

Initial LPS Application and Renewal Application Manual
Application User Guide for Providers

V2023.1.0

5/10/2023

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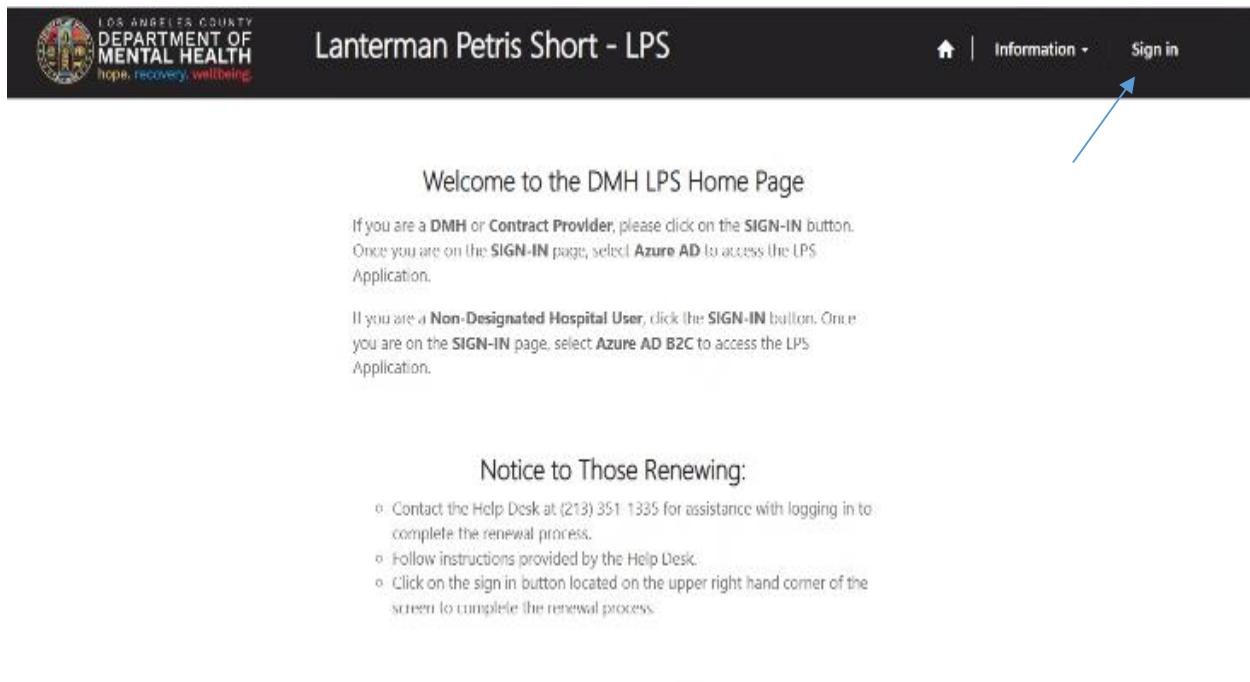
Initial LPS Application for DMH Employees

Accessing Provider Application Portal

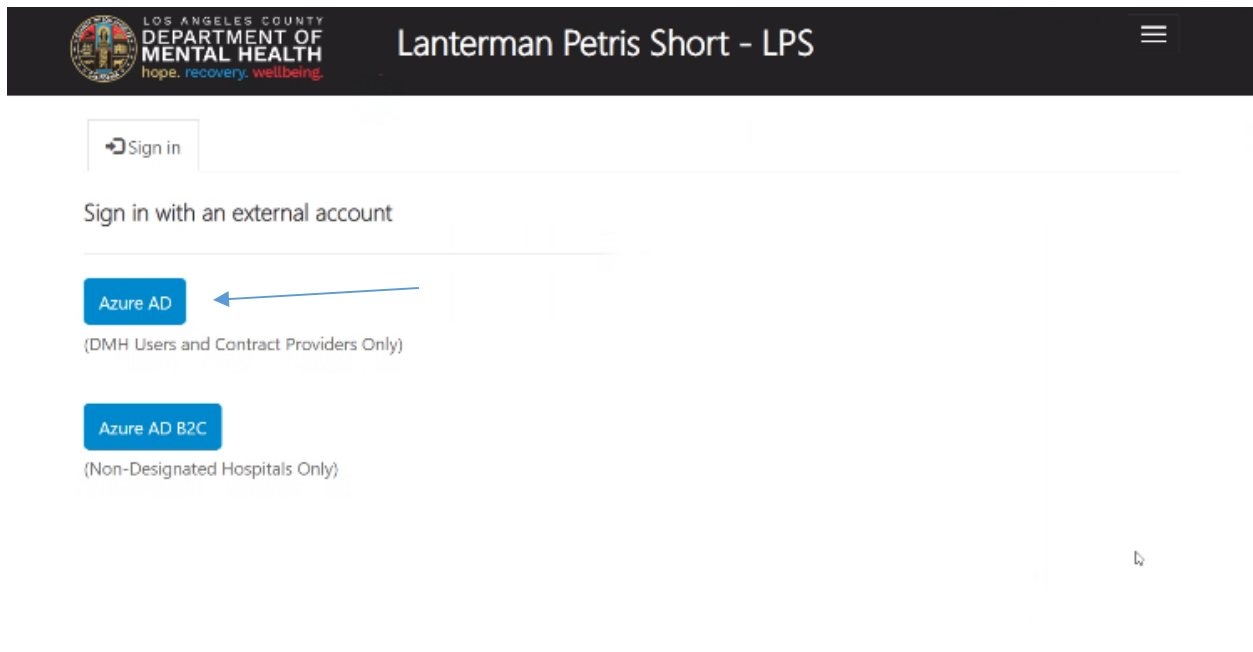
To access the Provider Application Portal, copy and paste the below URL into your internet browser. The recommended browsers are Google Chrome and Microsoft Edge.

<https://lacdmhlpsprod.dynamics365portals.us/>

Select the sign in button in the upper right-hand corner.



Select Azure AD to start initial LPS Application.



LOS ANGELES COUNTY
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MENTAL HEALTH
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Lanterman Petris Short - LPS

Sign in

Sign in with an external account

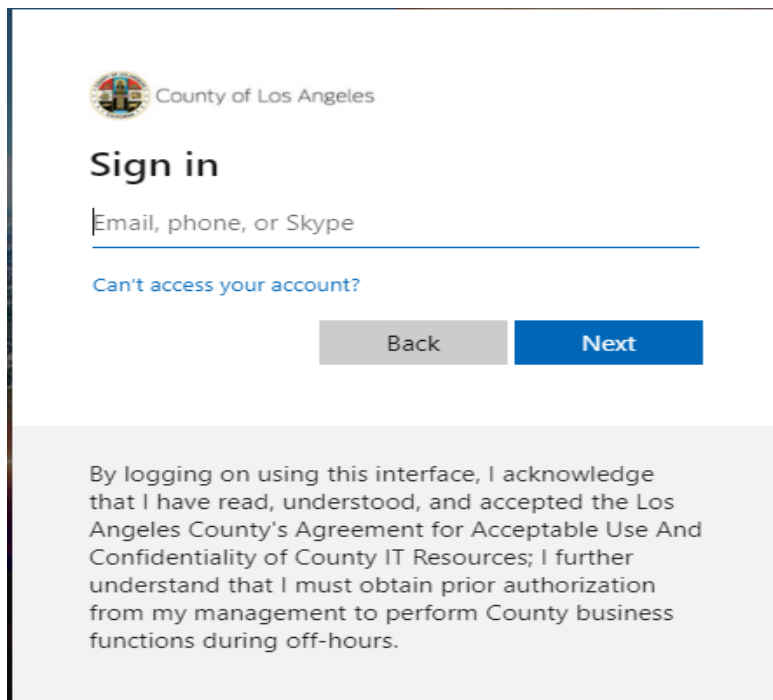
Azure AD ←

(DMH Users and Contract Providers Only)

Azure AD B2C

(Non-Designated Hospitals Only)

Enter DMH email and password (e.g. jsmit@dmh.lacounty.gov)



County of Los Angeles

Sign in

Email, phone, or Skype

[Can't access your account?](#)

Back Next

By logging on using this interface, I acknowledge that I have read, understood, and accepted the Los Angeles County's Agreement for Acceptable Use And Confidentiality of County IT Resources; I further understand that I must obtain prior authorization from my management to perform County business functions during off-hours.

Select start request button.

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Lanterman Petris Short - LPS

Home | Release Notes | FAQ |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: Authorization Expiration Date:

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Mission
Our mission at DMH is to *optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery but also connectedness and community reintegration.*

Windows taskbar: 3:36 PM 8/30/2021

Complete required fields.

The screenshot shows the 'Candidate's Information' form, which is the first step in a three-step process. The form includes the following fields:

- LPS Application Type ***: A dropdown menu with 'New' selected.
- First Name ***: A text input field.
- Last Name ***: A text input field.
- Email ***: A text input field.
- Phone Number ***: A text input field.
- Individual NPI Number ***: A text input field.

The Windows taskbar at the bottom shows the time as 3:49 PM on 8/30/2021.

The screenshot shows the 'Employment Information' form, which is the second step in the process. The form includes the following fields:

- Job Title ***: A text input field.
- Scope of Practice ***: A dropdown menu.
- Credential ***: A dropdown menu.
- Credential Specify**: A text input field.
- License No ***: A text input field.
- Years Licensed ***: A dropdown menu.

At the bottom left of the form is a blue button labeled 'Save and Next'. The Windows taskbar at the bottom shows the time as 3:49 PM on 8/30/2021.

(To look up or obtain individualized NPI number, please visit:
<https://npiregistry.cms.hhs.gov>)

Select save and next at the bottom of the screen.

Employment Location

Complete all fields.

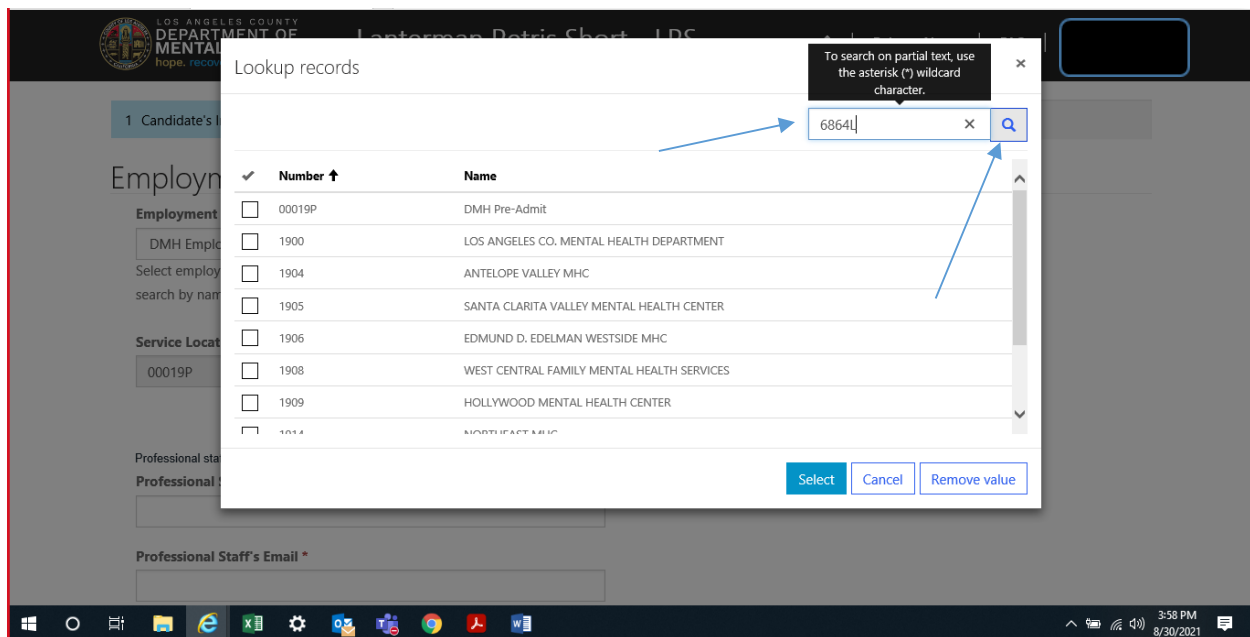
Select DMH Employee from the drop down menu.

The screenshot shows the 'Employment Information' section of the 'Lanterman Petris Short - LPS' form. The form is titled 'LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH' with the tagline 'hope. recovery. well-being'. The navigation bar includes '1 Candidate's Information', '2 Employment Information' (active), and '3 Attestation for LPS'. The 'Employment Information' section contains a dropdown menu for 'DMH Employee' (selected), 'NON - DMH Employee', and 'NON - Designated Hospital'. Below this is a text field for 'Service Location *' with a magnifying glass icon. To the right is a date field for 'Employment Start Date'. Further down are fields for 'Professional Staff Name *' and 'Professional Staff's Email *'. The Windows taskbar at the bottom shows the time as 3:33 PM on 8/30/2021.

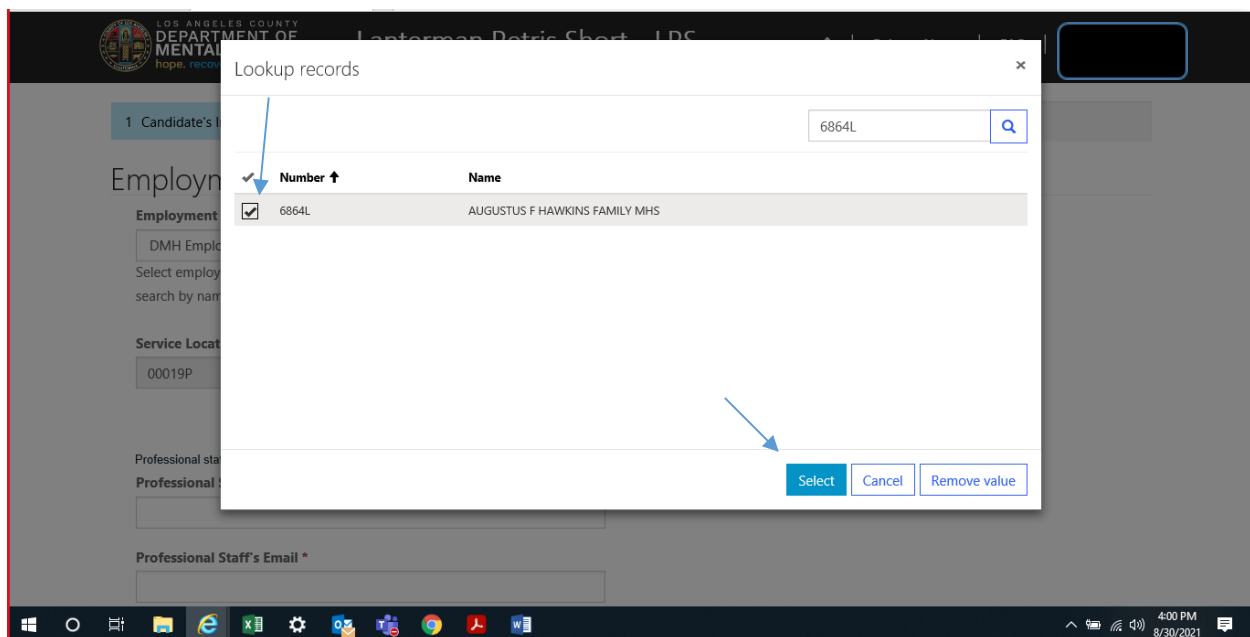
Click on magnifying glass to search for work location.

This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon in the 'Service Location *' field, indicating where to click to search for a work location. The rest of the form and the Windows taskbar are the same.

In the search box, type in provider number and click on magnifying glass.



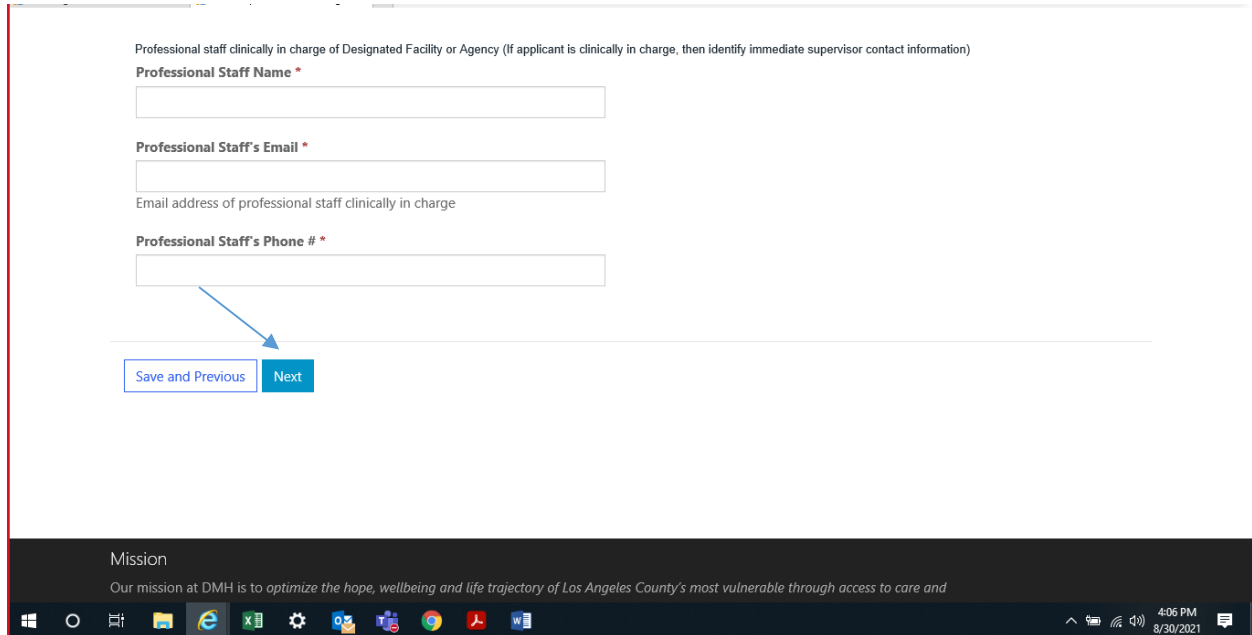
When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Email address of professional staff clinically in charge

Professional Staff's Phone # *

[Save and Previous](#) [Next](#)

Mission
Our mission at DMH is to *optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and*

Windows taskbar: 4:06 PM 8/30/2021

Attestation

Select attestation link, print form and fill out attestation completely.

(Electronic completion is acceptable). Upload and attach attestation form.

Then select save and home at the bottom of the screen.

The screenshot shows the 'Attestation for LPS' page. At the top, there's a header with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the header, there are three tabs: '1 Candidate's Information', '2 Employment Information', and '3 Attestation for LPS'. The main content area is titled 'Attestation for LPS' and contains a link to a PDF form: http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf. Below the link, it says 'Please print the above linked document, complete, scan, and upload the signed attestation form.' There is an 'Attach *' section with a 'Browse...' button. At the bottom, there are two buttons: 'Save and Previous' and 'Save and Home'. Blue arrows point to the link, the 'Browse...' button, and the 'Save and Home' button.

Select submit from the drop down menu.

The screenshot shows the application list page. At the top, there's a header with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the header, there are instructions: 'Step 1 - Click on the 'Start Request' button to begin the request.' and 'Step 2 - To edit, review, and submit application, click the drop-down arrow button below.' There are two labels: 'Authorization Status:' and 'Authorization Expiration Date:'. Below these labels is a table with the following columns: 'LPS Application Type', 'Created On', 'NPI Number', 'First Name', 'Last Name', 'Credential', 'Name of Site', 'Start Date', 'App Status', and 'Authorization Status'. The table has one row with the following data: 'New', '8/30/2021 3:52 PM', '1919191316', a redacted first name, a redacted last name, 'LCSW', 'AUGUSTUS F HAWKINS FAMILY MHS', '12/8/2010', 'Unsubmitted', and a dropdown menu. The dropdown menu is open, showing 'Edit', 'Details', and 'Submit'. A blue arrow points to the 'Submit' option. At the bottom, there's a 'Mission' section with text: 'Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery but also connectedness and community reintegration.'

LPS Application Type	Created On	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
New	8/30/2021 3:52 PM	1919191316	[Redacted]	[Redacted]	LCSW	AUGUSTUS F HAWKINS FAMILY MHS	12/8/2010	Unsubmitted	[Dropdown Menu]

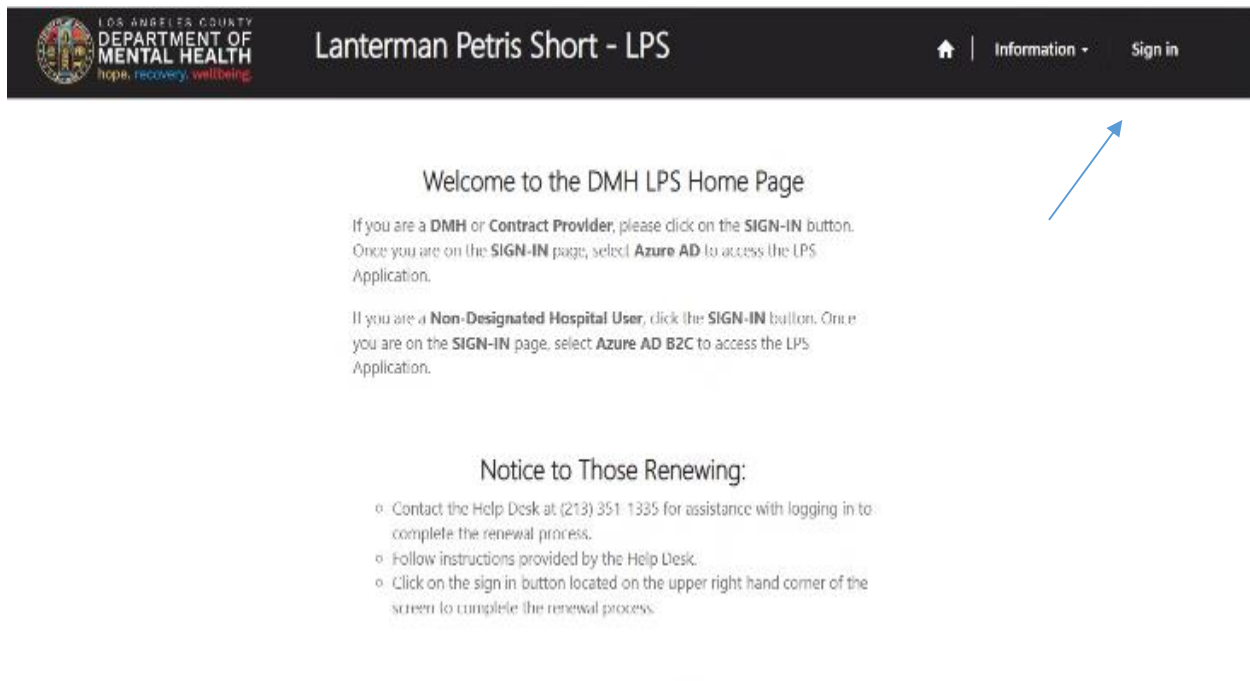
Initial LPS Application for Contract Providers

Accessing Provider Application Portal

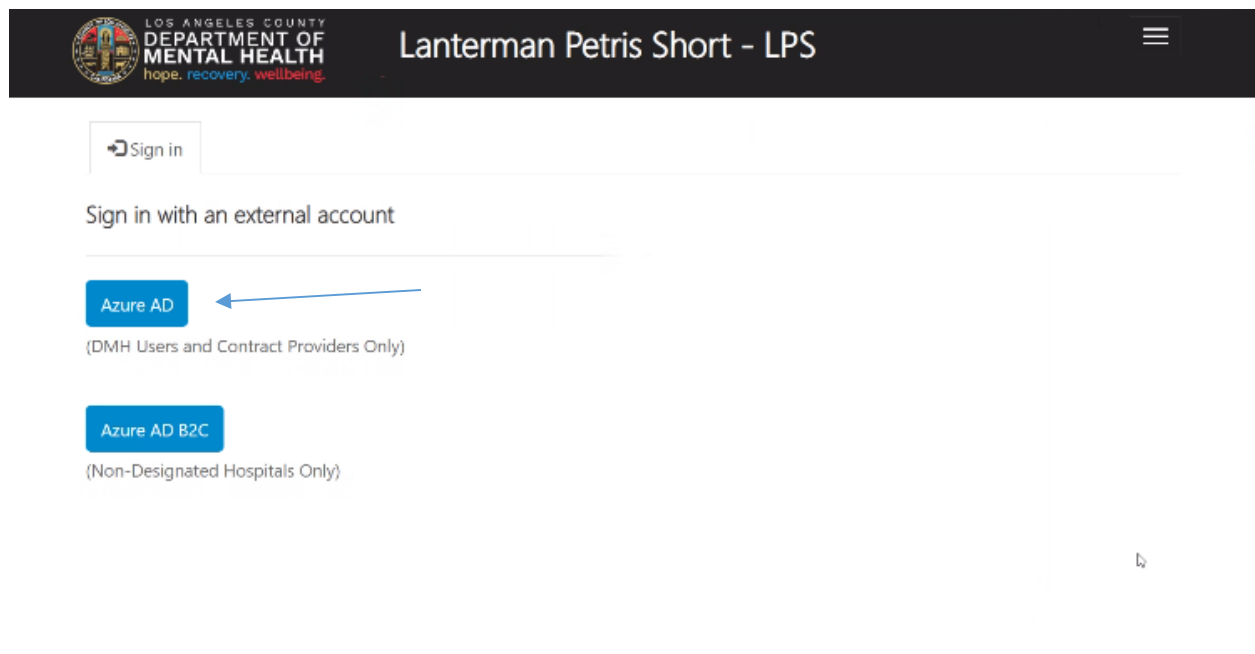
To access the Provider Application Portal, copy and paste the below URL into your internet browser. The recommended browsers are Google Chrome and Microsoft Edge.

<https://lacdmhlpsprod.dynamics365portals.us/>

Select the sign in button in the upper right-hand corner.



Select Azure AD to start initial LPS Application.



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Sign in

Sign in with an external account

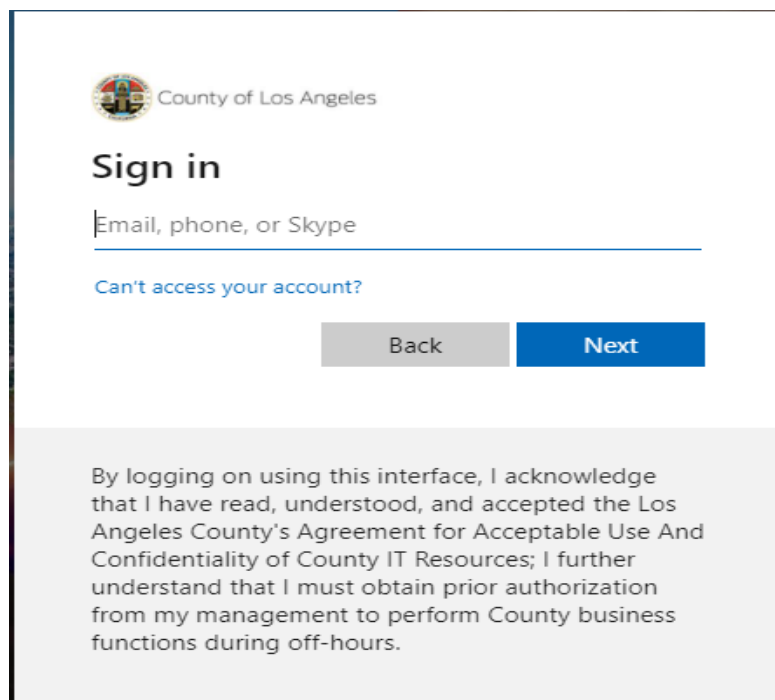
Azure AD ←

(DMH Users and Contract Providers Only)

Azure AD B2C

(Non-Designated Hospitals Only)

Enter C# email address and password (e.g. c123456@dmh.lacounty.gov)



County of Los Angeles

Sign in

Email, phone, or Skype

[Can't access your account?](#)

Back **Next**


By logging on using this interface, I acknowledge that I have read, understood, and accepted the Los Angeles County's Agreement for Acceptable Use And Confidentiality of County IT Resources; I further understand that I must obtain prior authorization from my management to perform County business functions during off-hours.

