.

#### **Technical Assistance and Training**

The Department will conduct state-level webinars to address questions and provide clarification with requirements specified in the enclosed Interim STRTP MHPA Regulations Version III. Additionally, Frequently Asked Questions (FAQs) will be published. Information regarding the date and times of upcoming webinars and FAQs will be published on the [Department's website](#).

Please submit any questions regarding this Behavioral Health Information Notice to [CHILDRENSMHPA@dhcs.ca.gov](mailto:CHILDRENSMHPA@dhcs.ca.gov).

Sincerely,

Original signed by

Janelle Ito-Orille, Chief  
Licensing and Certification Division

Enclosures