

The following Clinical Forms have been created, updated or discontinued, and the [Clinical Forms Inventory](#) has been updated accordingly. If you have any questions regarding this Bulletin, please contact your QA Liaison.

UPDATED FORM(S):

MH 743 – Intensive Care Coordination (ICC) Eligibility Form

IBHIS Form (DO ONLY): Intensive Care Coordination (ICC) Eligibility
Revision Date: 4/28/21
Type of Form (LE ONLY): Required Data Elements
Implementation: For DO: 6/1/21
 For LE: 4/28/21

REVISIONS:

- Removed definition for Intensive Home Based Services
- Added statement to ICC Eligibility Criteria field to ensure it is clear the criteria are used as guidance regarding target population for ICC and not as a requirement of eligibility
- Added option for “There are other circumstances that justify ICC. Please specify”

MH 744 – Supplemental Intensive Home Based Services (IHBS) Assessment

IBHIS Form (DO ONLY): N/A
Revision Date: 4/28/21
Type of Form (LE ONLY): Required Data Elements
Implementation: For DO: 4/28/21
 For LE: 4/28/21

REVISIONS:

- Removed the following from the IHBS Eligibility section:
 - Statement indicating that IHBS will be pre-authorized for a six-month period
 - Field for “Currently Receiving ICC” as ICC is not a requirement for a client to receive Intensive Home Based Services
 - Statement indicating that a client receiving other intensive services must ensure coordinated services

MH 745 – Supplemental Therapeutic Foster Care (TFCS) Assessment

IBHIS Form (DO ONLY): N/A
Revision Date: 4/28/21
Type of Form (LE ONLY): Required Data Elements
Implementation: For DO: 4/28/21
 For LE: 4/28/21

REVISIONS:

- Removed the following from the TFCS Eligibility section:
 - Statement indicating that TFCS will be pre-authorized for a six-month period
 - Field for “Currently Receiving ICC”
 - Statement indicating that TFCS cannot begin until ICC has been initiated as receiving ICC is not a requirement for a client to receive Therapeutic Foster Care Services

NEW & OBSOLETE FORM(S): **None at this time**

The Clinical Forms Bulletin is utilized to announce changes to clinical forms and data elements that are needed to capture clinical documentation within the Los Angeles County Department of Mental Health (LACDMH). The Bulletin will identify any new, updated or obsolete clinical forms. The term “clinical forms” is used to describe either a paper clinical document within a paper Clinical Record OR a set of data elements within an electronic Clinical Record. All “clinical forms” must be available upon chart review/audit.

NOTE: This Bulletin does not address requirements for electronic billing and/or reporting. Contractors should refer to the 837 Companion Guide or WebServices Guide for a complete listing of electronic data transfer requirements.

1. All Directly-Operated Providers must utilize clinical forms approved by the QA Unit. The Integrated Behavioral Health Information System (IBHIS) has incorporated clinical forms, when appropriate, and has been updated to reflect the changes noted on this Bulletin.
2. All Contract Providers must utilize clinical forms in a manner defined by the designation of the clinical form within the Clinical Forms Inventory.
 - a. Required Data Element: Must maintain all required data elements of the form and have a method for producing a paper form or electronic report with all the required data elements
 - b. Required Concept: Must have a method of capturing the specific category of information indicated by the title and data elements of the form
 - c. Ownership: Must have a method for complying with all laws/regulations encompassed by the form

DMH Policy 401.02: Clinical Records Maintenance, Organization, and Content

C:	DMH Executive Management DMH CIOB LE Executive Management	DMH Clinical Operations Managers DMH Administrative Managers LE QA Contacts	DMH Quality, Outcomes and Training Division DMH QA Liaisons
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