Select start request button.

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Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

Authorization Status: Authorization Expiration Date:

[Start Request](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Mission

Our mission at DMH is to *optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery but also connectedness and community reintegration.*

Complete required fields.

1 Candidate's Information 2 Employment Information 3 Attestation for LPS

Candidate's Information

LPS Application Type *

First Name *

Last Name *

Email *

Phone Number *

Individual NPI Number *

The screenshot shows a web form with the following fields and labels:

- Job Title *
- Scope of Practice *
- Credential *
- Credential Specify
- License No *
- Years Licensed *

A blue button labeled "Save and Next" is located at the bottom left of the form area. The Windows taskbar is visible at the bottom of the screen, showing the time as 3:49 PM on 8/30/2021.

(To look up or obtain individualized NPI number, please visit:
<https://npiregistry.cms.hhs.gov>)

Select save and next at the bottom of the screen.

Employment Information

Complete all fields.

Select NON-DMH Employee from the drop down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The top navigation bar includes the Los Angeles County Department of Mental Health logo, the title 'Lanterman Petris Short - LPS', and links for 'Release Notes' and 'FAQ'. Below the navigation bar, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The 'Employment Information' section contains the following fields:

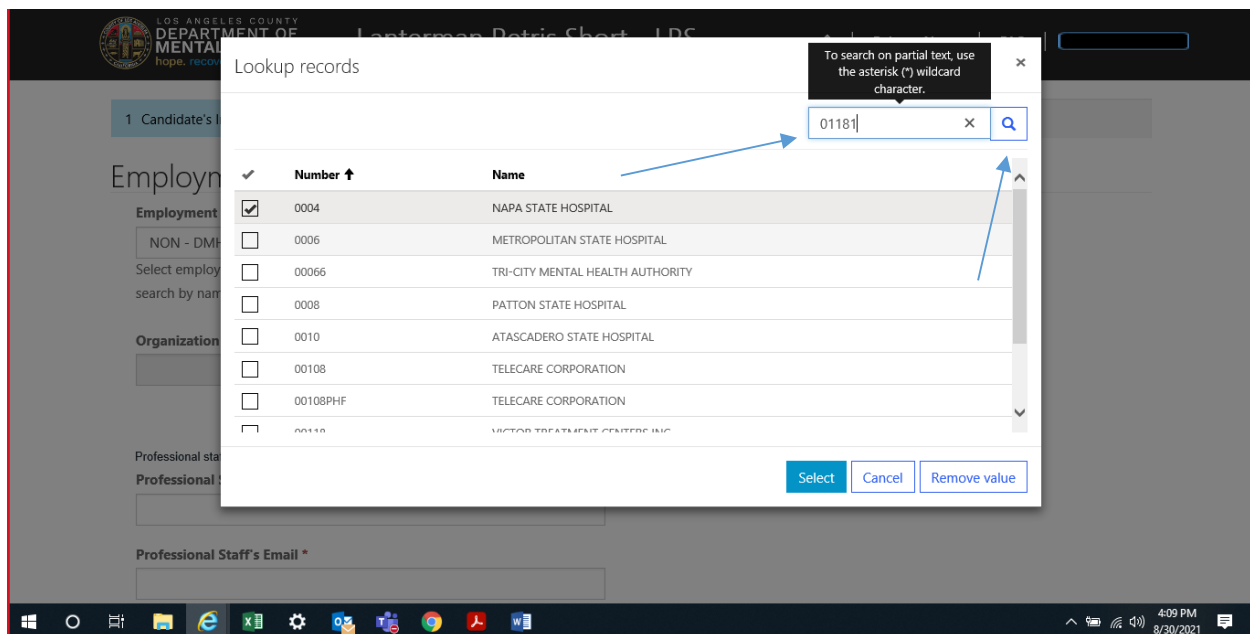
- Employment Type ***: A dropdown menu with 'NON - DMH Employee' selected. Below it, a note says 'Select employment type and then the [magnifying glass icon] to search by name or number.'
- Employment Start Date**: A date input field with a calendar icon.
- Organization Name ***: A text input field with a magnifying glass icon.
- Professional Staff Name ***: A text input field.
- Professional Staff's Email ***: A text input field.

The bottom of the screen shows a Windows taskbar with various application icons and a system clock indicating 4:07 PM on 8/30/2021.

Click on magnifying glass to search for work location.

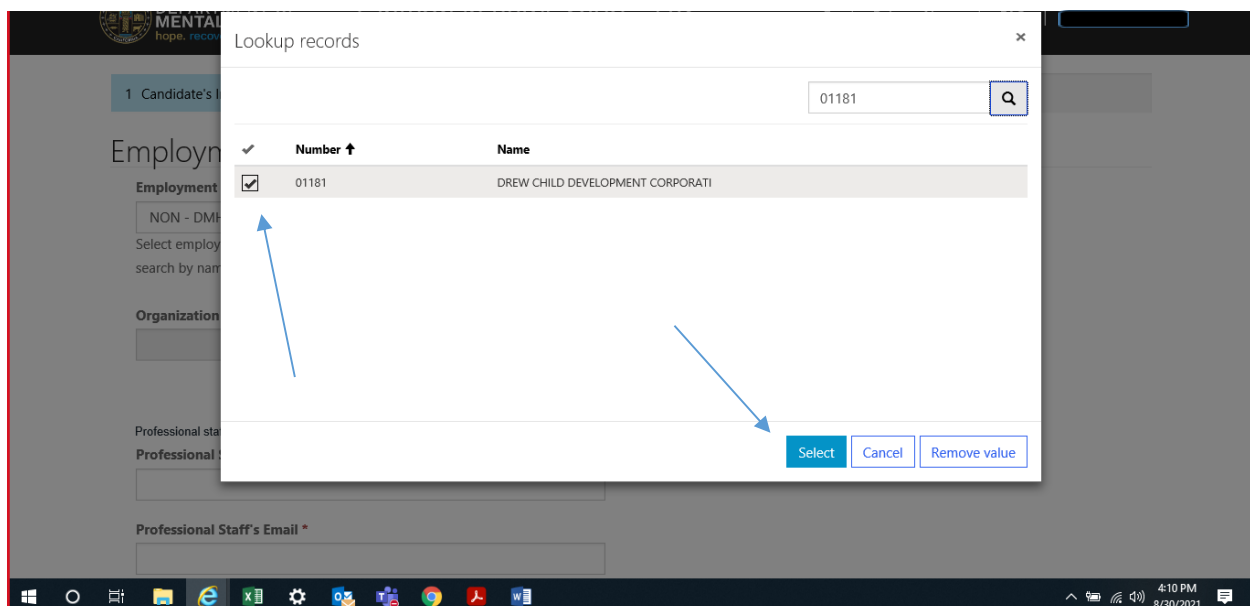
This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon next to the 'Organization Name' input field. The arrow originates from the right side of the screen and points directly to the magnifying glass icon, indicating where to click to search for the work location.

In the search box, type in legal entity number and click on magnifying glass.



*If you are unsure of your legal entity number, please consult with administration of your facility/clinic location.

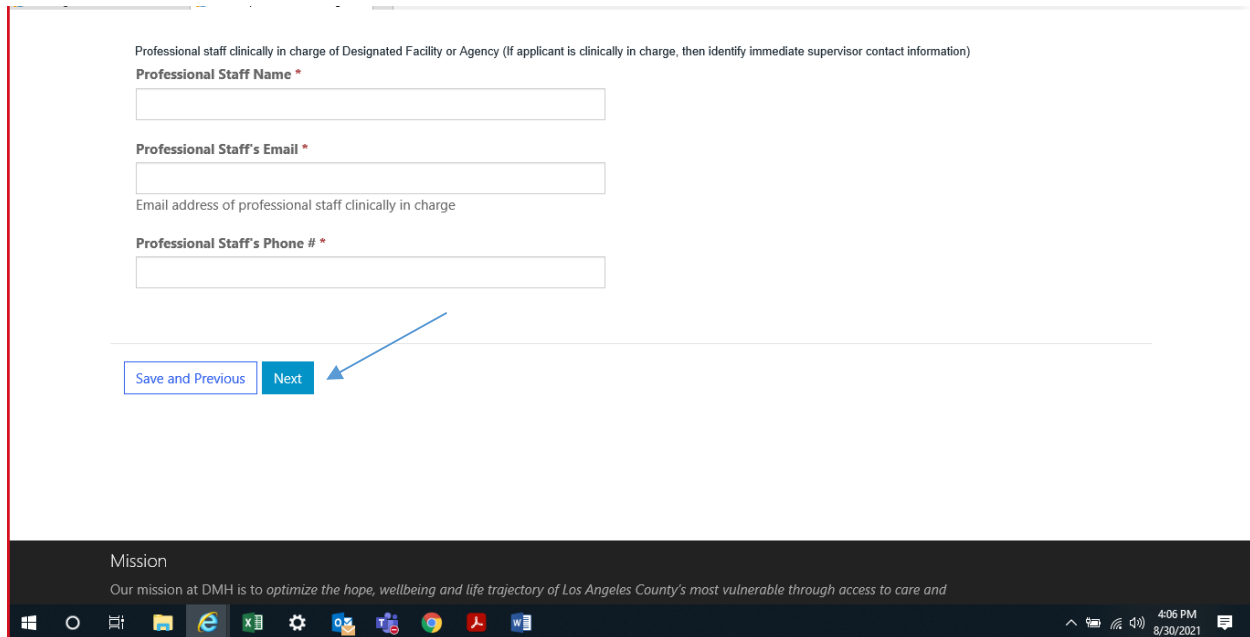
When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Email address of professional staff clinically in charge

Professional Staff's Phone # *

[Save and Previous](#) [Next](#)

Mission
Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and

Windows taskbar: 4:06 PM 8/30/2021

Attestation

Select attestation link, print form and fill out attestation completely.

(Electronic completion is acceptable). Upload and attach attestation form.

Then select save and home at the bottom of the screen.

The screenshot shows the 'Attestation for LPS' form. At the top, there is a navigation bar with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the navigation bar, there are three tabs: '1 Candidate's Information', '2 Employment Information', and '3 Attestation for LPS'. The 'Attestation for LPS' tab is selected. The form contains a link to the attestation form: http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf. Below the link, it says 'Please print the above linked document, complete, scan, and upload the signed attestation form.' There is an 'Attach *' section with a 'Browse...' button. At the bottom, there are two buttons: 'Save and Previous' and 'Save and Home'. Blue arrows point to the link, the 'Browse...' button, and the 'Save and Home' button.

Select submit from the drop down menu.

The screenshot shows the 'Lanterman Petris Short - LPS' system. At the top, there is a navigation bar with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the navigation bar, there are two steps: 'Step 1 - Click on the 'Start Request' button to begin the request.' and 'Step 2 - To edit, review, and submit application, click the drop-down arrow button [v] below.' Below the steps, there are two columns: 'Authorization Status:' and 'Authorization Expiration Date:'. Below these columns, there is a table with the following columns: 'LPS Application Type', 'Created On', 'NPI Number', 'First Name', 'Last Name', 'Credential', 'Name of Site', 'Start Date', 'App Status', and 'Authorization Status'. The table has one row with the following data: 'New', '8/30/2021 3:52 PM', '1919191316', '[REDACTED]', 'LCSW', 'AUGUSTUS F HAWKINS FAMILY MHS', '12/8/2010', 'Unsubmitted', and a dropdown menu. The dropdown menu is open, showing 'Edit', 'Details', and 'Submit'. A blue arrow points to the 'Submit' option. Below the table, there is a 'Mission' section with the text: 'Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery but also connectedness and community reintegration.'

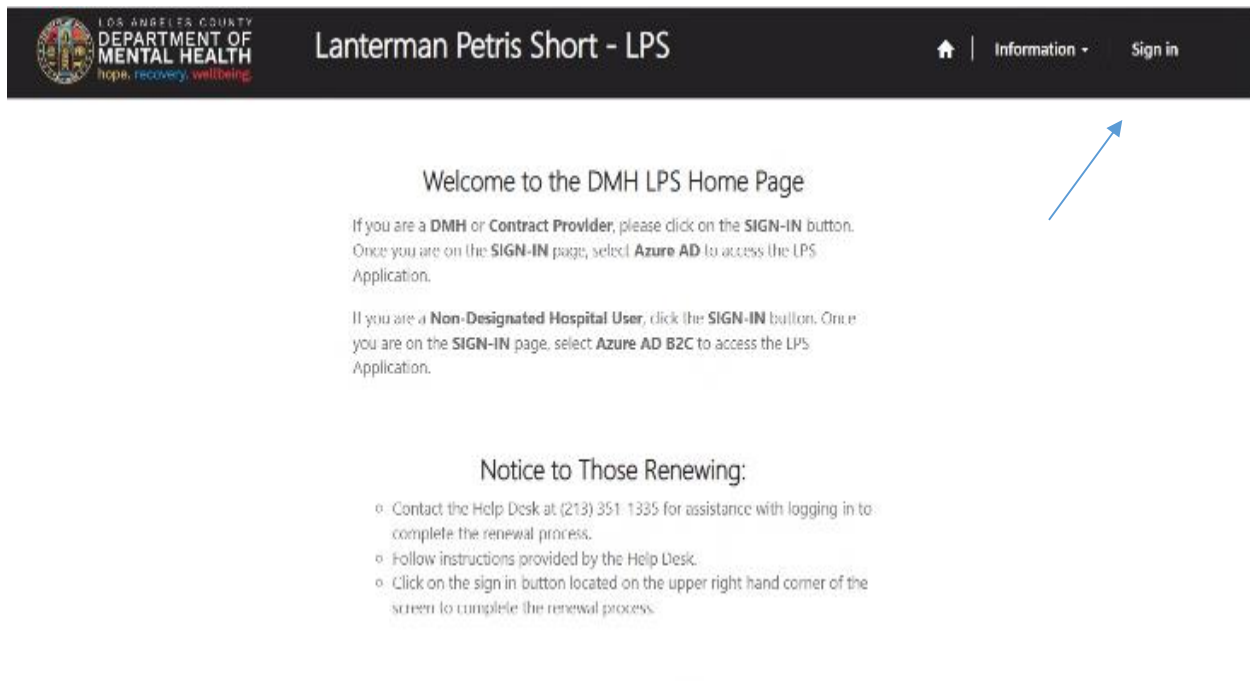
Initial LPS Application for NON-Designated Hospitals

Accessing Provider Application Portal

To access the Provider Application Portal, copy and paste the below URL into your internet browser. The recommended browsers are Google Chrome and Microsoft Edge.

<https://lacdmhlpsprod.dynamics365portals.us/>

Select the sign in button in the upper right-hand corner.



Sign in by selecting Azure AD B2C

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Sign in

Sign in with an external account

Azure AD
(DMH Users and Contract Providers Only)

Azure AD B2C
(Non-Designated Hospitals Only)

If you are a 1st time user, please sign up for an account. You will need to verify your email address.

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Returning User - Sign-In

Email Address

Password

Forgot your password?

Sign in

OR

Don't have an account? Sign up now

Select start request button.

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Home | Release Notes | FAQ |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: Authorization Expiration Date:

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Mission
Our mission at DMH is to *optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery but also connectedness and community reintegration.*

Windows taskbar: 3:36 PM 8/30/2021

Complete required fields.

The screenshot shows the 'Candidate's Information' form, which is the first step in a three-step process. The form includes the following fields:

- LPS Application Type ***: A dropdown menu with 'New' selected.
- First Name ***: A text input field.
- Last Name ***: A text input field.
- Email ***: A text input field.
- Phone Number ***: A text input field.
- Individual NPI Number ***: A text input field.

The Windows taskbar at the bottom shows the time as 3:49 PM on 8/30/2021.

The screenshot shows the 'Employment Information' form, which is the second step in the process. The form includes the following fields:

- Job Title ***: A text input field.
- Scope of Practice ***: A dropdown menu.
- Credential ***: A dropdown menu.
- Credential Specify**: A text input field.
- License No ***: A text input field.
- Years Licensed ***: A dropdown menu.

A 'Save and Next' button is located at the bottom left of the form. The Windows taskbar at the bottom shows the time as 3:49 PM on 8/30/2021.

(To look up or obtain individualized NPI number, please visit:

<https://npiregistry.cms.hhs.gov>)

Select save and next at the bottom of the screen.

Employment Location

Complete all fields.

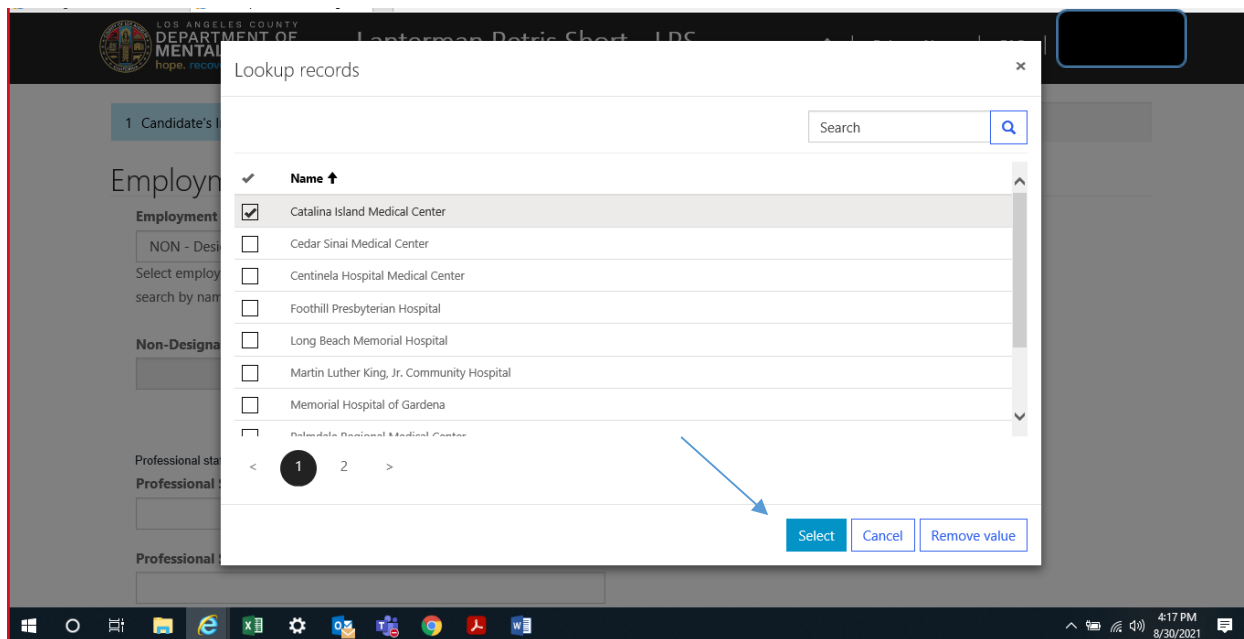
Select NON-Designated Hospital from the drop down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The 'Employment Type' dropdown menu is set to 'NON - Designated Hospital'. Below it, a search bar for 'Non-Designated Hospitals' is visible. The form also includes fields for 'Employment Start Date', 'Professional Staff Name', and 'Professional Staff's Email'. The top navigation bar shows '1 Candidate's Information' as the active step.

Click on magnifying glass.

This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon in the search bar for 'Non-Designated Hospitals'. The 'Employment Type' dropdown remains set to 'NON - Designated Hospital'.

Select work location from list provided on page 1 or 2 and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information)

Select next when done.

The screenshot shows a form titled 'Professional Staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The form has three input fields: 'Professional Staff Name *', 'Professional Staff's Email *', and 'Professional Staff's Phone # *'. Below the fields are two buttons: 'Save and Previous' and 'Next'. A blue arrow points to the 'Next' button. The footer of the form contains the text: 'Mission Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and'.

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Upload and attach attestation form.

Then select save and home at the bottom of the screen.

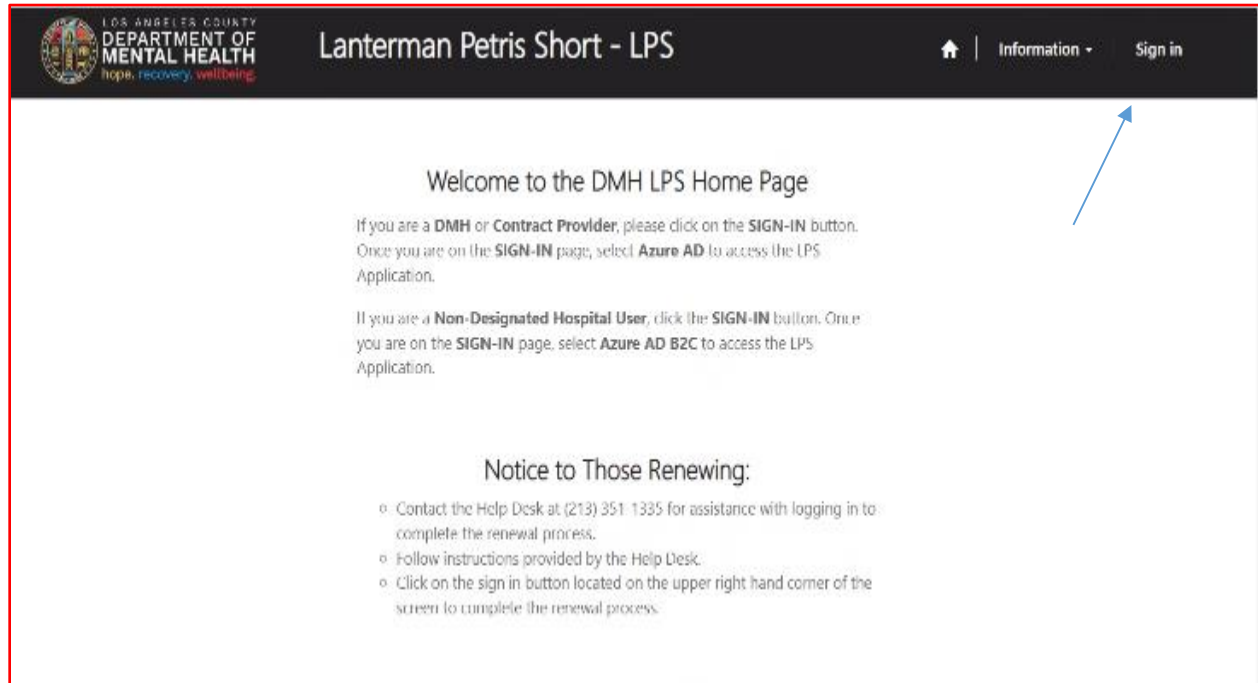
The screenshot shows the 'Attestation for LPS' form. At the top, there is a navigation bar with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the navigation bar, there are three tabs: '1 Candidate's Information', '2 Employment Information', and '3 Attestation for LPS'. The main content area is titled 'Attestation for LPS' and contains a link to a PDF form: http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf. Below the link, there is a text box that says 'Please print the above linked document, complete, scan, and upload the signed attestation form.' There is an 'Attach *' section with a 'Browse...' button. At the bottom, there are two buttons: 'Save and Previous' and 'Save and Home'. Blue arrows point to the link, the 'Browse...' button, and the 'Save and Home' button.

Select submit from the drop-down menu.

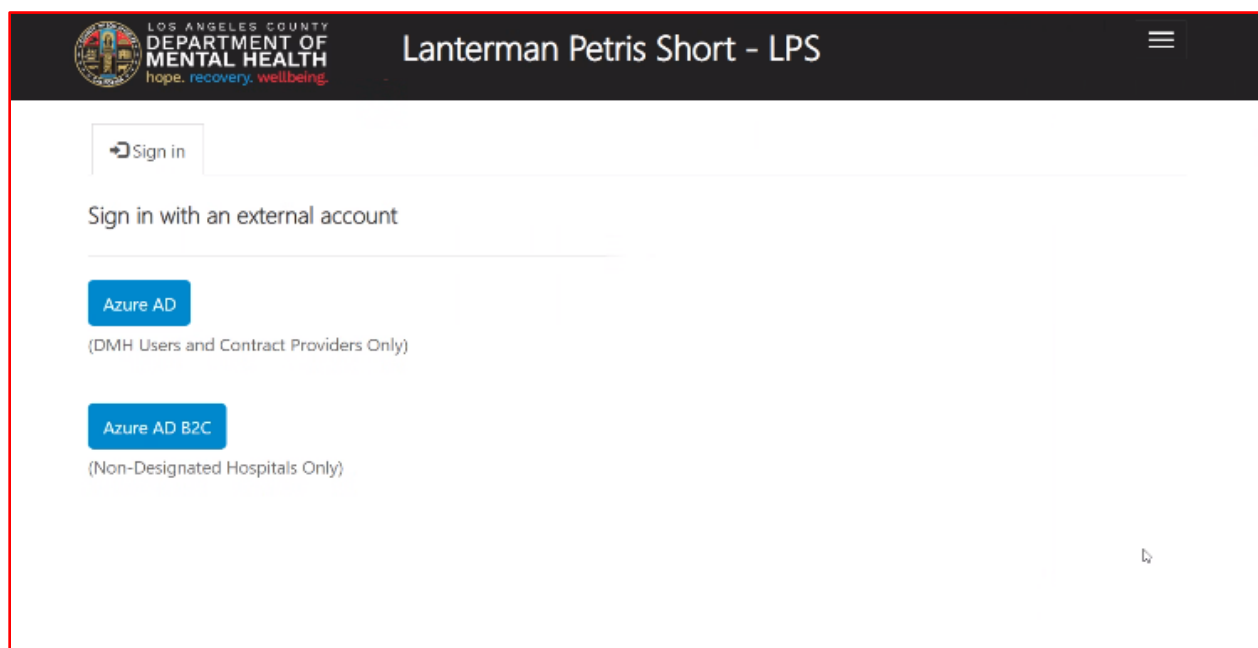
The screenshot shows the 'Lanterman Petris Short - LPS' system. At the top, there is a navigation bar with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the navigation bar, there are two steps: 'Step 1 - Click on the 'Start Request' button to begin the request.' and 'Step 2 - To edit, review, and submit application, click the drop-down arrow button [v] below.' Below the steps, there are two columns: 'Authorization Status:' and 'Authorization Expiration Date:'. Below these columns, there is a table with the following columns: 'LPS Application Type', 'Created On', 'NPI Number', 'First Name', 'Last Name', 'Credential', 'Name of Site', 'Start Date', 'App Status', and 'Authorization Status'. The table has one row with the following data: 'New', '8/30/2021 3:52 PM', '1919191316', [redacted], [redacted], 'LCSW', 'AUGUSTUS F HAWKINS FAMILY MHS', '12/8/2010', 'Unsubmitted', and 'Unsubmitted'. A drop-down menu is open for the 'Authorization Status' column, showing options: 'Edit', 'Details', and 'Submit'. A blue arrow points to the 'Submit' option. At the bottom, there is a 'Mission' section with the text: 'Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery but also connectedness and community reintegration.'

How to Add Location-Non-Renewal Phase DMH Employees

Select the sign in button in the upper right-hand corner.



Select Azure AD.



Select Start Request button.

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Lanterman Petris Short - LPS

Home | Release Notes | FAQ | [Search Box]

Step 1 - Click on the 'Start Request' button to begin the request.
Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

[Start Request](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
New	9/2/2021 3:11 PM	1234567890	[Redacted]	[Redacted]	LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active

Select Work Location (Addition) from the drop down menu.

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Lanterman Petris Short - LPS

Home | Release Notes | FAQ | [Search Box]

1 Candidate's Information 2 Employment Information 3 Attestation for LPS

Candidate's Information

LPS Application Type *

Work Location (Addition)
Work Location (Change From)

Last Name *

[Redacted]

Email *

[Redacted]

Phone Number *

[Redacted]

This is the phone number of the site

Review to ensure all fields are completed. If fields are blank, please provide information.

Candidate's Information

LPS Application Type *

Work Location (Addition) ▼

Authorization *

AUTH-001311

First Name *

Last Name *

Email *

Phone Number *

This is the phone number of the site

Individual NPI Number *

9097875654

Job Title *

Scope of Practice *

County/DMH or Contracted Facility Staff ▼

Credential *

LCSW ▼

License No *

Years Licensed *

Save and Next

Employment Information

Complete all fields.

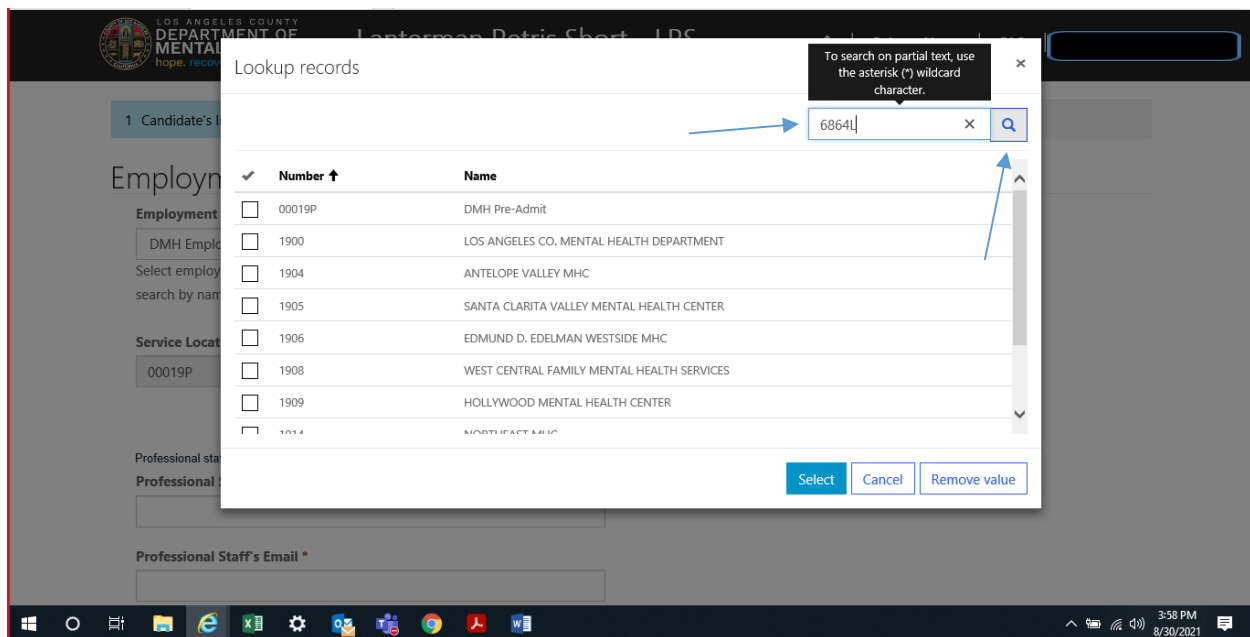
Select DMH Employee from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. At the top, there are three tabs: '1. Candidate's Information' (checked), '2. Employment Information' (active), and '3. Attestation for LPS'. Below the tabs, the title 'Employment Information' is displayed. A dropdown menu for 'DMH Employee' is open, showing three options: 'DMH Employee', 'NON - DMH Employee', and 'NON - Designated Hospital'. To the right of the dropdown is the 'Employment Start Date' field. Below the dropdown is the 'Service Location *' field with a magnifying glass icon. Further down are fields for 'Professional Staff Name *' and 'Professional Staff's Email *'. The Windows taskbar at the bottom shows the date as 6/10/2021.

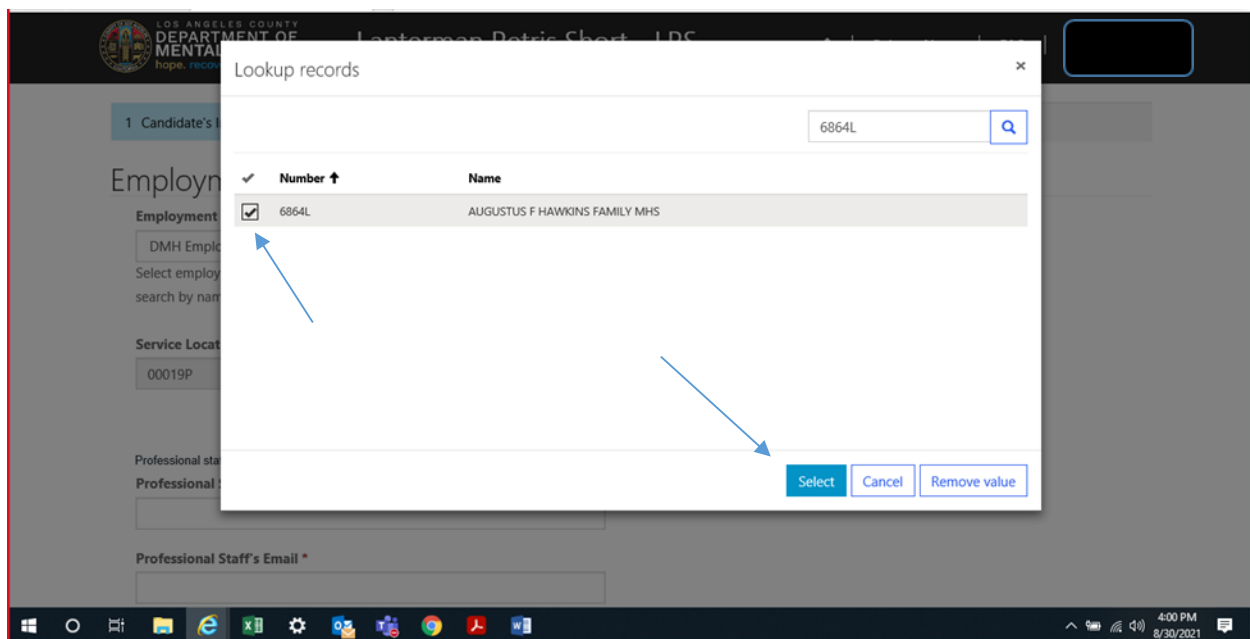
Click on magnifying glass to search for work location.

This screenshot is identical to the one above, but with a blue arrow pointing to the magnifying glass icon in the 'Service Location *' field, indicating where to click to search for a work location. The rest of the form and the Windows taskbar are the same.

In the search box, type in provider number and click on magnifying glass.



When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

Please note, each location added must have a separate attestation attached.

(Electronic completion is acceptable).

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

Select Choose File button to attach attestation form.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

After confirming completed form has been attached, select Save and Home at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *


Choose File

Testing and ...ent URL.txt

Save and Previous

Save and Home


Select submit from the drop-down menu.





Lanterman Petris Short - LPS

Release Notes | FAQ

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

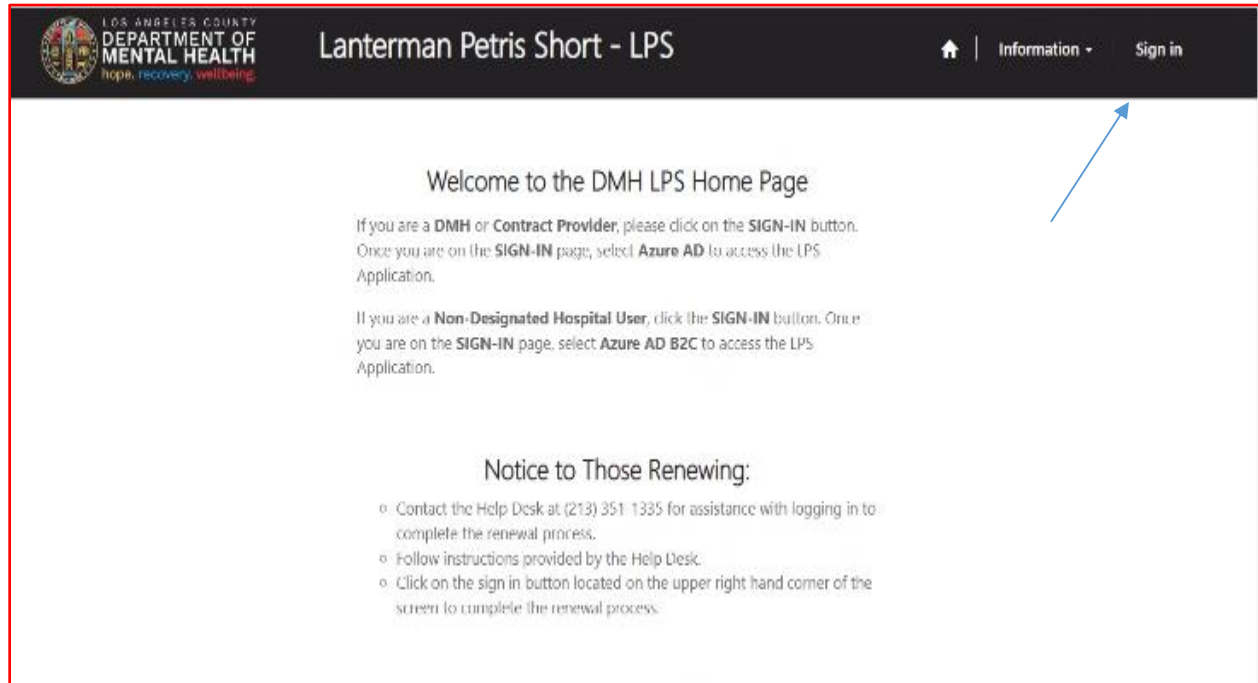
Authorization Status: Active Authorization Expiration Date: 9/1/2024

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Addition)	9/2/2021 3:24 PM	1234567890			LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	8/10/2021	Unsubmitted	 <div><div>Edit</div><div>Details</div><div>Submit</div></div>
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active 

How to Add Location-Non-Renewal Phase

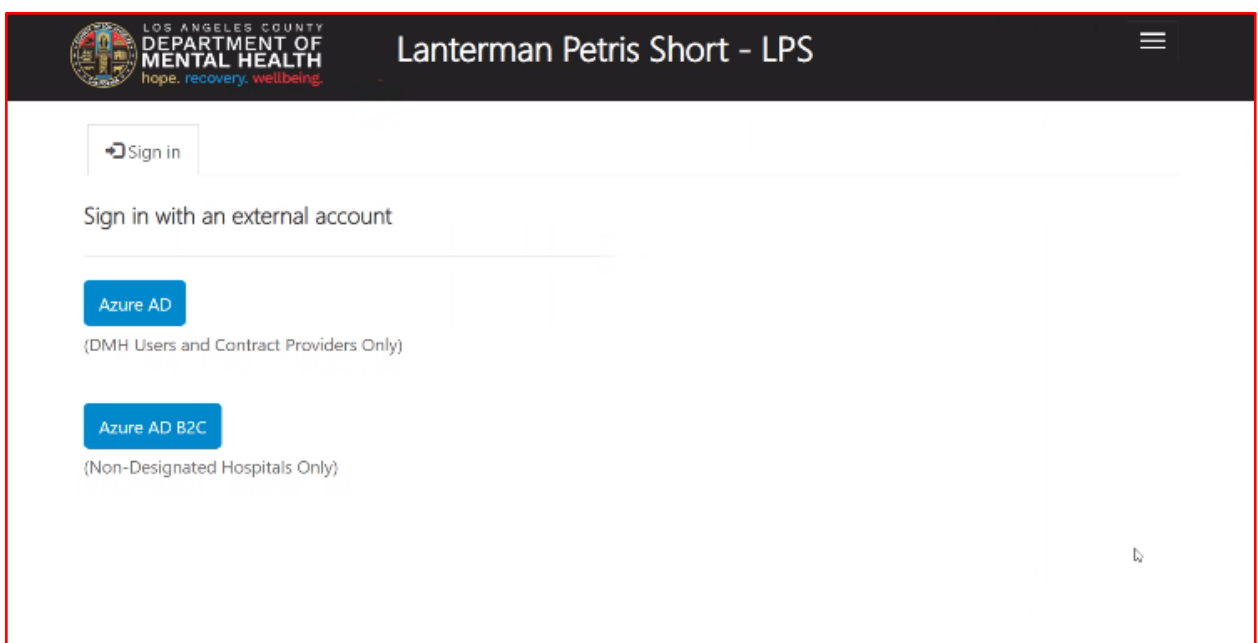
NON-DMH Employee

Select the sign in button in the upper right-hand corner.

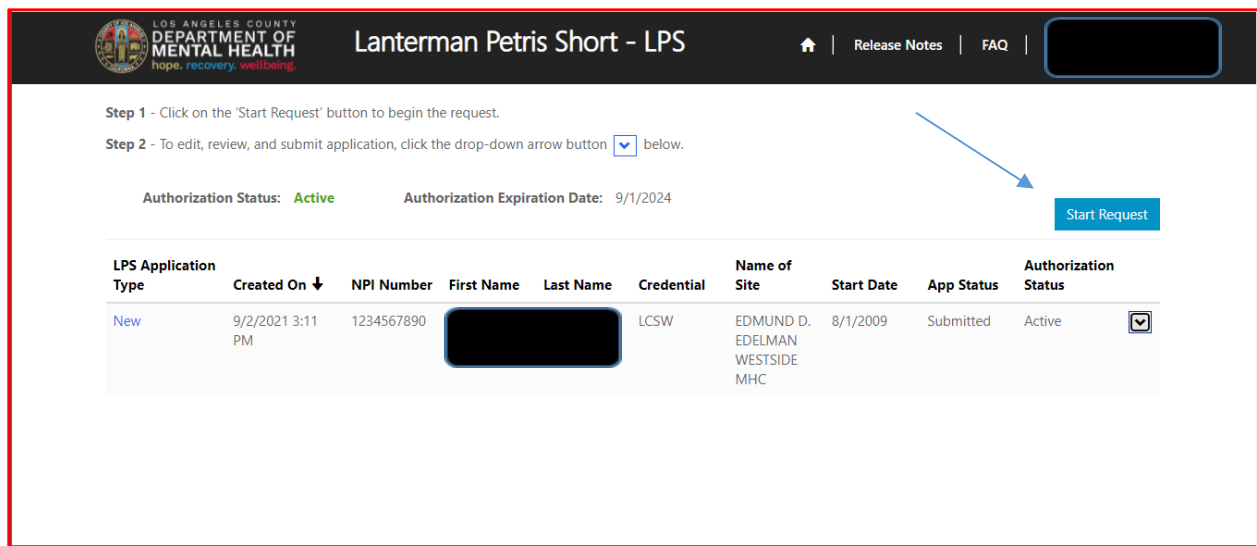


Select Azure AD.

You may be required to enter your “C” number and password to access account.



Select Start Request button.




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Lanterman Petris Short - LPS


Home | Release Notes | FAQ

Step 1 - Click on the 'Start Request' button to begin the request.

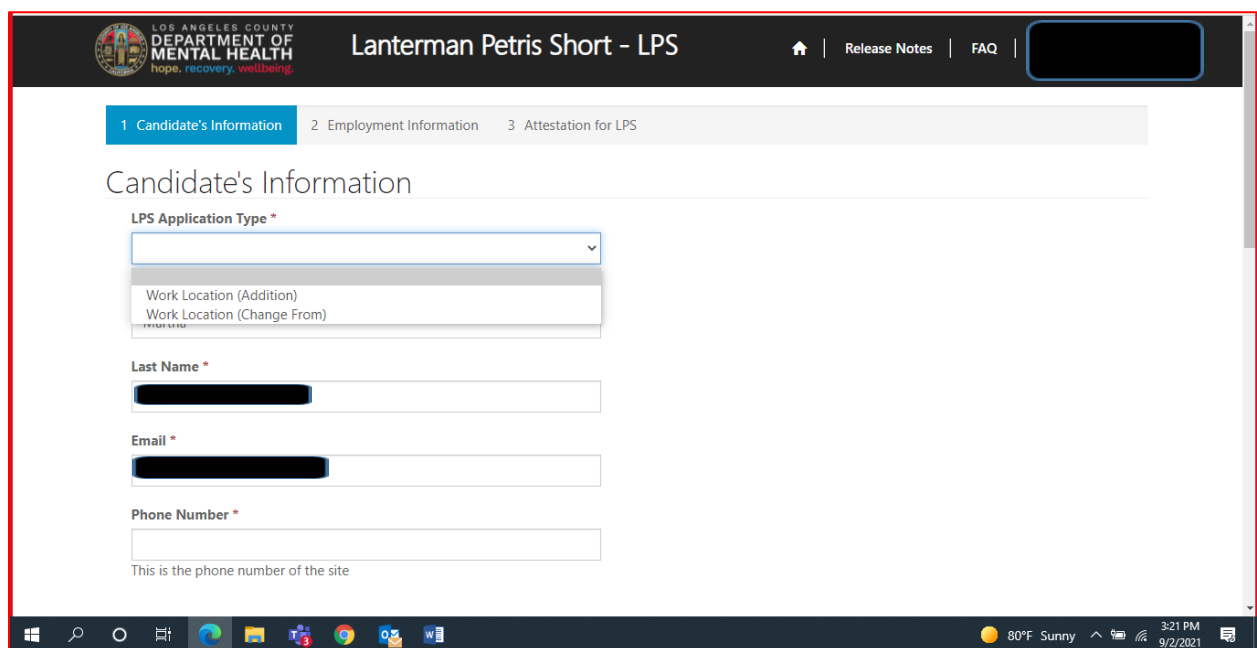
Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

[Start Request](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active 

Select Work Location (Addition) from the drop down menu.



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
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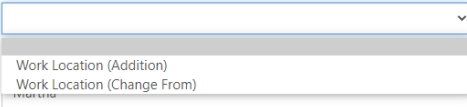
Lanterman Petris Short - LPS

Home | Release Notes | FAQ

1 Candidate's Information 2 Employment Information 3 Attestation for LPS


Candidate's Information

LPS Application Type *




Work Location (Addition)
Work Location (Change From)


Last Name *



Email *



Phone Number *



This is the phone number of the site

80°F Sunny 3:21 PM 9/2/2021

Review to ensure all fields are completed. If fields are blank, please provide information.

Candidate's Information

LPS Application Type *

Work Location (Addition) ▼

Authorization *

AUTH-001311

First Name *

Last Name *

Email *

Phone Number *

This is the phone number of the site

Individual NPI Number *

9097875654

Job Title *

Scope of Practice *

County/DMH or Contracted Facility Staff ▼

Credential *

LCSW ▼

License No *

Years Licensed *

Save and Next

Employment Information

Complete all fields.

Select NON-DMH Employee from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The top navigation bar includes the Los Angeles County Department of Mental Health logo, the title 'Lanterman Petris Short - LPS', and links for 'Release Notes' and 'FAQ'. Below the navigation bar, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The 'Employment Information' section contains the following fields:

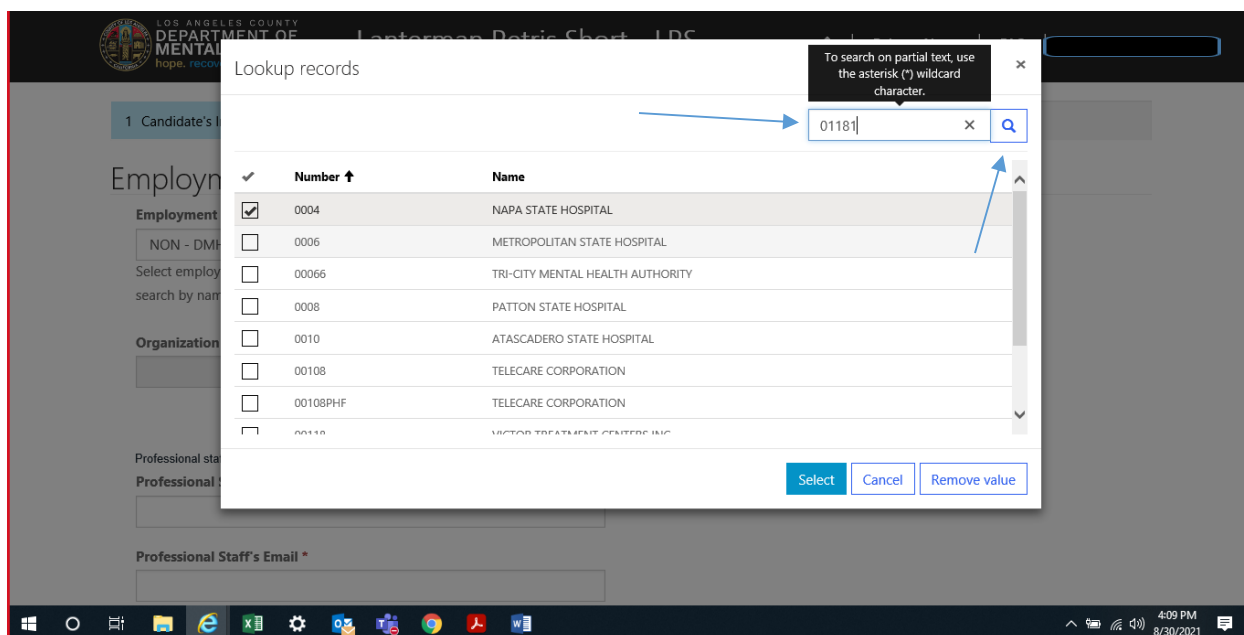
- Employment Type ***: A dropdown menu with 'NON - DMH Employee' selected. Below it, a note says 'Select employment type and then the [magnifying glass icon] to search by name or number.'
- Employment Start Date**: A date input field with a calendar icon.
- Organization Name ***: A text input field with a magnifying glass icon.
- Professional Staff Name ***: A text input field.
- Professional Staff's Email ***: A text input field.

Below the input fields, there is a note: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The Windows taskbar at the bottom shows the time as 4:07 PM on 8/30/2021.

Click on magnifying glass to search for work location.

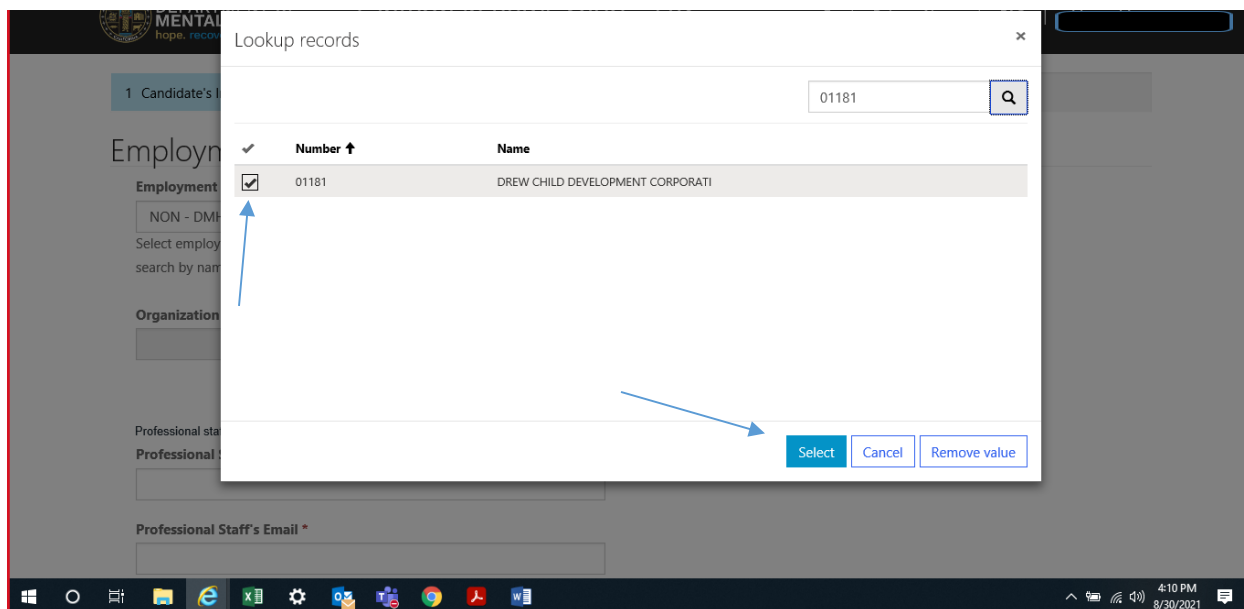
This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon next to the 'Organization Name' input field. The arrow originates from the right side of the screen and points directly to the magnifying glass icon.

In the search box, type in legal entity number and click on magnifying glass.



*If you are unsure of your legal entity number, please consult with the administration of your facility/clinic location.

When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

Please note, each location added must have a separate attestation attached.

(Electronic completion is acceptable).

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

Select Choose File button to attach attestation form.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

After confirming completed form has been attached, select Save and Home at the bottom of the screen.

Attestation for LPS


http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Testing and ...ent URL.txt

Select Submit from the drop-down menu.

**Lanterman Petris Short - LPS**Home | [Release Notes](#) | [FAQ](#) |

Step 1 - Click on the 'Start Request' button to begin the request.

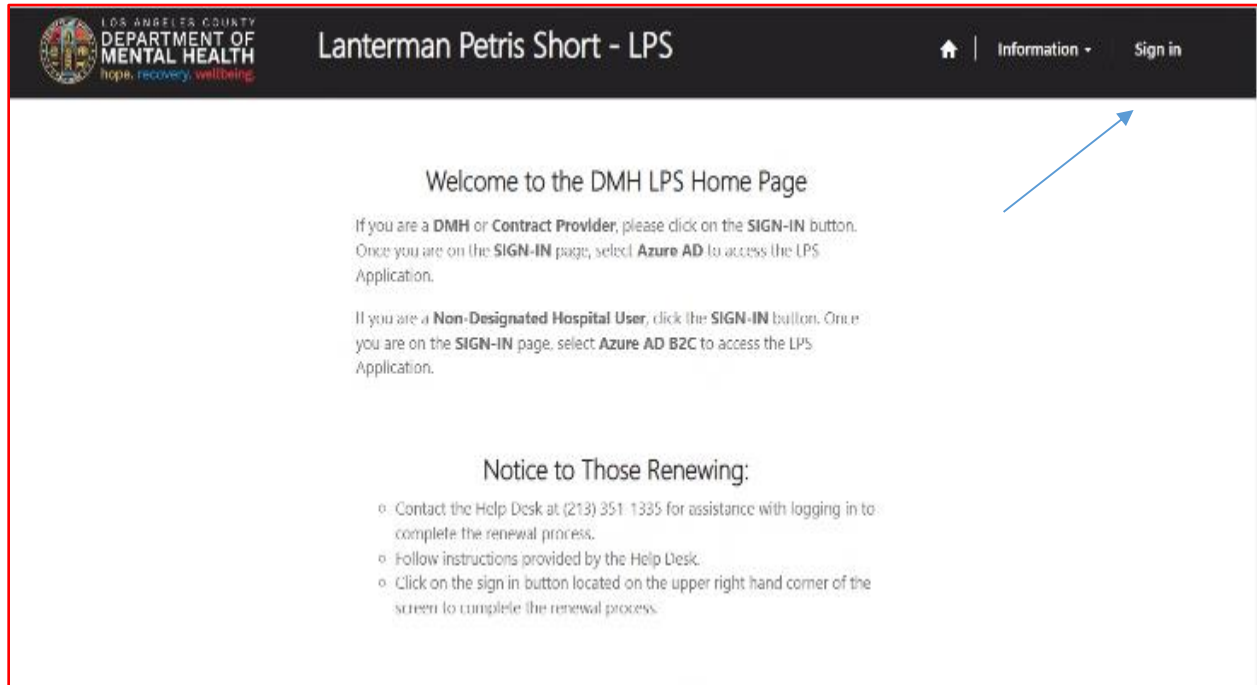
Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

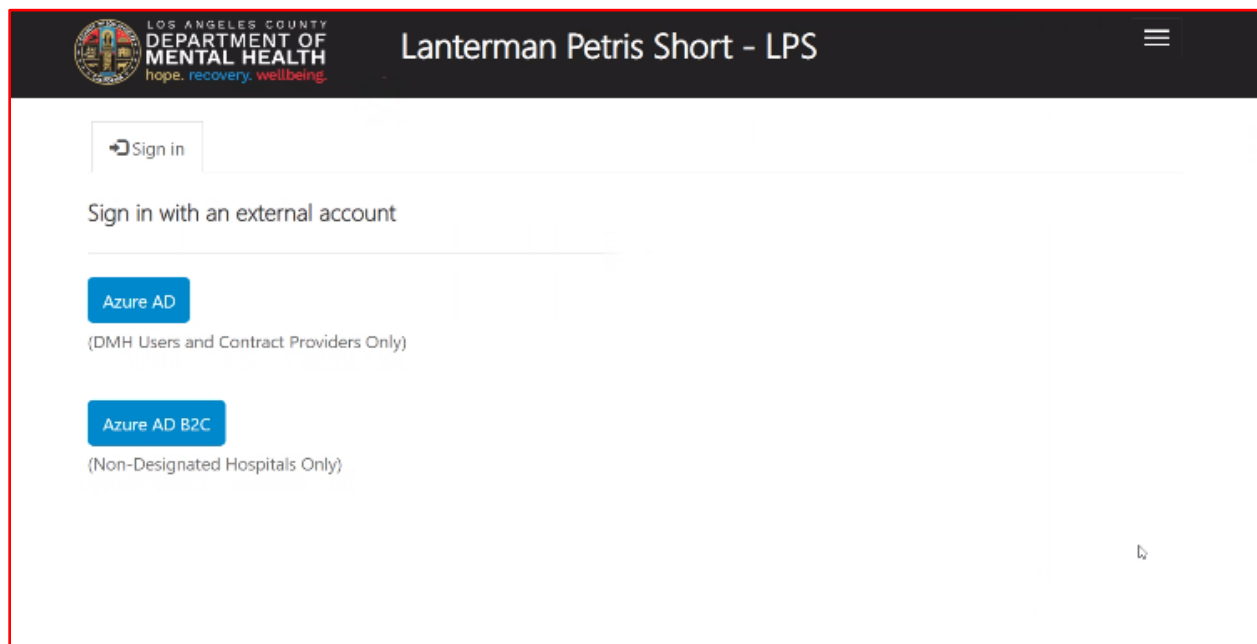
LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Addition)	9/2/2021 3:24 PM	1234567890			LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	8/10/2021	Unsubmitted	<input type="button" value="v"/>
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active <input type="button" value="v"/>

How to Add Location-Non-Renewal Phase NON-Designated Hospital


Select the sign in button in the upper right-hand corner.




Select Azure AD B2C.



Sign in with Email Address and Password.

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Lanterman Petris Short - LPS

 | [Information](#) ▾


Returning User - Sign-In

[Forgot your password?](#)


OR

Don't have an account? [Sign up now](#)

Select Start Request button.

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 | [Release Notes](#) | [FAQ](#) |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button ▾ below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active <input checked="" type="checkbox"/>

Select Work Location (Addition) from the drop-down menu.

The screenshot shows a web application for the Los Angeles County Department of Mental Health, titled "Lanterman Petris Short - LPS". The interface includes a header with the department's logo and navigation links for "Release Notes" and "FAQ". A progress bar at the top indicates three steps: "1 Candidate's Information", "2 Employment Information", and "3 Attestation for LPS". The main section is titled "Candidate's Information" and contains several form fields:

- LPS Application Type ***: A dropdown menu with a downward arrow. The dropdown is open, showing two options: "Work Location (Addition)" and "Work Location (Change From)".
- Last Name ***: A text input field containing a redacted black bar.
- Email ***: A text input field containing a redacted black bar.
- Phone Number ***: A text input field.

Below the phone number field, a note states: "This is the phone number of the site". The bottom of the image shows a Windows taskbar with various application icons and a system tray displaying "80°F Sunny", "3:21 PM", and "9/2/2021".

Review to ensure all fields are completed. If fields are blank, please provide information.

Candidate's Information

LPS Application Type *

Work Location (Addition) ▼

Authorization *

AUTH-001311

First Name *

Last Name *

Email *

Phone Number *

This is the phone number of the site

Individual NPI Number *

9097875654

Job Title *

Scope of Practice *

County/DMH or Contracted Facility Staff ▼

Credential *

LCSW ▼

License No *

Years Licensed *

Save and Next

Employment Information

Complete all fields.

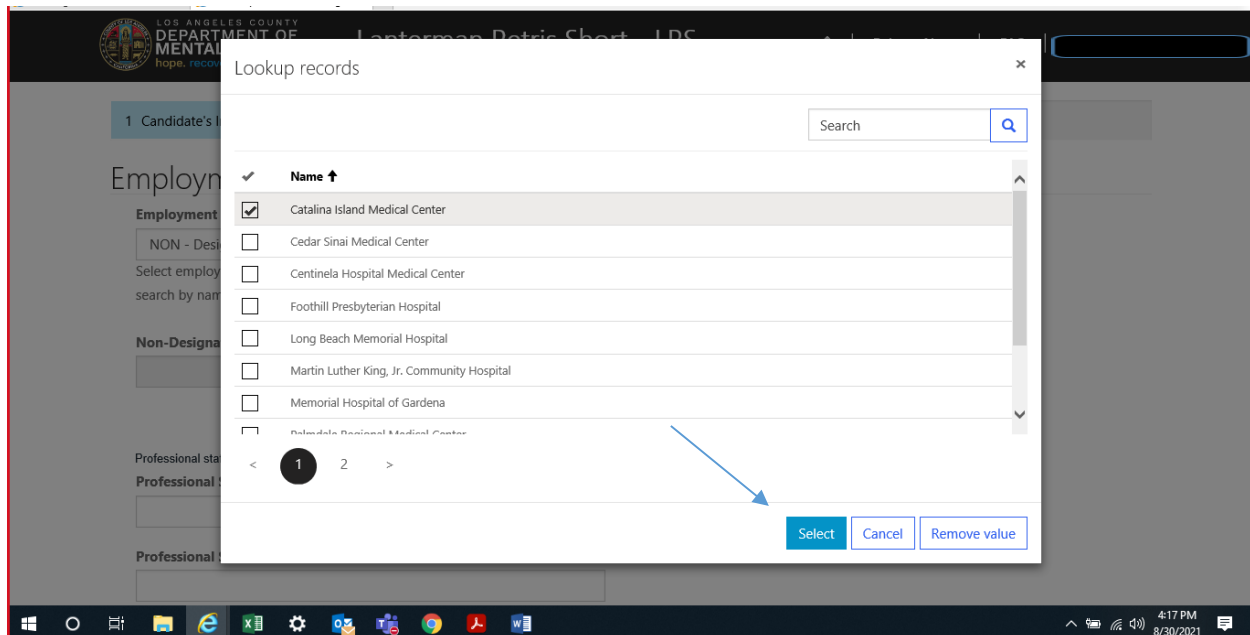
Select NON-Designated Hospital from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The top navigation bar includes the Los Angeles County Department of Mental Health logo, the title 'Lanterman Petris Short - LPS', and links for 'Release Notes' and 'FAQ'. Below the navigation bar, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The main heading is 'Employment Information'. The form contains several fields: 'Employment Type' (a dropdown menu with 'NON - Designated Hospital' selected), 'Employment Start Date' (a date picker), 'Non-Designated Hospitals' (a search bar with a magnifying glass icon), 'Professional Staff Name' (a text input field), and 'Professional Staff's Email' (a text input field). A note below the search bar reads: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The Windows taskbar at the bottom shows the time as 4:13 PM on 8/30/2021.

Click on magnifying glass.

This screenshot is identical to the one above, but with a blue arrow pointing to the magnifying glass icon in the 'Non-Designated Hospitals' search bar. The arrow originates from the right side of the screen and points directly to the magnifying glass icon, indicating where the user should click.

Select work location from list provided on page 1 or 2 and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

Please note, each location added must have a separate attestation attached.

(Electronic completion is acceptable).

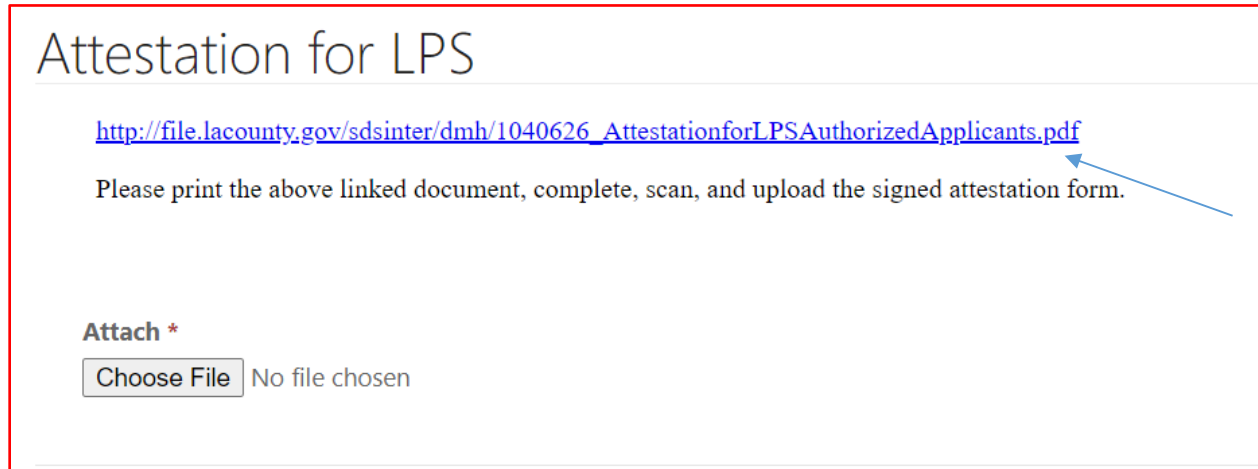
Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

A screenshot of a web form titled "Attestation for LPS". It contains a blue hyperlink to a PDF document. Below the link is a text instruction. Underneath is a section labeled "Attach *" with a "Choose File" button and the text "No file chosen". A blue arrow points from the right side of the form to the hyperlink.

Select Choose File button to attach the attestation form.

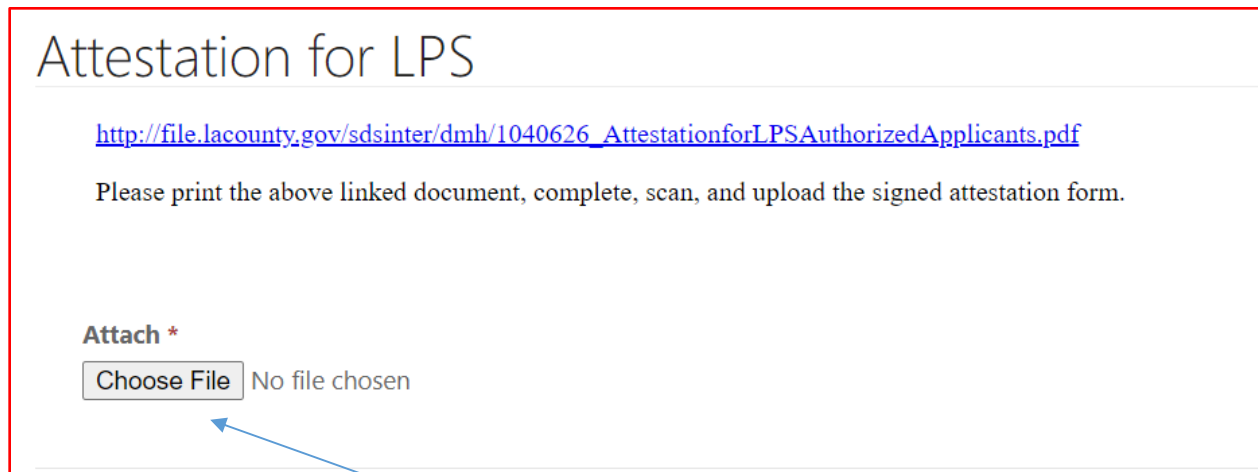
Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

A screenshot of the same "Attestation for LPS" form. It includes the title, the same hyperlink, the instruction text, and the "Attach *" section with the "Choose File" button and "No file chosen" text. A blue arrow points from the bottom right of the form to the "Choose File" button.

After confirming completed form has been attached, select Save and Home at the bottom of the screen.

Attestation for LPS


http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Testing and ...ent URL.txt

Select Submit from the drop-down menu.



Lanterman Petris Short - LPS

[Home](#) | [Release Notes](#) | [FAQ](#) |

Step 1 - Click on the 'Start Request' button to begin the request.
Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

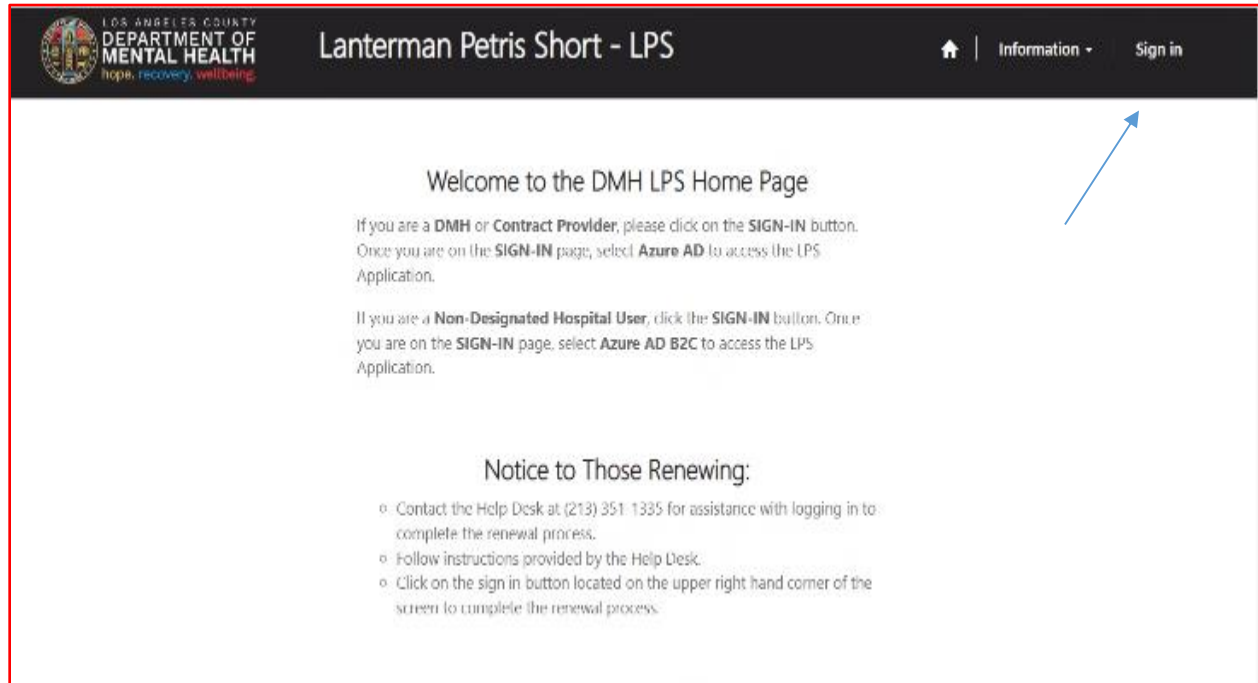
Authorization Status: Active Authorization Expiration Date: 9/1/2024

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Addition)	9/2/2021 3:24 PM	1234567890	[REDACTED]	[REDACTED]	LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	8/10/2021	Unsubmitted	<input checked="" type="checkbox"/> <div> Edit Details Submit </div>
New	9/2/2021 3:11 PM	1234567890	[REDACTED]	[REDACTED]	LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active <input type="button" value="v"/>

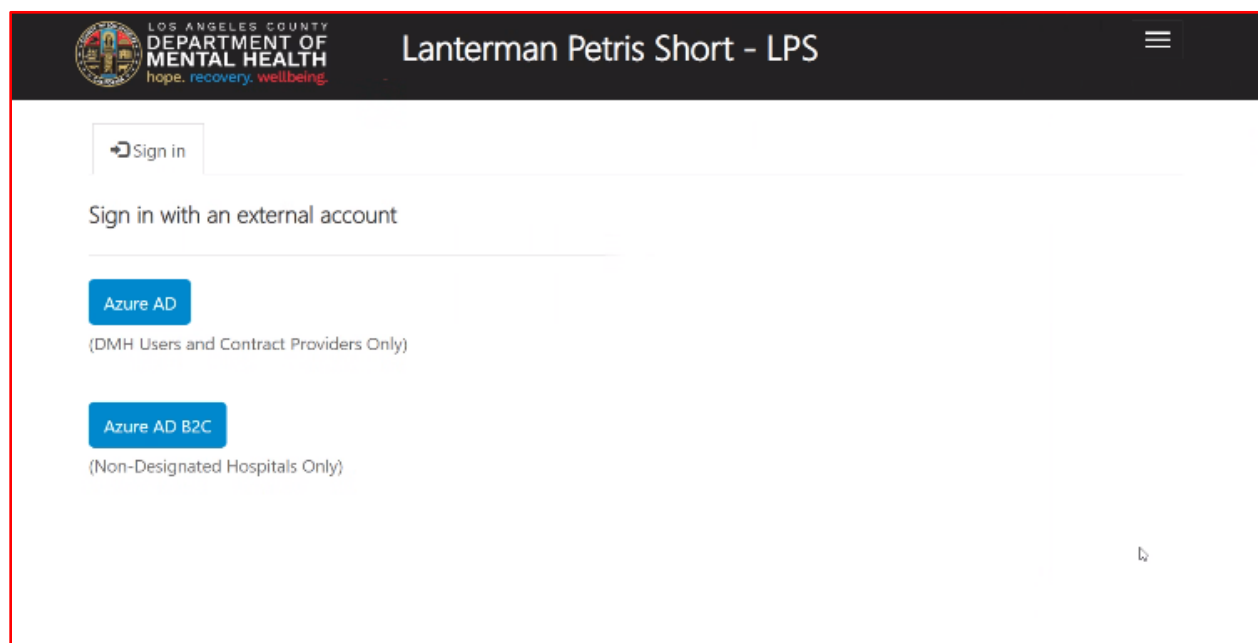
How to Change Location-Non-Renewal Phase

DMH Employees


Select the sign in button in the upper right-hand corner.



Select Azure AD.




Select Start Request button.



Lanterman Petris Short - LPS

[Release Notes](#) | [FAQ](#) |



Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

Authorization Status: **Active**

Authorization Expiration Date: 9/1/2024

[Start Request](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Addition)	9/2/2021 3:24 PM	1234567890			LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	8/10/2021	Submitted	
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active 

Select Work Location (Change From) from the drop-down menu.

The screenshot shows a web browser window with the URL https://lacadmhlpsuat.dynamics365portals.us/LPS_Registration/request-webform/. The page header includes the Los Angeles County Department of Mental Health logo and the title "Lanterman Petris Short - LPS". The navigation bar shows three steps: "1 Candidate's Information", "2 Employment Information", and "3 Attestation for LPS". The "Candidate's Information" section is active and contains the following fields:

- LPS Application Type ***: A dropdown menu with the following options:
 - Work Location (Addition)
 - Work Location (Change From)
- Last Name ***: A text input field with a blacked-out value.
- Email ***: A text input field with a blacked-out value.
- Phone Number ***: A text input field.

Below the Phone Number field, there is a note: "This is the phone number of the site".

Review to ensure all fields are completed. If fields are blank, please provide information.

Candidate's Information

LPS Application Type *

Work Location (Addition) ▼

Authorization *

AUTH-001311

First Name *

Last Name *

Email *

Phone Number *

This is the phone number of the site

Individual NPI Number *

9097875654

Job Title *

Scope of Practice *

County/DMH or Contracted Facility Staff ▼

Credential *

LCSW ▼

License No *

Years Licensed *

Save and Next

Employment Information

Complete all fields.

Select DMH Employee from the drop-down menu.

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Lanterman Petris Short - LPS

1. Candidate's Information ✓ 2. Employment Information 3. Attestation for LPS

Employment Information

DMH Employee
NON - DMH Employee
NON - Designated Hospital

Employment Start Date

Service Location *

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Click on magnifying glass to search for work location.

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Lanterman Petris Short - LPS

1. Candidate's Information ✓ 2. Employment Information 3. Attestation for LPS

Employment Information

Employment Type *

NON - DMH Employee

Select employment type and then the [magnifying glass icon] to search by name or number.

Organization Name *

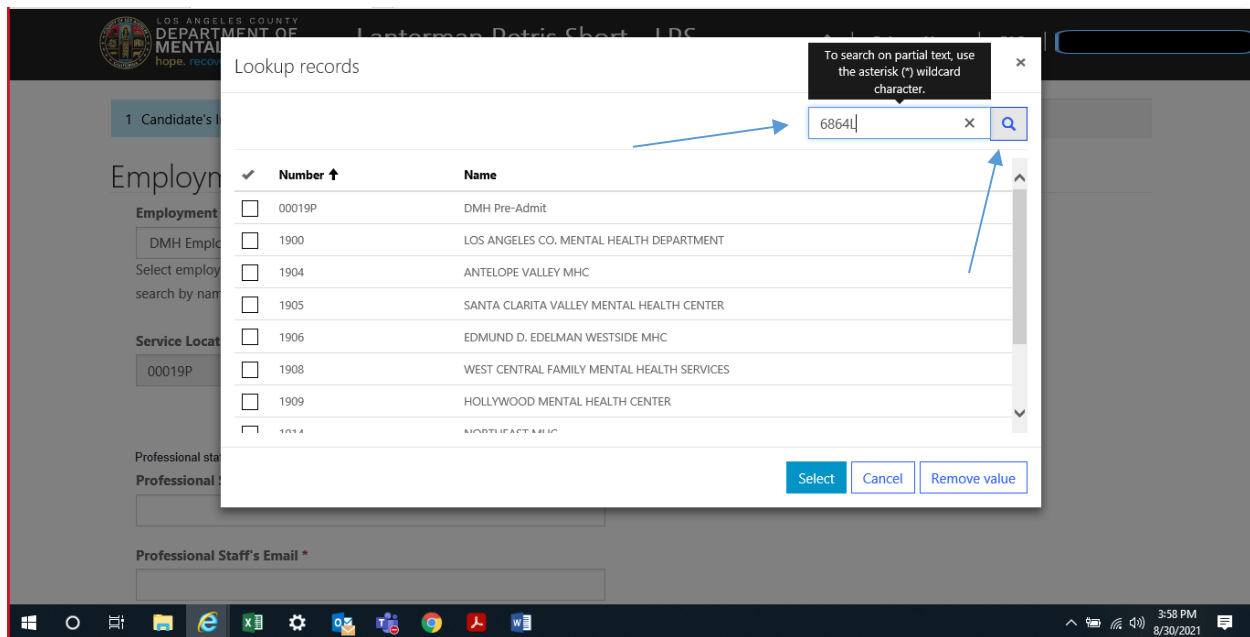
Employment Start Date

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

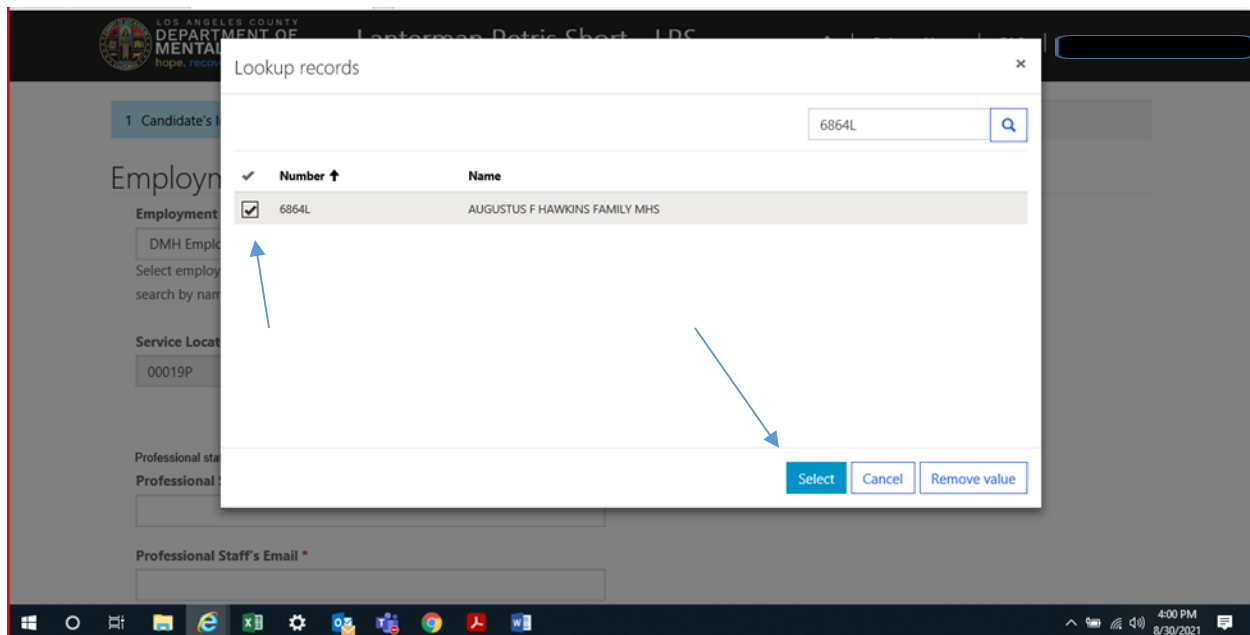
Professional Staff Name *

Professional Staff's Email *

In the search box, type in provider number and click on magnifying glass.



When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable).

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

Select Choose File button to attach the attestation form.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

After confirming completed form has been attached, select Save and Home at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *


Choose File

Testing and ...ent URL.txt

Save and Previous

Save and Home

Select Submit from the drop-down menu.




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Lanterman Petris Short - LPS

[Home](#) | [Release Notes](#) | [FAQ](#) |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Change From)	9/21/2021 10:38 AM	1234567890			LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	9/2/2021	Unsubmitted	

Edit

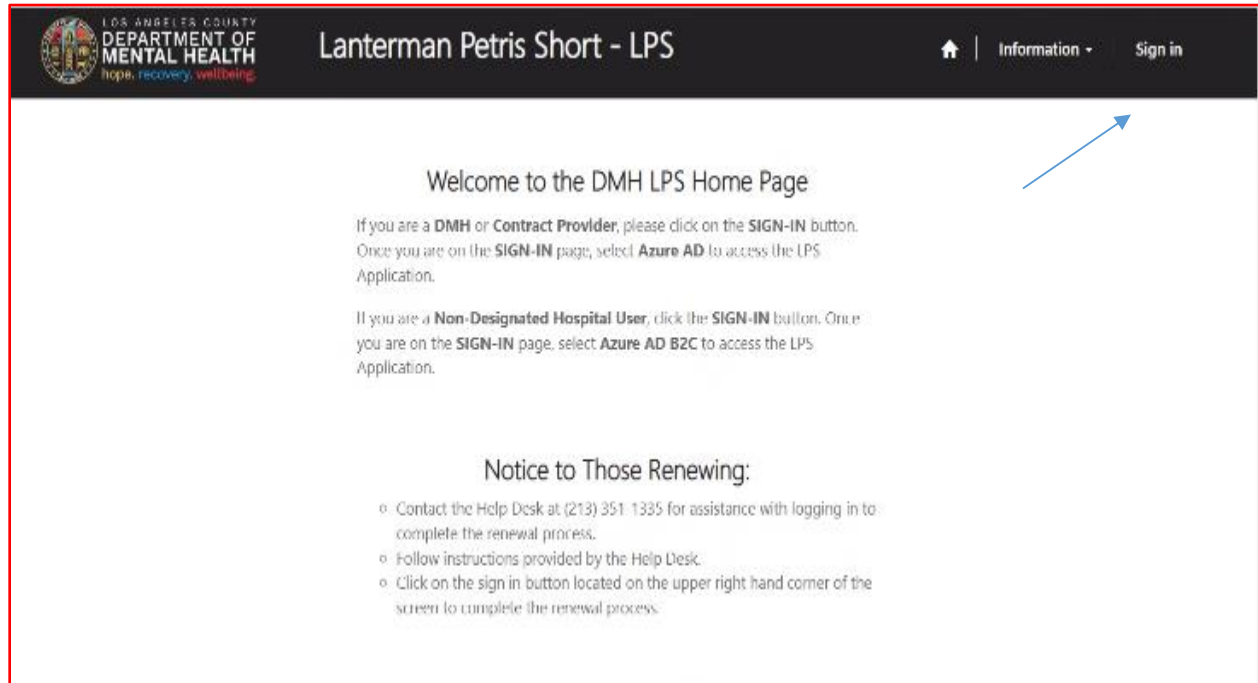
Details

Submit

How to Change Location-Non-Renewal Phase

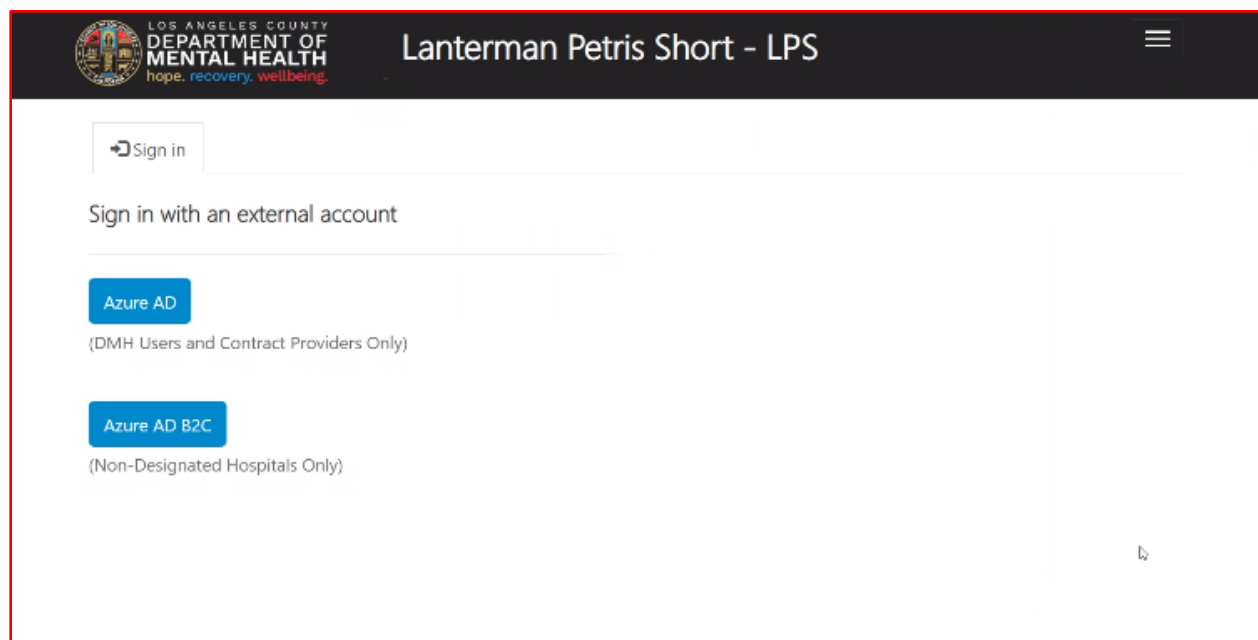
NON-DMH Employees

Select the sign in button in the upper right-hand corner.

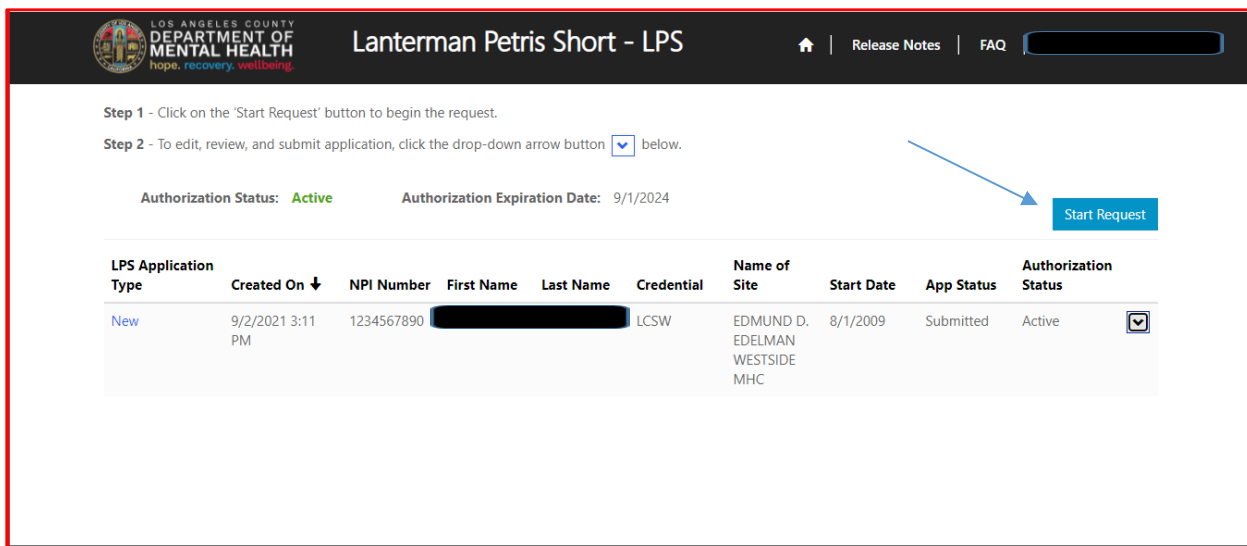


Select Azure AD.

You may be required to enter your "C" number and password to access account.



Select Start Request button.




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Step 1 - Click on the 'Start Request' button to begin the request.

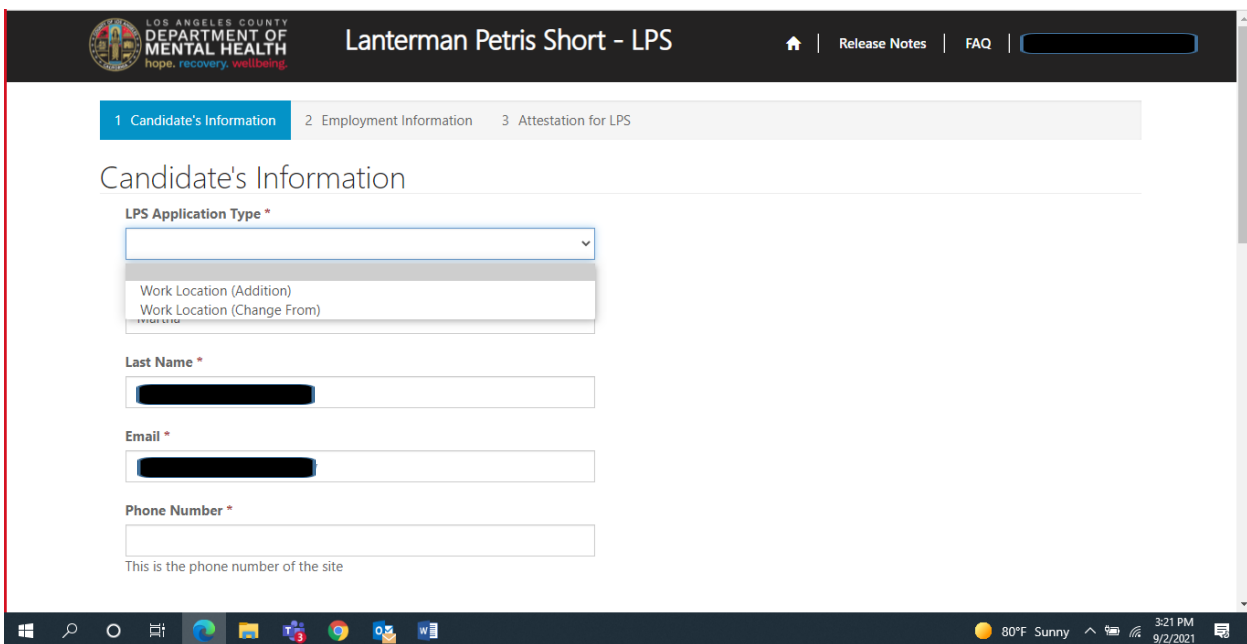
Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

Start Request

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active 

Select Work Location (Change From) from the drop-down menu.



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1 Candidate's Information 2 Employment Information 3 Attestation for LPS

Candidate's Information

LPS Application Type *

Work Location (Addition)
Work Location (Change From)

Last Name *

Email *

Phone Number *

This is the phone number of the site

Review to ensure all fields are completed. If fields are blank, please provide information.

Candidate's Information

LPS Application Type *

Work Location (Addition) ▼

Authorization *

AUTH-001311

First Name *

Last Name *

Email *

Phone Number *

This is the phone number of the site

Individual NPI Number *

9097875654

Job Title *

Scope of Practice *

County/DMH or Contracted Facility Staff ▼

Credential *

LCSW ▼

License No *

Years Licensed *

Save and Next

Employment Information

Complete all fields.

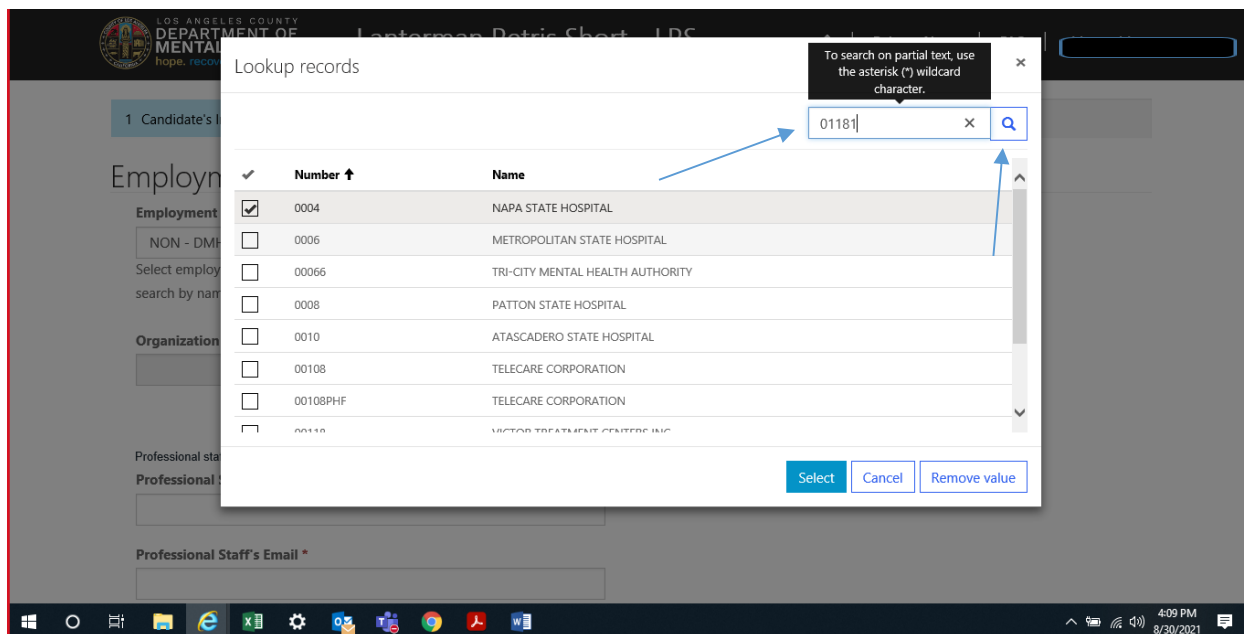
Select NON-DMH Employee from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The header includes the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. The navigation bar shows three steps: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The form fields include: 'Employment Type' (a dropdown menu with 'NON - DMH Employee' selected), 'Employment Start Date' (a date picker), 'Organization Name' (a text field with a magnifying glass icon), 'Professional Staff Name' (a text field), and 'Professional Staff's Email' (a text field). A note below the Organization Name field states: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The Windows taskbar at the bottom shows the time as 4:07 PM on 8/30/2021.

Click on magnifying glass to search for work location.

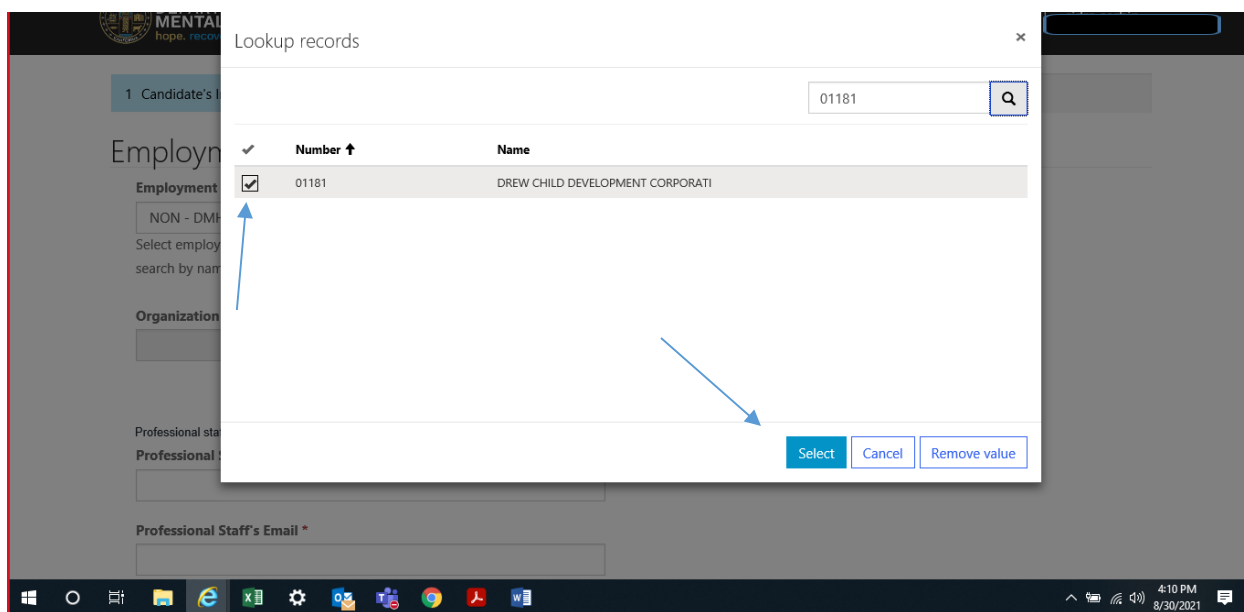
This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon next to the 'Organization Name' field. The arrow originates from the right side of the form and points directly to the search icon, indicating the next step in the process.

In the search box, type in legal entity number and click on magnifying glass.



*If you are unsure of your legal entity number, please consult with administration of your facility/clinic location.

When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable).

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File

No file chosen

Select Choose File button.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File

No file chosen

After confirming completed form has been attached, select Save and Home at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *


Choose File

Testing and ...ent URL.txt

Save and Previous

Save and Home


Select Submit from the drop-down menu.



Lanternman Petris Short - LPS

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Step 1 - Click on the 'Start Request' button to begin the request.

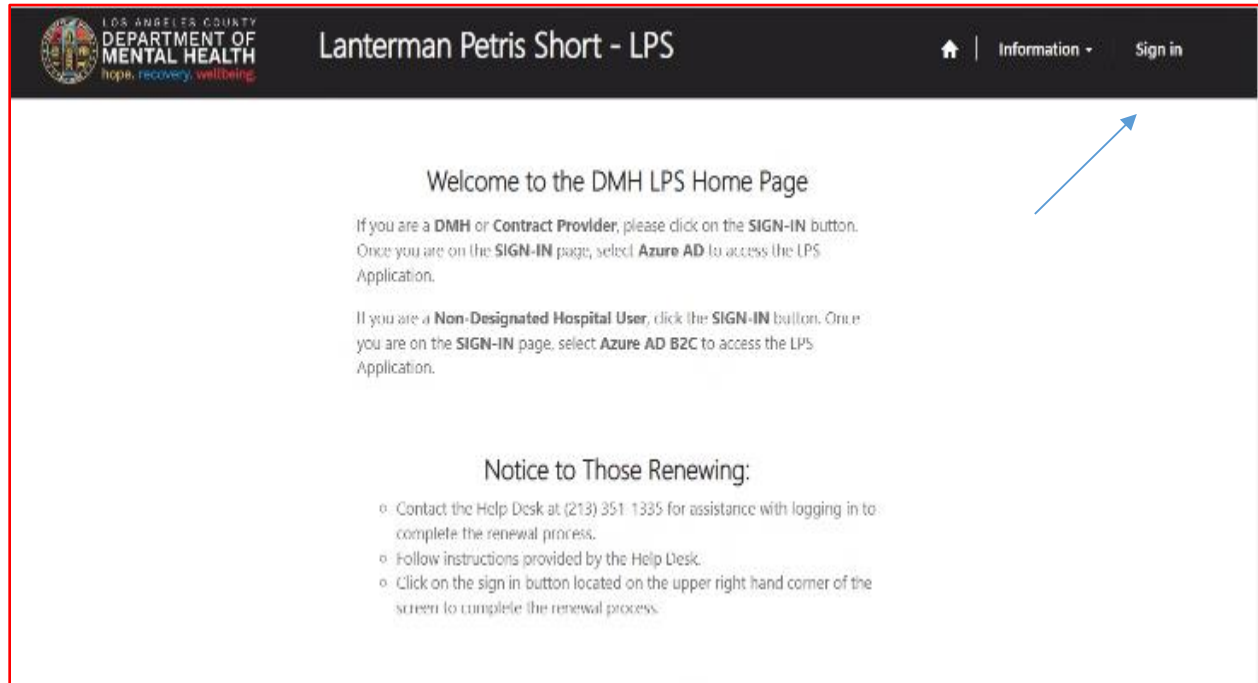
Step 2 - To edit, review, and submit application, click the drop-down arrow button  below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

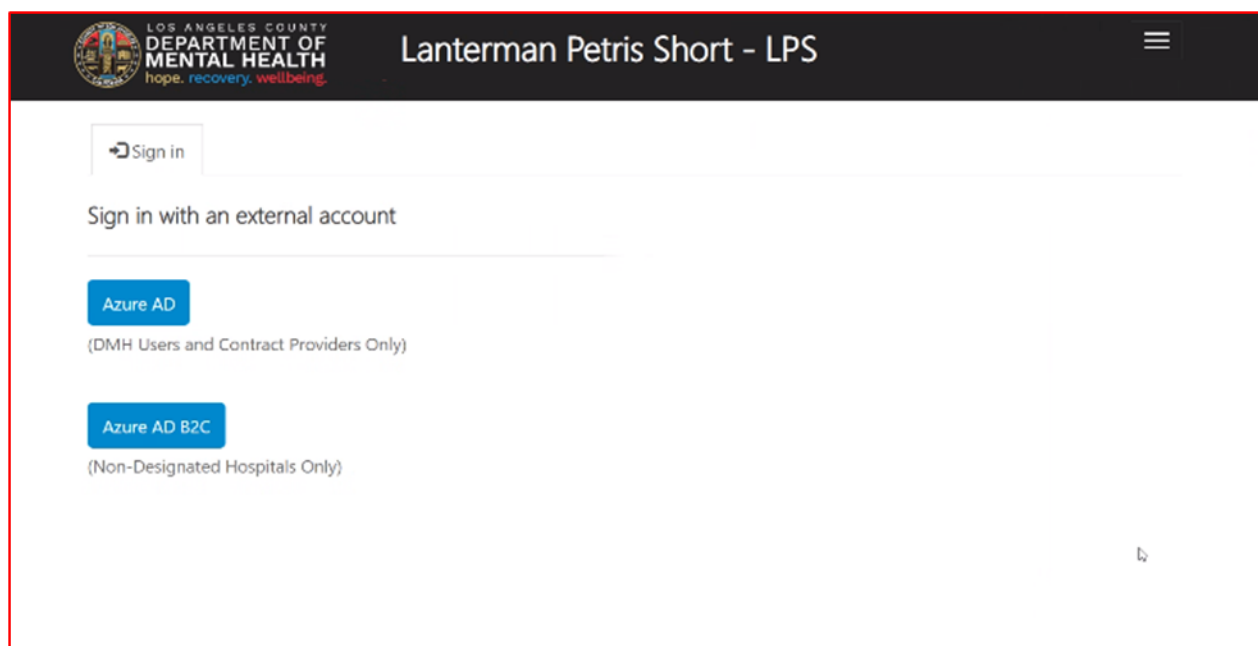
LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Change From)	9/21/2021 10:38 AM	1234567890	<div></div>		LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	9/2/2021	Unsubmitted	<div><div></div><div>Edit</div><div>Details</div><div>Submit</div></div>

How to Change Location-Non-Renewal Phase NON-Designated Hospital


Select the sign in button in the upper right-hand corner.




Select Azure AD B2C.



Sign in with Email Address and Password.

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 | [Information](#) ▾


Returning User - Sign-In

[Forgot your password?](#)


OR

Don't have an account? [Sign up now](#)

Select Start Request button.

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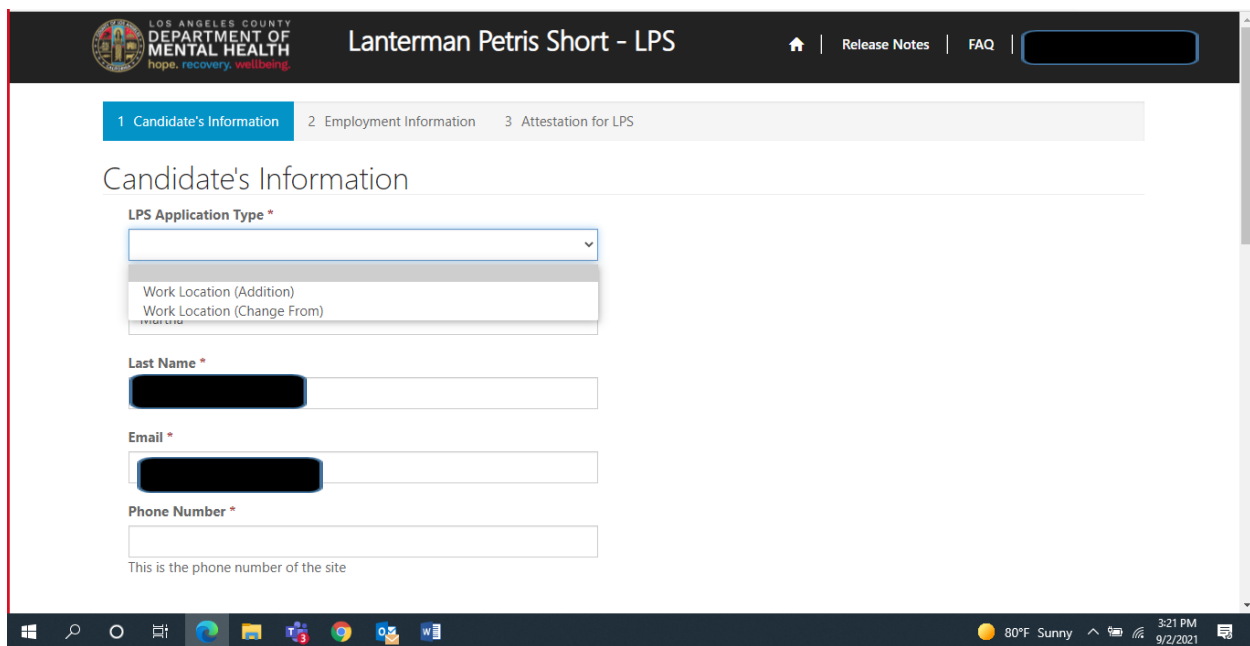
Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button ▾ below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
New	9/2/2021 3:11 PM	1234567890			LCSW	EDMUND D. EDELMAN WESTSIDE MHC	8/1/2009	Submitted	Active <input checked="" type="checkbox"/>

Select Work Location (Change From) from the drop-down menu.



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1 Candidate's Information 2 Employment Information 3 Attestation for LPS

Candidate's Information

LPS Application Type *

Work Location (Addition)
Work Location (Change From)

Last Name *

Email *

Phone Number *

This is the phone number of the site

Review to ensure all fields are completed. If fields are blank, please provide information.

Candidate's Information

LPS Application Type *

Work Location (Addition) ▼

Authorization *

AUTH-001311

First Name *

Last Name *

Email *

Phone Number *

This is the phone number of the site

Individual NPI Number *

9097875654

Job Title *

Scope of Practice *

County/DMH or Contracted Facility Staff ▼

Credential *

LCSW ▼

License No *

Years Licensed *

Save and Next

Employment Information

Complete all fields.

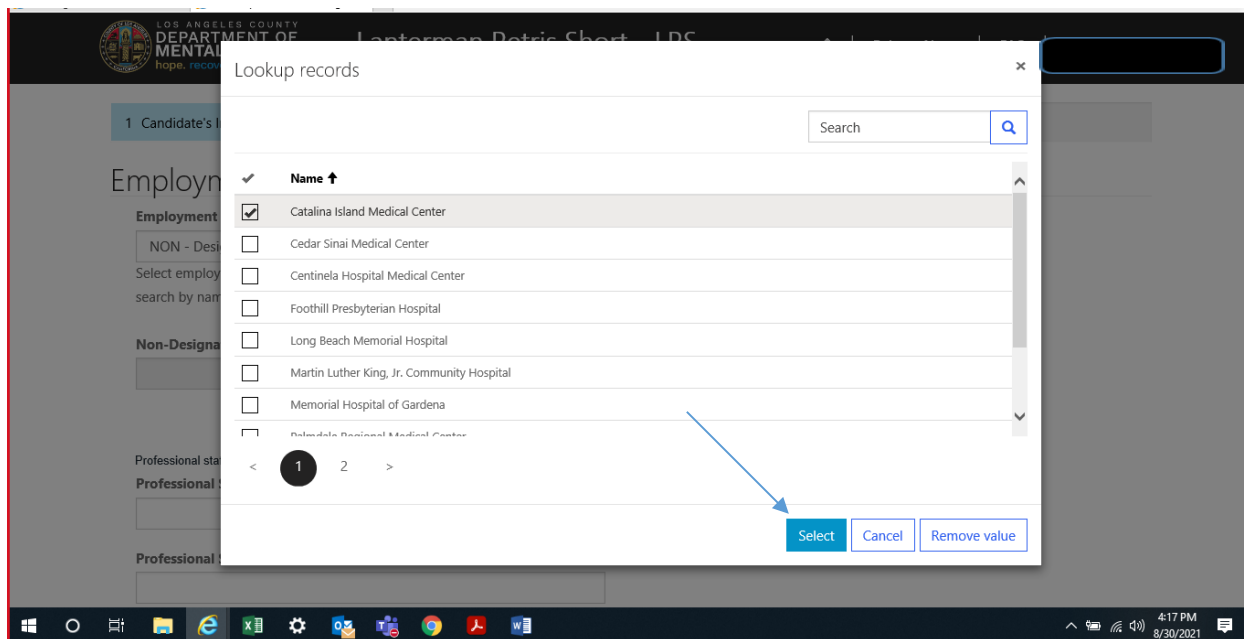
Select NON-Designated Hospital from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. At the top, there is a header with the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. Below the header, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The main heading is 'Employment Information'. Under this heading, there are several fields: 'Employment Type *' with a dropdown menu showing 'NON - Designated Hospital'; 'Employment Start Date' with a date picker; 'Non-Designated Hospitals *' with a search bar and a magnifying glass icon; 'Professional Staff Name *' with a text input field; and 'Professional Staff's Email *' with a text input field. A note below the email field states: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The bottom of the screen shows a Windows taskbar with various application icons and a system clock indicating 4:13 PM on 8/30/2021.

Click on magnifying glass.

This screenshot is identical to the one above, but with a blue arrow pointing to the magnifying glass icon in the 'Non-Designated Hospitals *' search bar. The arrow originates from the right side of the form and points directly to the magnifying glass icon, indicating where the user should click to search for hospitals.

Select work location from list provided on page 1 or 2 and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable).

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

Select Choose File button.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

No file chosen

After confirming completed form has been attached, select Save and Home at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *


Choose File

Testing and ...ent URL.txt

Save and Previous

Save and Home

Select Submit from the drop-down menu.



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Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Active** Authorization Expiration Date: 9/1/2024

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
Work Location (Change From)	9/21/2021 10:38 AM	1234567890			LCSW	SANTA CLARITA VALLEY MENTAL HEALTH CENTER	9/2/2021	Unsubmitted	<div><input type="button" value="v"/><div><div>Edit</div><div>Details</div><div>Submit</div></div></div>

Renewal Application

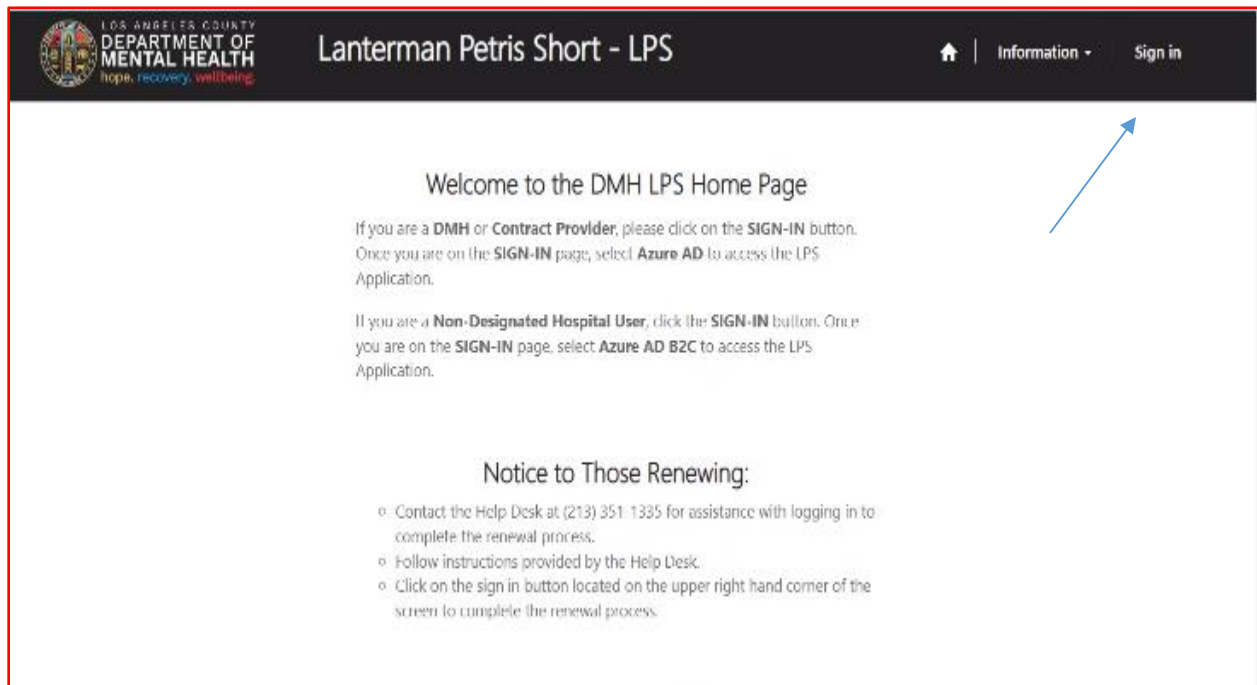
DMH Employees:

Contact the Help Desk at (213) 351-1335 for assistance with logging in to complete the renewal process. Follow the instructions provided by the Help Desk.

To access the Provider Application Portal, copy and paste the below URL into your internet browser. The recommended browsers are Google Chrome and Microsoft Edge.

<https://lacdmhlpsprod.dynamics365portals.us/>

Select the sign in button in the upper right-hand corner.



Select Azure AD to begin the renewal process.

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Sign in

Sign in with an external account

Azure AD
(DMH Users and Contract Providers Only)

Azure AD B2C
(Non-Designated Hospitals Only)

Select Authorization Renewal button.

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Step 1 - Click on the 'Start Request' button to begin the request.


Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Expired** Authorization Expiration Date: 2/21/2021

Authorization Renewal

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Edit from the drop-down menu.



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Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1234567890			ANTELOPE VALLEY MHC				<div>New <input checked="" type="checkbox"/></div> <div>Edit</div> <div>Delete</div>

Authorization

Authorization Type

Renew

Evaluator Name


Authorization Number

AUTH-003774

Submit


Candidate's Information

Review to ensure all fields are completed. If fields are blank, please provide information.

 Edit ×

Candidate's Information

First Name *	App Status
<input type="text" value=""/>	Unsubmitted
Last Name *	Created On
<input type="text" value=""/>	9/1/2021 1:41 PM
Individual NPI Number *	
<input type="text" value="1913191319"/>	
Job Title *	
<input type="text" value=""/>	
Scope of Practice *	
<input type="text" value="County/DMH or Contracted Facility Sta"/>	

 Edit ×

Credential *
<input type="text" value="LCSW"/>
License No *
<input type="text" value="72000"/>
Years Licensed *
<input type="text" value="12 to 18 months"/>

Employment Information and Professional Staff

Indicate the employment start date.

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Employment Information

Employment Start Date

3/30/2023



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

John Test

Professional Staff's Email *

JTest@testingsite.com

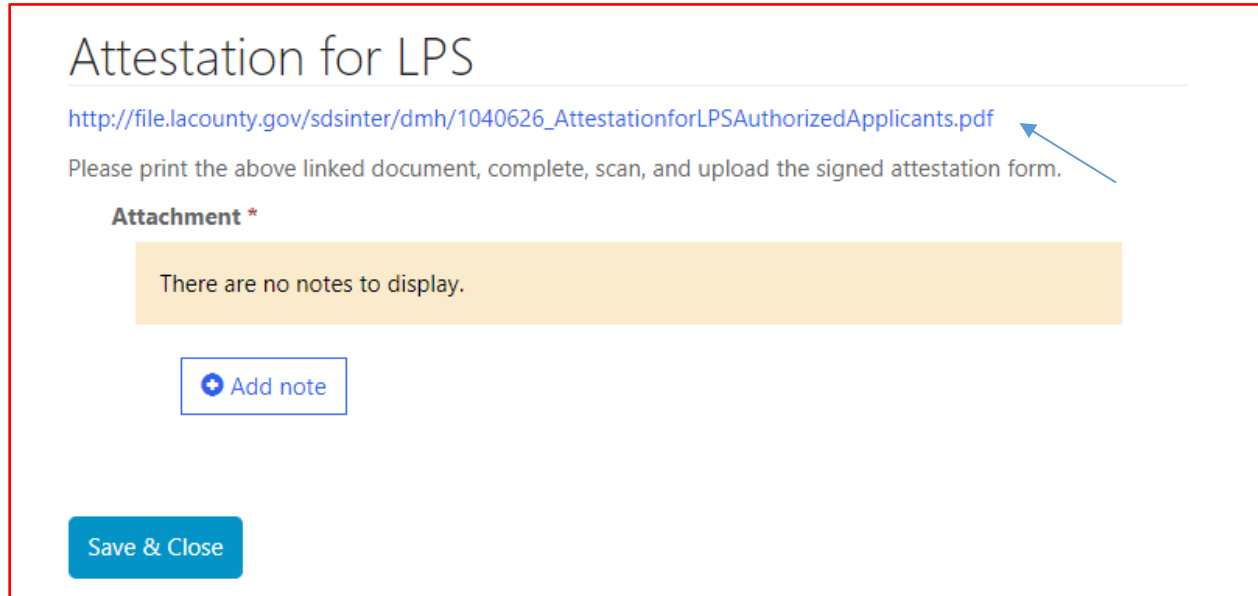
Professional Staff's Phone # *

(213) 999-0019

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable).



Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

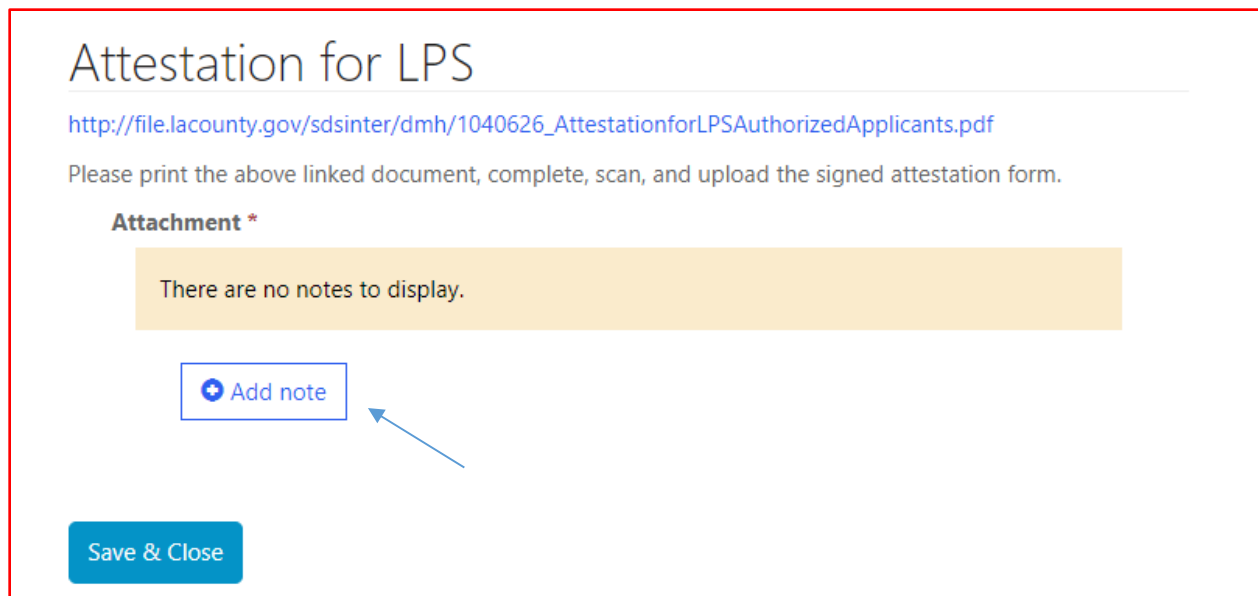
Attachment *

There are no notes to display.

[+ Add note](#)

[Save & Close](#)

Select Add note to Choose File and Upload/Attach the attestation form.



Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

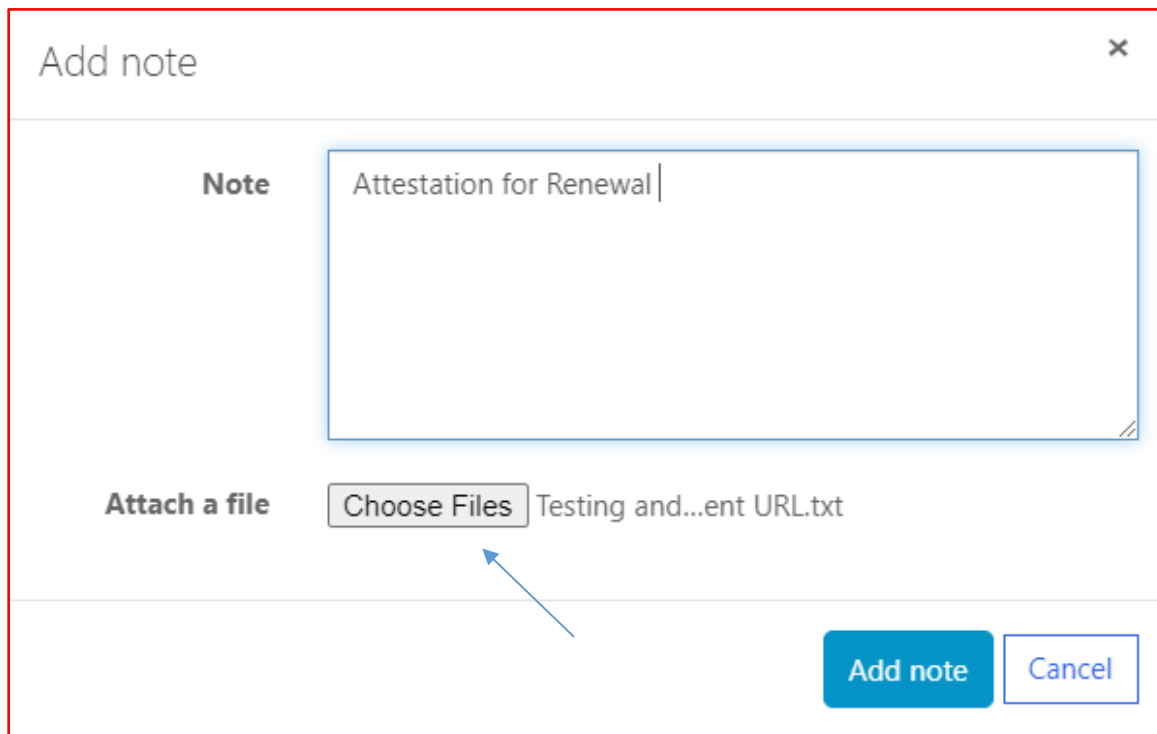
Attachment *

There are no notes to display.

[+ Add note](#)

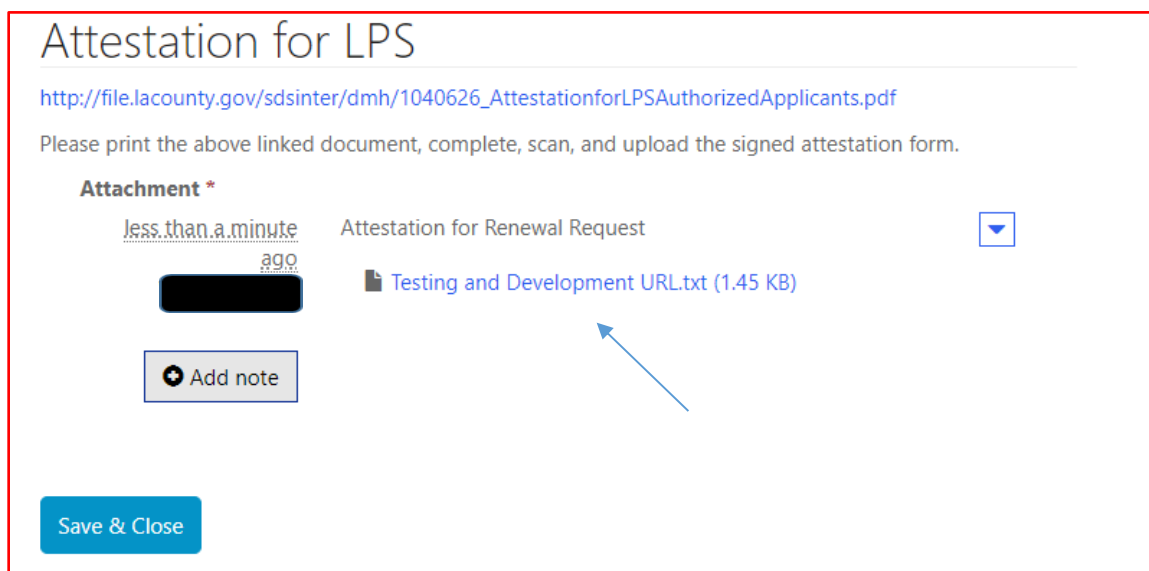
[Save & Close](#)

Select Choose Files button. Attach the attestation form and include a note indicating the document being attached.




The screenshot shows a modal dialog titled "Add note" with a close button (X) in the top right corner. Inside the dialog, there is a text area labeled "Note" containing the text "Attestation for Renewal". Below the text area, there is a section labeled "Attach a file" which includes a "Choose Files" button and the text "Testing and...ent URL.txt". A blue arrow points from the "Choose Files" button to the "Testing and...ent URL.txt" text. At the bottom right of the dialog, there are two buttons: "Add note" (in blue) and "Cancel" (in white with a blue border).

After confirming completed form has been attached, select Save & Close at the bottom of the screen.



The screenshot shows a web page titled "Attestation for LPS". Below the title is a URL: http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf. Below the URL is the text: "Please print the above linked document, complete, scan, and upload the signed attestation form." Under the heading "Attachment *", there is a list of attachments. The first attachment is "Attestation for Renewal Request" with a dropdown arrow to its right. Below it is "Testing and Development URL.txt (1.45 KB)" with a document icon to its left. A blue arrow points from the "Testing and Development URL.txt (1.45 KB)" text to the "Add note" button. Below the attachments, there is a button labeled "Add note" with a plus icon. At the bottom left of the page, there is a blue button labeled "Save & Close".

Select submit at the bottom of the screen.



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Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319			WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New

Authorization

Authorization Type

Renew

Evaluator Name

Authorization Number

AUTH-001199

Submit

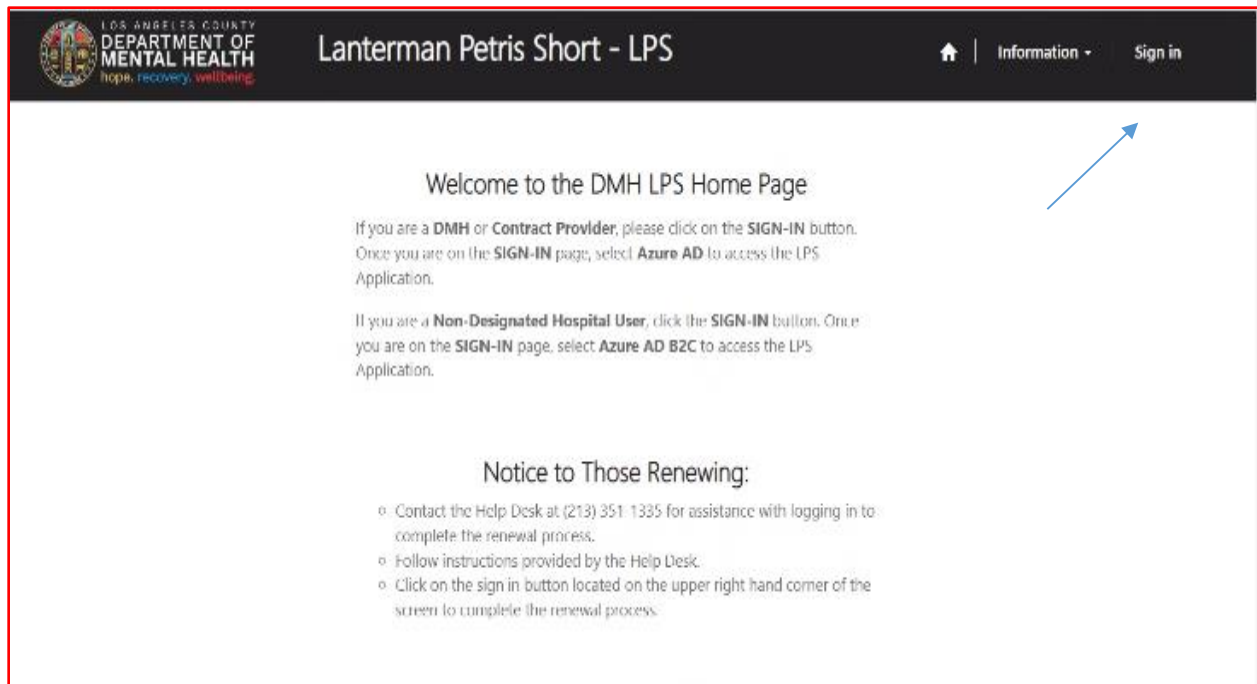
Renewal Application Non-DMH Employee

Contact the Help Desk at (213) 351-1335 for assistance with logging in to complete the renewal process. Follow the instructions provided by the Help Desk.

To access the Provider Application Portal, copy and paste the below URL into your internet browser. The recommended browsers are Google Chrome and Microsoft Edge.

<https://lacdmhlpsprod.dynamics365portals.us/>

Select the sign in button in the upper right-hand corner.



Select Azure AD to begin the renewal process.

You may be required to enter your “C” number and password to access account.


The screenshot shows the top navigation bar of the 'Lanterman Petris Short - LPS' system. On the left is the Los Angeles County Department of Mental Health logo with the tagline 'hope. recovery. wellbeing.'. The title 'Lanterman Petris Short - LPS' is centered. A hamburger menu icon is on the right. Below the header, there is a 'Sign in' button with an external account icon. Underneath, it says 'Sign in with an external account'. Two blue buttons are visible: 'Azure AD' with the subtext '(DMH Users and Contract Providers Only)' and 'Azure AD B2C' with the subtext '(Non-Designated Hospitals Only)'.

Select Authorization Renewal button.

The screenshot shows the 'Lanterman Petris Short - LPS' application management interface. The top navigation bar includes a home icon, 'Release Notes', 'FAQ', and a search box. Below the header, there are two instructional steps: 'Step 1 - Click on the 'Start Request' button to begin the request.' and 'Step 2 - To edit, review, and submit application, click the drop-down arrow button [dropdown icon] below.' The 'Authorization Status' is shown as 'Expired' in red, and the 'Authorization Expiration Date' is '2/21/2021'. A blue arrow points from the instructions to a blue 'Authorization Renewal' button. Below this is a table with columns: 'LPS Application Type', 'Created On', 'NPI Number', 'First Name', 'Last Name', 'Credential', 'Name of Site', 'Start Date', 'App Status', and 'Authorization Status'. The table is currently empty, with the text 'There are no records to display.' at the bottom.

LPS Application Type	Created On	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Edit from the drop-down menu.



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Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1234567890			ANTELOPE VALLEY MHC				<div>New <input checked="" type="checkbox"/></div> <div>Edit</div> <div>Delete</div>

Authorization

Authorization Type

Renew

Evaluator Name


Authorization Number

AUTH-003774

Submit


Candidate's Information

Review to ensure all fields are completed. If fields are blank, please provide information.

 Edit ✕

Candidate's Information

First Name *	App Status
<input type="text" value="REDACTED"/>	Unsubmitted
Last Name *	Created On
<input type="text" value="REDACTED"/>	9/1/2021 1:41 PM
Individual NPI Number *	
<input type="text" value="1913191319"/>	
Job Title *	
<input type="text" value="REDACTED"/>	
Scope of Practice *	
<input type="text" value="County/DMH or Contracted Facility Sta"/>	

 Edit ✕

Credential *
<input type="text" value="LCSW"/>
License No *
<input type="text" value="72000"/>
Years Licensed *
<input type="text" value="12 to 18 months"/>

Employment Information and Professional Staff

Indicate the employment start date.

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Employment Information

Employment Start Date

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

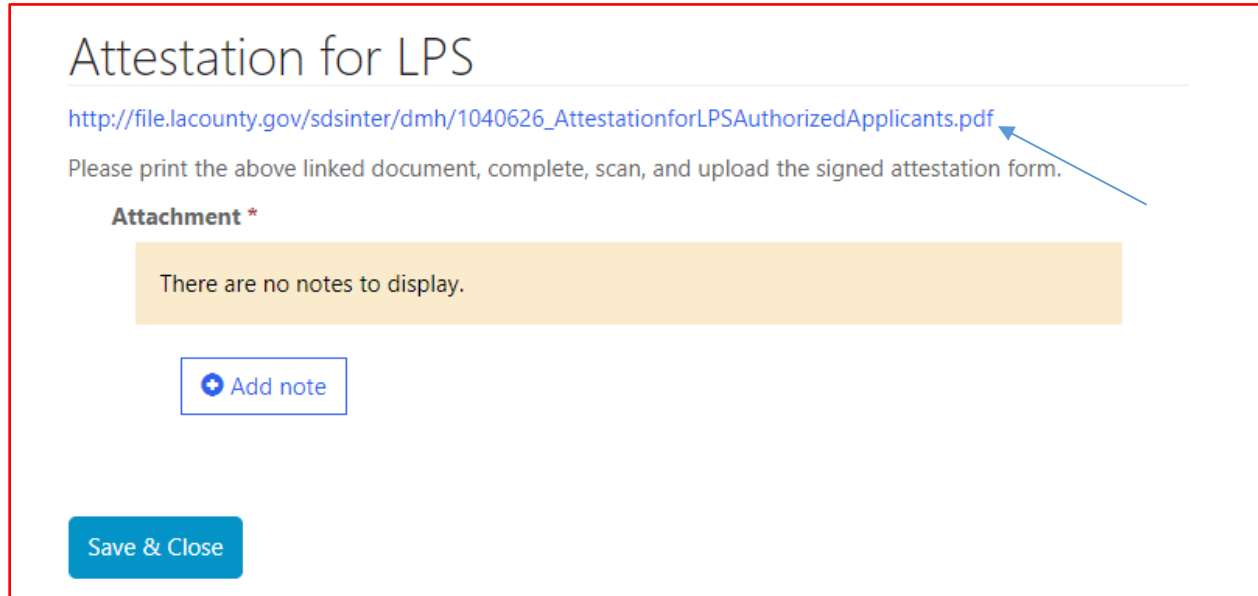
Professional Staff's Email *

Professional Staff's Phone # *

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable).



Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attachment *

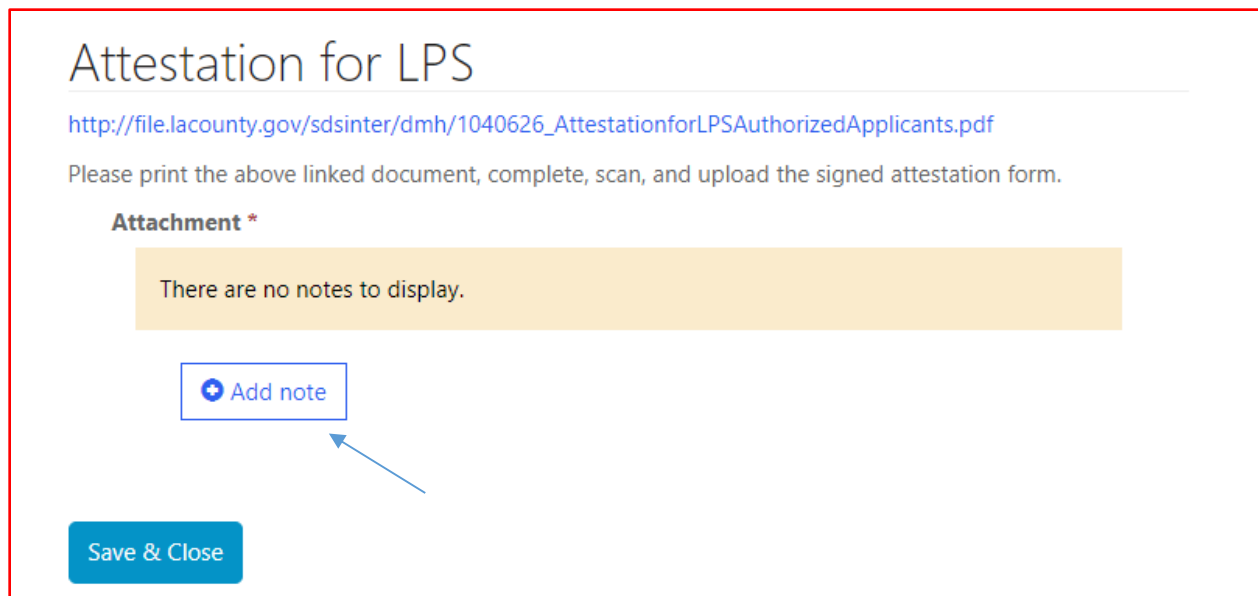
There are no notes to display.

[+ Add note](#)

[Save & Close](#)

An arrow points from the right side of the page to the PDF link.

Select Add note to Choose File and Upload/Attach the attestation form.



Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attachment *

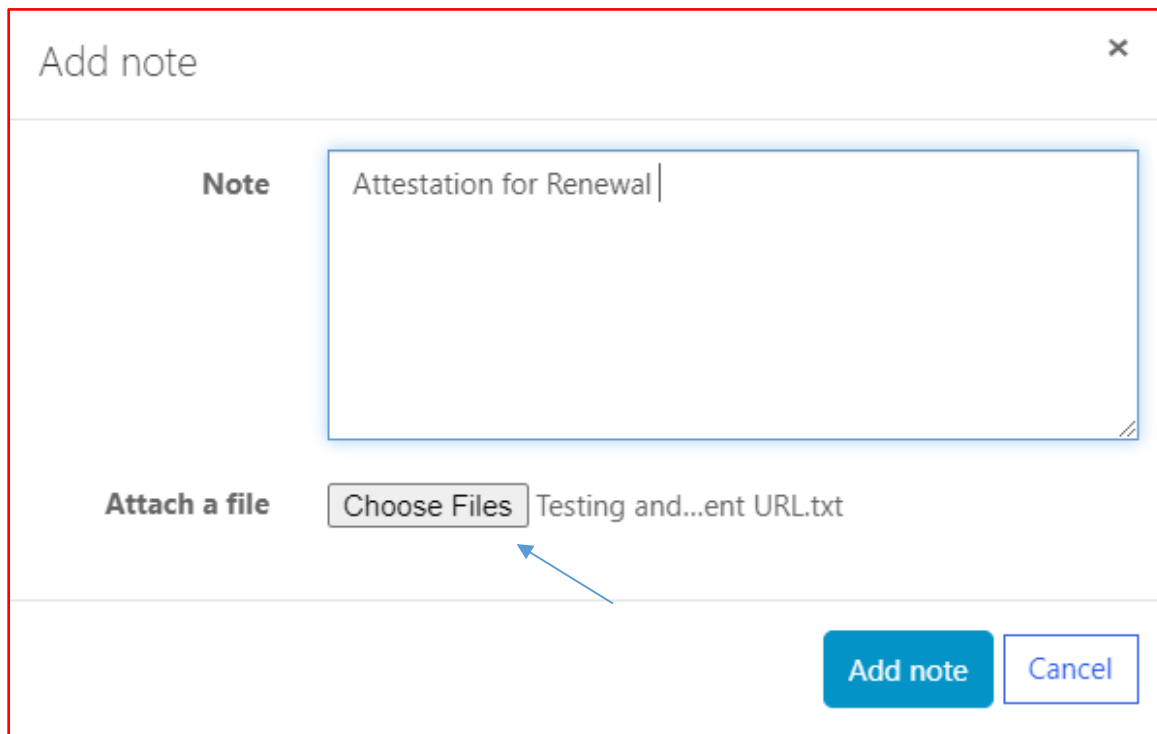
There are no notes to display.

[+ Add note](#)

[Save & Close](#)

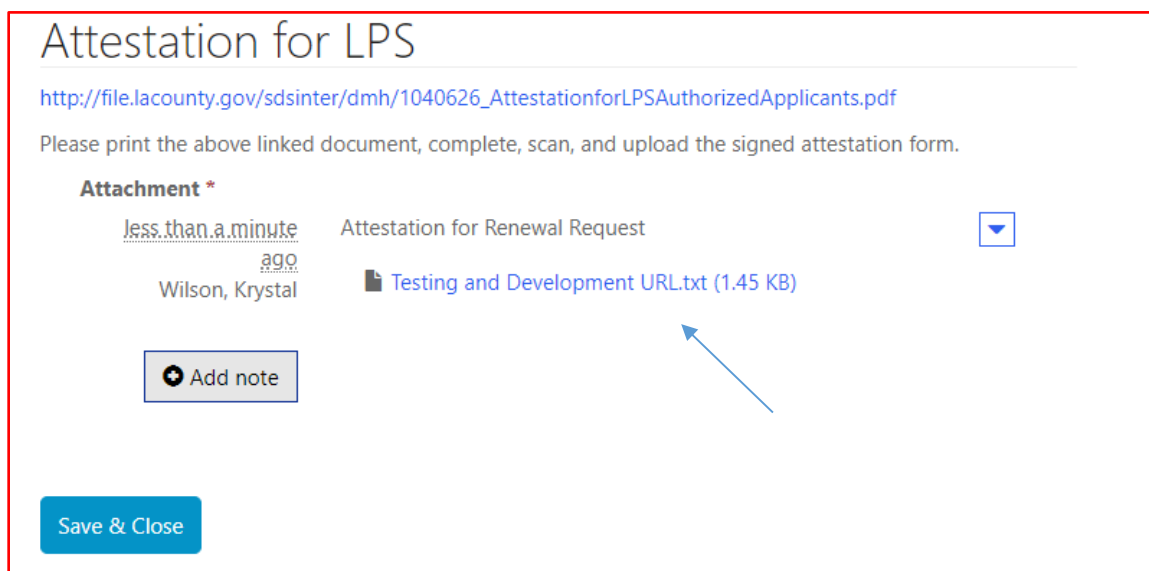
An arrow points from the bottom right of the page to the 'Add note' button.

Select Choose Files button. Attach the attestation form and include a note indicating the document being attached.




The screenshot shows a modal dialog box titled "Add note" with a close button (X) in the top right corner. Inside the dialog, there is a text area labeled "Note" containing the text "Attestation for Renewal". Below the text area, there is a section labeled "Attach a file" which includes a "Choose Files" button and the text "Testing and...ent URL.txt". A blue arrow points from the "Choose Files" button to the "Testing and...ent URL.txt" text. At the bottom right of the dialog, there are two buttons: "Add note" (in blue) and "Cancel" (in white with a blue border).

After confirming completed form has been attached, select Save & Close at the bottom of the screen.



The screenshot shows a web page titled "Attestation for LPS". Below the title is a URL: http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf. Below the URL is the text: "Please print the above linked document, complete, scan, and upload the signed attestation form." Under the heading "Attachment *", there is a list of attachments. The first attachment is "Attestation for Renewal Request" with a dropdown arrow to its right. Below it is "Testing and Development URL.txt (1.45 KB)" with a document icon to its left. A blue arrow points from the "Testing and Development URL.txt (1.45 KB)" text to the "Add note" button. Below the attachments, there is an "Add note" button. At the bottom left, there is a "Save & Close" button. To the left of the attachments, there is a timestamp "less than a minute ago" and the name "Wilson, Krystal".

Select submit at the bottom of the screen.



Lanterman Petris Short - LPS

[Home](#) | [Release Notes](#) | [FAQ](#) |

Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319			WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New

Authorization

Authorization Type

Renew

Evaluator Name

Authorization Number

AUTH-001199

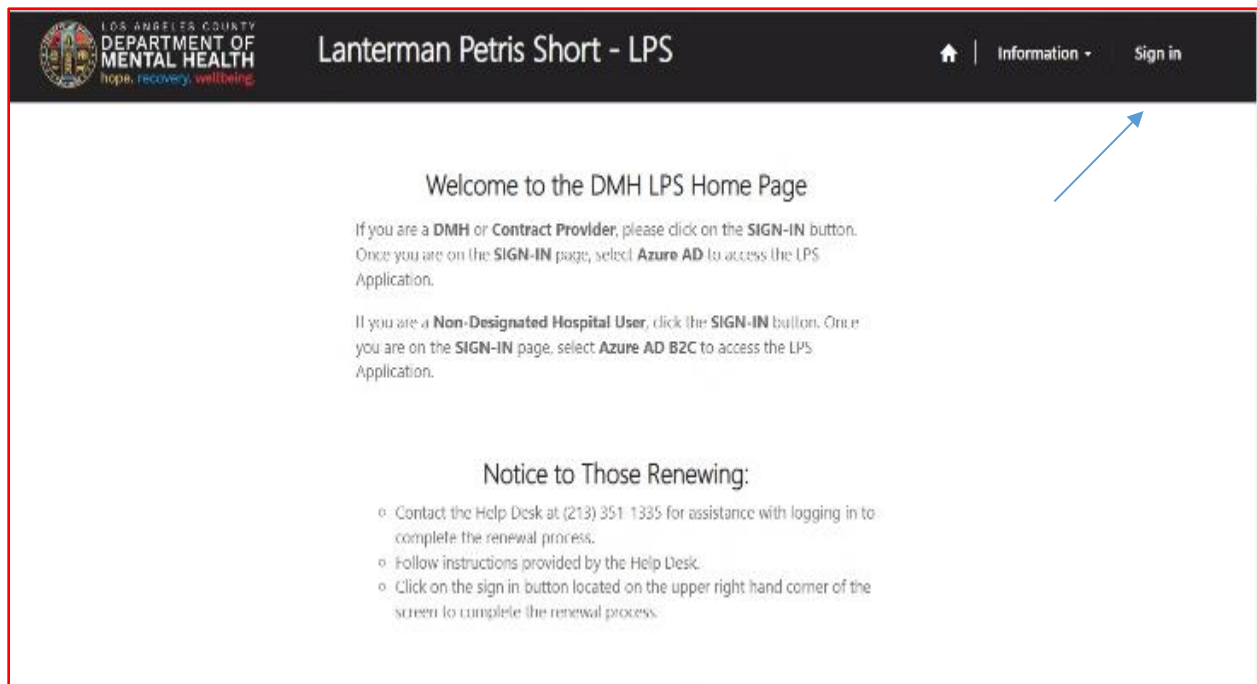
Submit

Renewal Application Non-Designated Hospitals

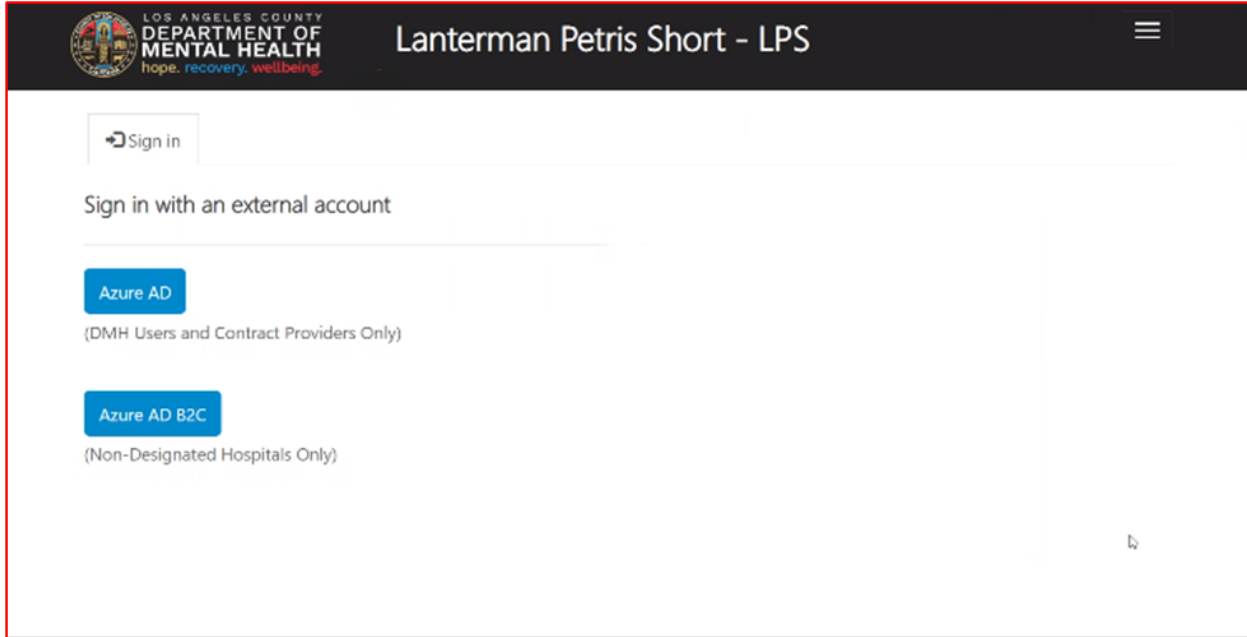
Contact the Help Desk at (213) 351-1335 for assistance with logging in to complete the renewal process. Follow the instructions provided by the Help Desk.

To access the Provider Application Portal, copy and paste the below URL into your internet browser. The recommended browsers are Google Chrome and Microsoft Edge.
<https://lacdmhlpsprod.dynamics365portals.us/>

Select the sign in button in the upper right-hand corner.

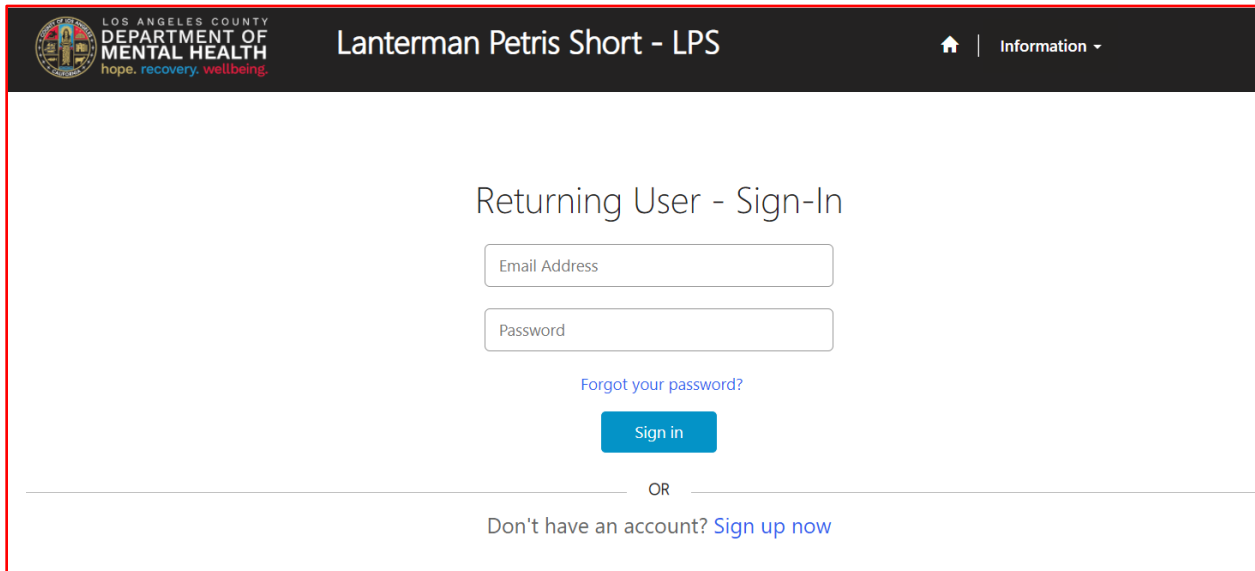


Select Azure AD B2C.



The screenshot shows the top header of the "Lanterman Petris Short - LPS" portal. On the left is the Los Angeles County Department of Mental Health logo with the tagline "hope. recovery. wellbeing.". The title "Lanterman Petris Short - LPS" is centered in the header. A hamburger menu icon is on the right. Below the header, there is a "Sign in" button with an external account icon. Underneath, the text "Sign in with an external account" is displayed. Two blue buttons are shown: "Azure AD" with the subtext "(DMH Users and Contract Providers Only)" and "Azure AD B2C" with the subtext "(Non-Designated Hospitals Only)".

Sign in with Email Address and Password to begin the renewal process.



The screenshot shows the "Returning User - Sign-In" page. The header is identical to the previous screenshot. The main content area has the title "Returning User - Sign-In". Below the title are two input fields: "Email Address" and "Password". A blue link "Forgot your password?" is positioned below the password field. A blue "Sign in" button is centered below the fields. At the bottom, there is a horizontal line with the word "OR" in the center. Below the line, the text "Don't have an account? [Sign up now](#)" is displayed.

Select Authorization Renewal button.

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Home | Release Notes | FAQ

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Expired** Authorization Expiration Date: 2/21/2021

Authorization Renewal

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Edit from the drop-down menu.

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Home | Release Notes | FAQ

Authorization Renewal Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1234567890			ANTELOPE VALLEY MHC				<div> New <input checked="" type="checkbox"/> Edit Delete </div>

Authorization

Authorization Type: Renew


Evaluator Name:

Authorization Number: AUTH-003774

Submit


Candidate's Information

Review to ensure all fields are completed. If fields are blank, please provide information.

 Edit ✕

Candidate's Information

First Name *	App Status
<input type="text" value="REDACTED"/>	Unsubmitted
Last Name *	Created On
<input type="text" value="REDACTED"/>	9/1/2021 1:41 PM
Individual NPI Number *	
<input type="text" value="REDACTED"/>	
Job Title *	
<input type="text" value="REDACTED"/>	
Scope of Practice *	
<input type="text" value="County/DMH or Contracted Facility Sta"/>	

 Edit ✕

Credential *
<input type="text" value="LCSW"/>
License No *
<input type="text" value="72000"/>
Years Licensed *
<input type="text" value="12 to 18 months"/>

Employment Information and Professional Staff

Indicate the employment start date.

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Employment Information

Employment Start Date

3/30/2023



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

John Test

Professional Staff's Email *

JTest@testingsite.com

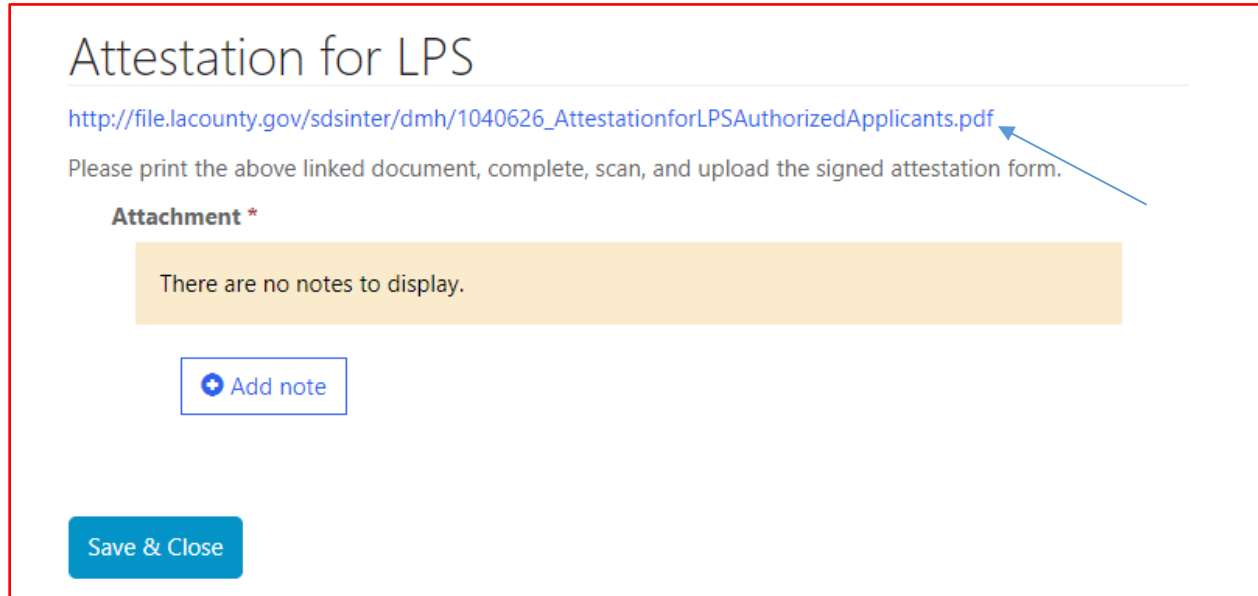
Professional Staff's Phone # *

(213) 999-0019

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable).



Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attachment *

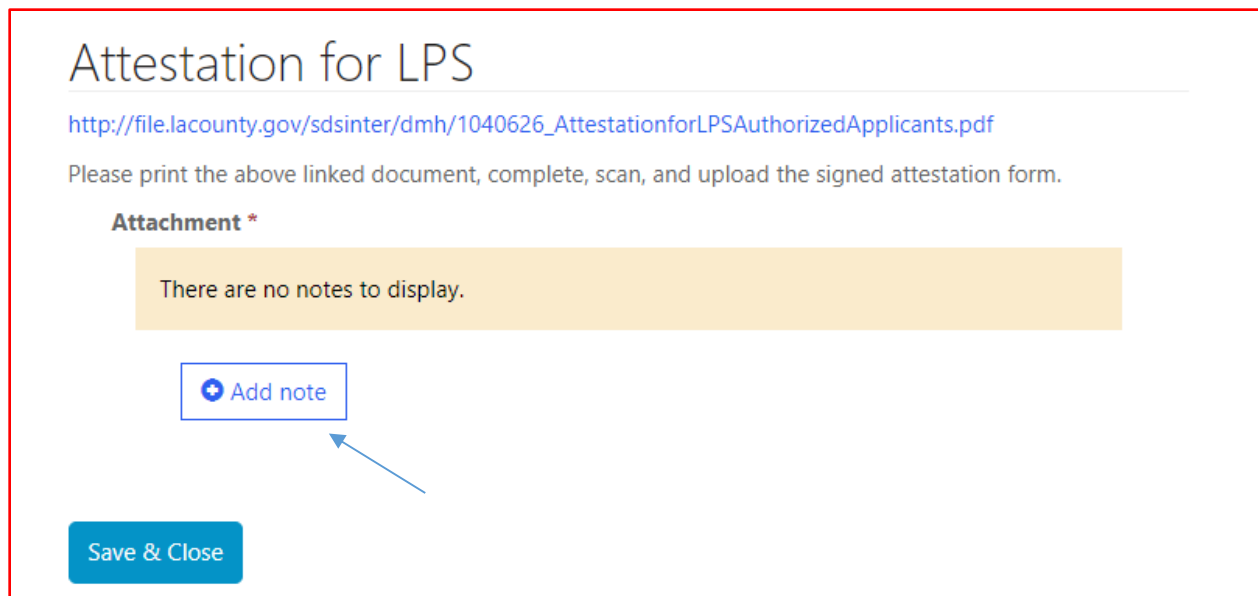
There are no notes to display.

[+ Add note](#)

[Save & Close](#)

An arrow points from the right side of the page to the PDF link.

Select Add note to Choose File and Upload/Attach the attestation form.



Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attachment *

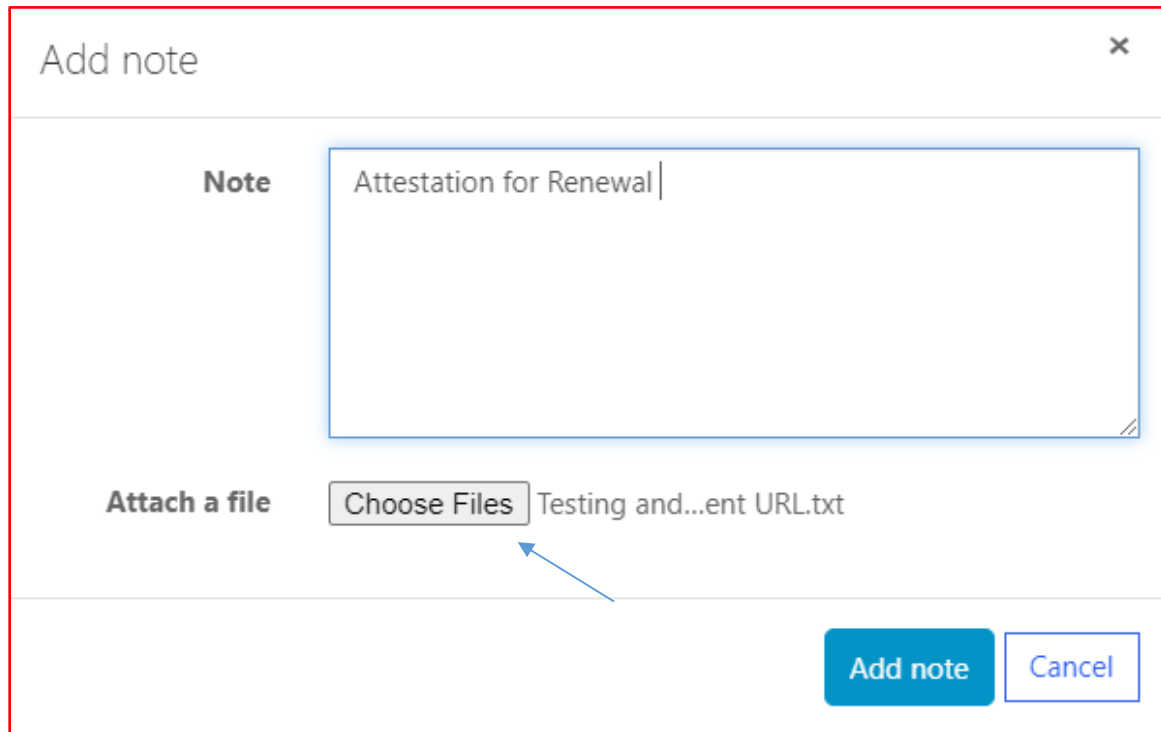
There are no notes to display.

[+ Add note](#)

[Save & Close](#)

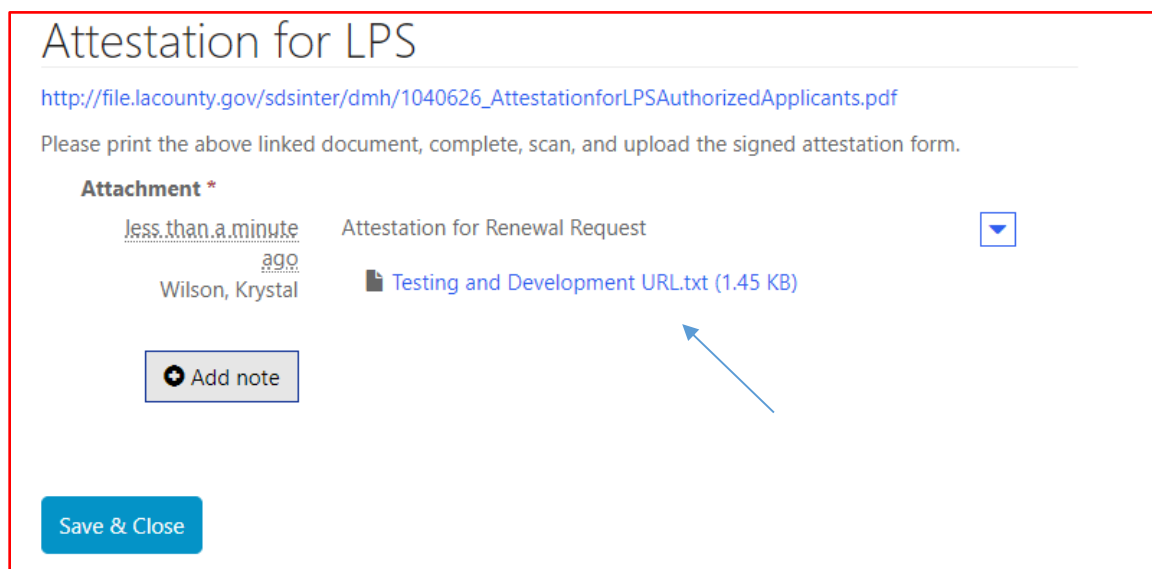
An arrow points from the bottom right of the page to the 'Add note' button.

Select Choose Files button. Attach the attestation form and include a note indicating the document being attached.




The screenshot shows a modal dialog box titled "Add note" with a close button (X) in the top right corner. Inside the dialog, there is a text area labeled "Note" containing the text "Attestation for Renewal". Below the text area, there is a section labeled "Attach a file" which includes a "Choose Files" button and the text "Testing and...ent URL.txt". A blue arrow points from the "Choose Files" button to the "Testing and...ent URL.txt" text. At the bottom right of the dialog, there are two buttons: "Add note" (in blue) and "Cancel" (in white with a blue border).

After confirming completed form has been attached, select Save & Close at the bottom of the screen.



The screenshot shows a web page titled "Attestation for LPS". Below the title is a URL: http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf. Below the URL is the text: "Please print the above linked document, complete, scan, and upload the signed attestation form." Underneath this is a section labeled "Attachment *". It displays a list of attachments. The first attachment is "Attestation for Renewal Request" with a dropdown arrow to its right. Below it is "Testing and Development URL.txt (1.45 KB)" with a document icon to its left. A blue arrow points from the "Testing and Development URL.txt (1.45 KB)" text to the "Add note" button. Below the attachments is an "Add note" button. At the bottom left of the page is a "Save & Close" button. On the left side of the attachment list, there is text indicating the user's activity: "less than a minute ago" and "Wilson, Krystal".

Select submit at the bottom of the screen.



Lanterman Petris Short - LPS

[Home](#) | [Release Notes](#) | [FAQ](#) |

Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319			WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization

Authorization Type
Renew

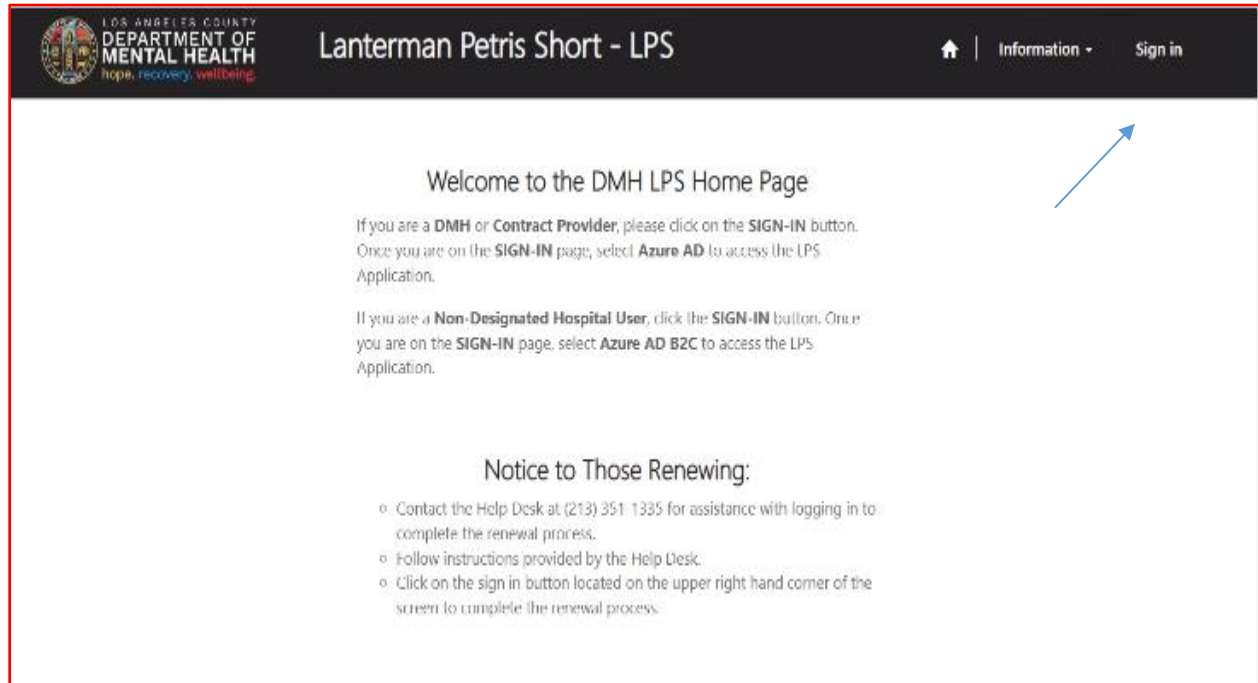
Evaluator Name

Authorization Number
AUTH-001199

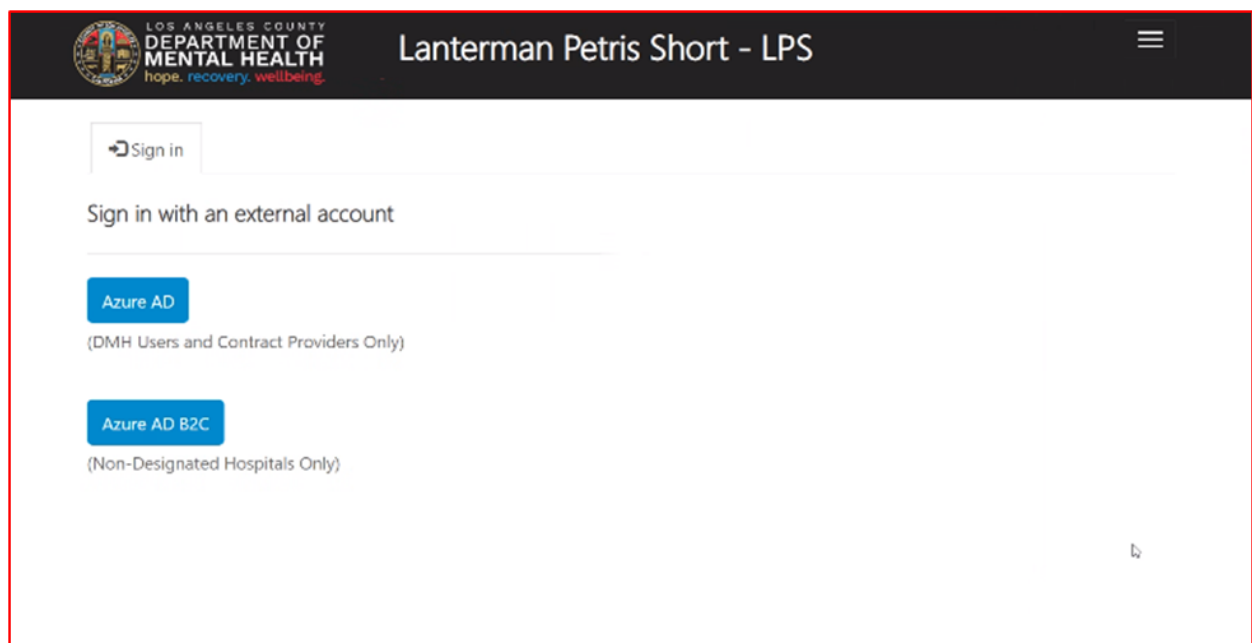
Submit

How to Add a Location while Renewing DMH Employees


Select the sign in button in the upper right-hand corner.



Select Azure AD to start Add Location.



Select Authorization Renewal button.



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[Home](#) | [Release Notes](#) | [FAQ](#) |

Step 1 - Click on the 'Start Request' button to begin the request.


Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Expired** Authorization Expiration Date: 10/1/2021

[Authorization Renewal](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Add Location button.



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[Home](#) | [Release Notes](#) | [FAQ](#) |

Authorization Renewal

[Add Location](#)

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	<input type="text"/>	<input type="text"/>	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization


Authorization Type: Renew

Evaluator Name:

Authorization Number: AUTH-001199

[Submit](#)

Review to ensure all fields are completed. If fields are blank, please provide information.

 Create ×

Candidate's Information

LPS Application Type * Renew	Authorization AUTH-001199
First Name * [REDACTED]	Last Name * [REDACTED]
Email * [REDACTED]	Phone Number *
Individual NPI Number * 1913191319	
Job Title * HPAI	Scope of Practice * County/DMH or Contracted Facility Sta
Credential * LCSW	License No * [REDACTED]
Years Licensed * 	

Employment Information

Complete all fields.

Select DMH Employee from the drop-down menu.

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1. Candidate's Information ✓ 2. Employment Information 3. Attestation for LPS

Employment Information

Employment Start Date

Service Location *

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Click magnifying glass.

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1. Candidate's Information ✓ 2. Employment Information 3. Attestation for LPS

Employment Information

Employment Start Date

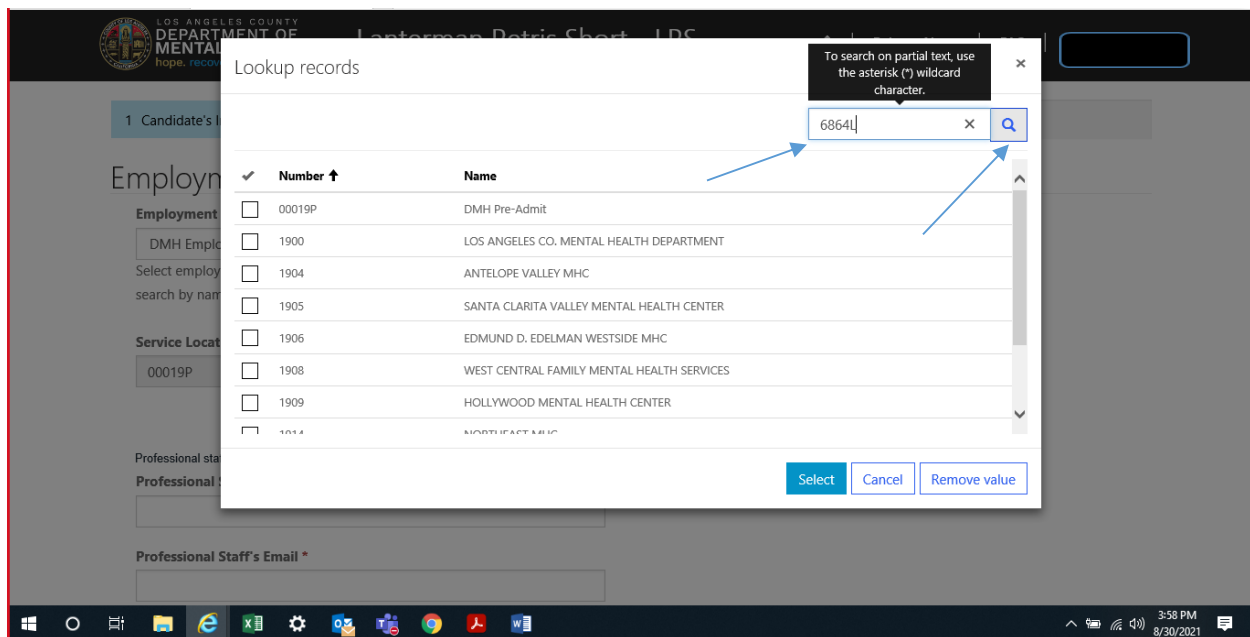
Service Location *

Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

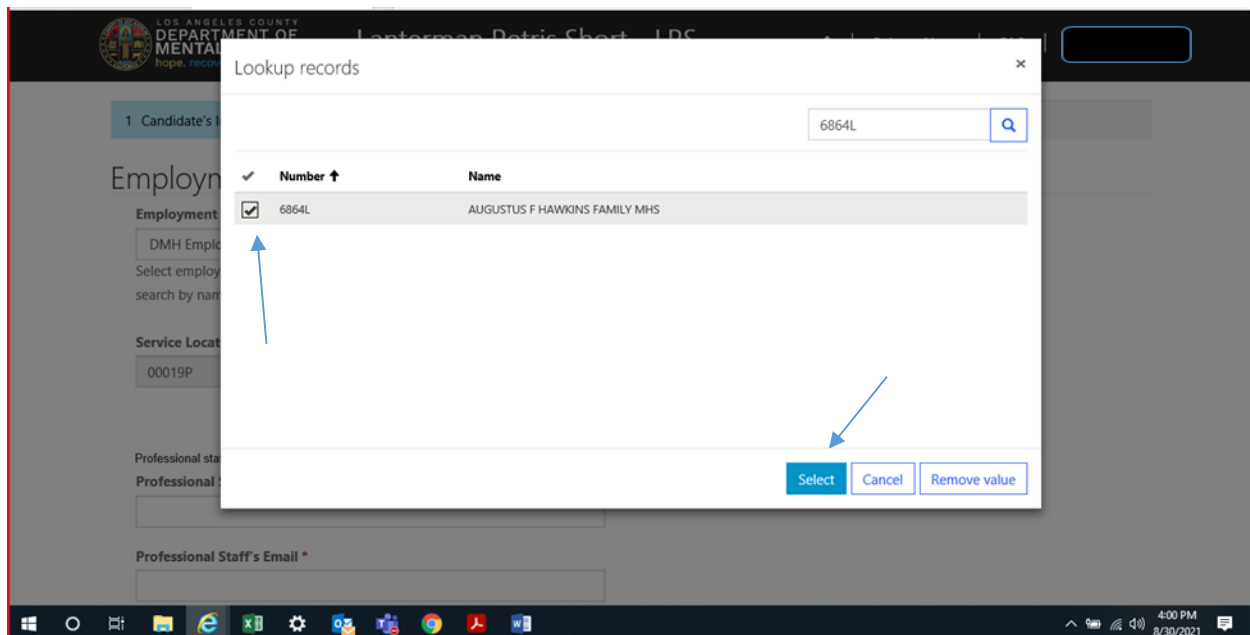
Professional Staff Name *

Professional Staff's Email *

In the search box, type in provider number and click on magnifying glass.



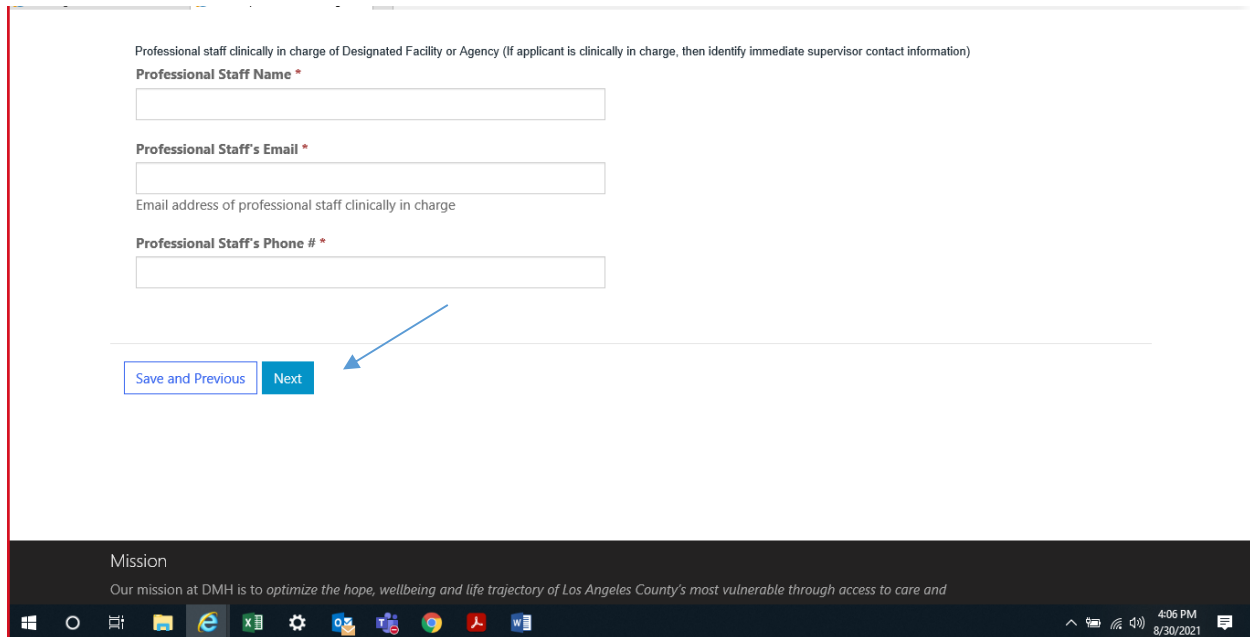
When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Email address of professional staff clinically in charge

Professional Staff's Phone # *

[Save and Previous](#) [Next](#)

Mission
Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and

Windows taskbar: 4:06 PM 8/30/2021

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Select Choose File to upload and attach attestation form.

Please note, each location added must have a separate attestation attached.

Next, select Save & Close at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File No file chosen

Save & Close

Select submit at the bottom of the screen.

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Authorization Renewal [Add Location]

App Status	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	[redacted]	[redacted]	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES	[redacted]	[redacted]	[redacted]	New [v]

Authorization

Authorization Type: Renew

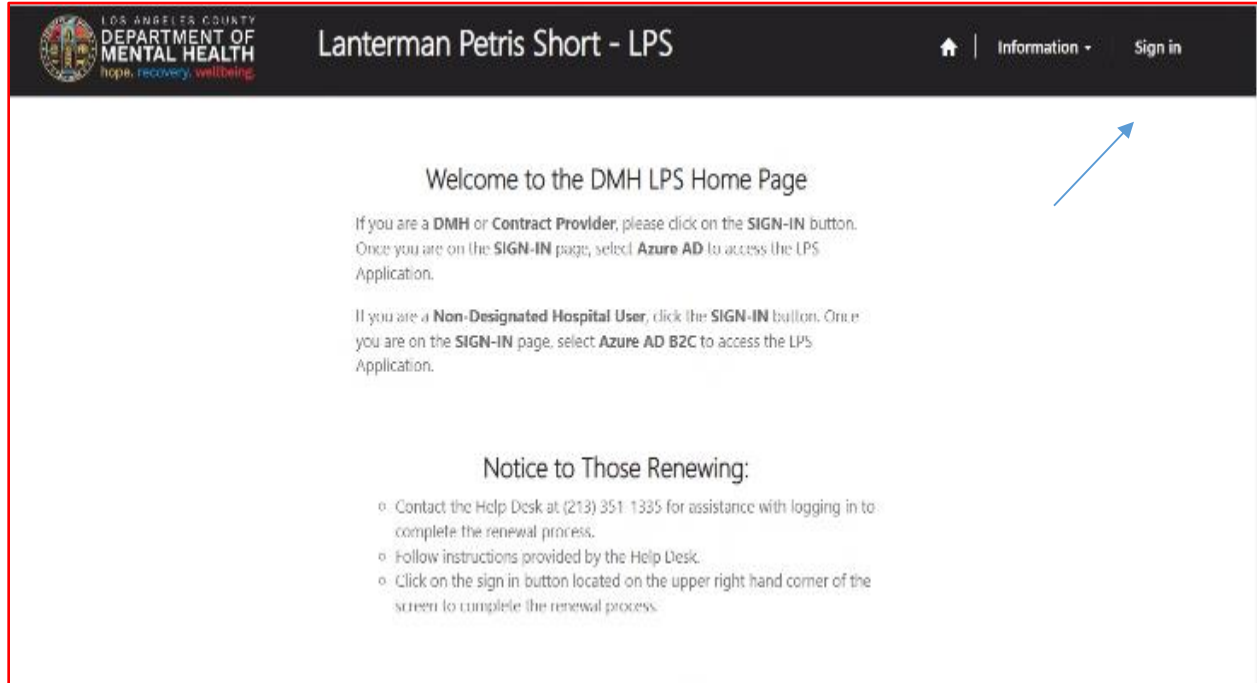
Evaluator Name: [redacted]

Authorization Number: AUTH-001199

Submit

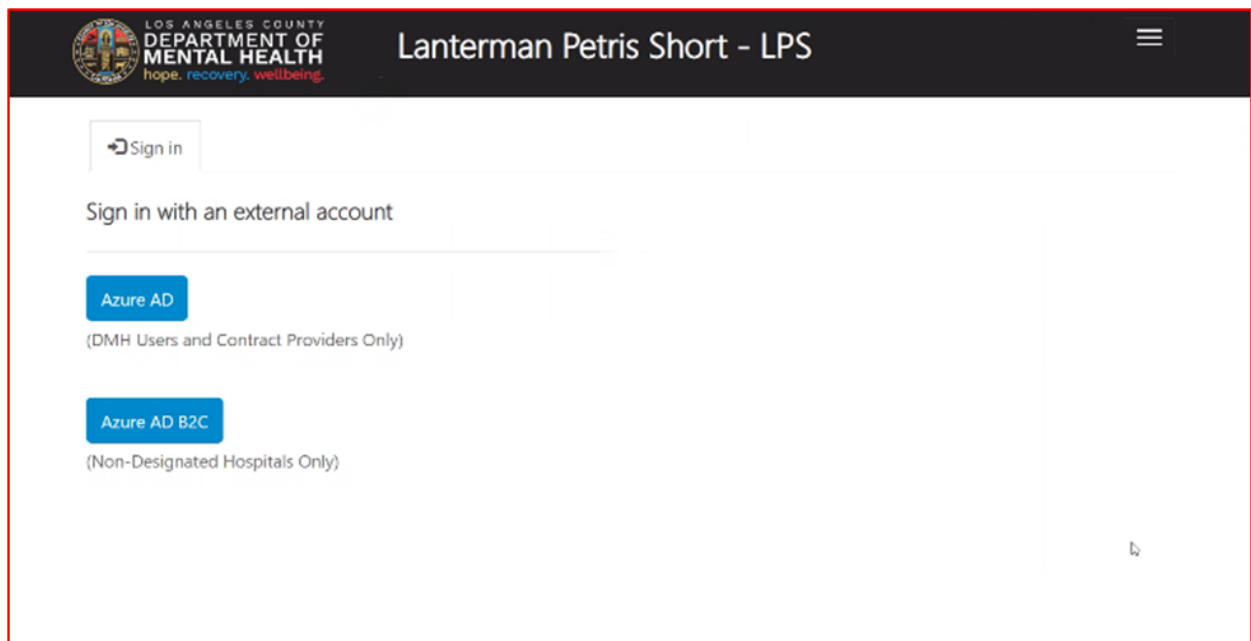
How to Add a Location while Renewing Non-DMH Employee

Select the sign in button in the upper right-hand corner.



Select Azure AD to start Add Location.

You may be required to enter your "C" number and password to access account.



Select Authorization Renewal button.

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Lanterman Petris Short - LPS

Home | Release Notes | FAQ |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Expired** Authorization Expiration Date: 10/1/2021

[Authorization Renewal](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Add Location button.

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Authorization Renewal

[Add Location](#)


App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	<input type="text"/>		WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization

Authorization Type	Evaluator Name	Authorization Number
Renew	<input type="text"/>	AUTH-001199

[Submit](#)

Review to ensure all fields are completed. If fields are blank, please provide information.

 Create ×

Candidate's Information

LPS Application Type * <div>Renew</div>	Authorization <div>AUTH-001199</div>
First Name * <div></div>	Last Name * <div></div>
Email * <div></div>	Phone Number * <div></div>
Individual NPI Number * <div>1913191319</div>	
Job Title * <div>HPIAI</div>	Scope of Practice * <div>County/DMH or Contracted Facility Sta</div>
Credential * <div>LCSW</div>	License No * <div></div>
Years Licensed * <div></div>	

Employment Information

Select NON-DMH Employee from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The top navigation bar includes the Los Angeles County Department of Mental Health logo, the title 'Lanterman Petris Short - LPS', and links for 'Release Notes', 'FAQ', and a search bar. Below the navigation bar, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The 'Employment Information' section contains the following fields:

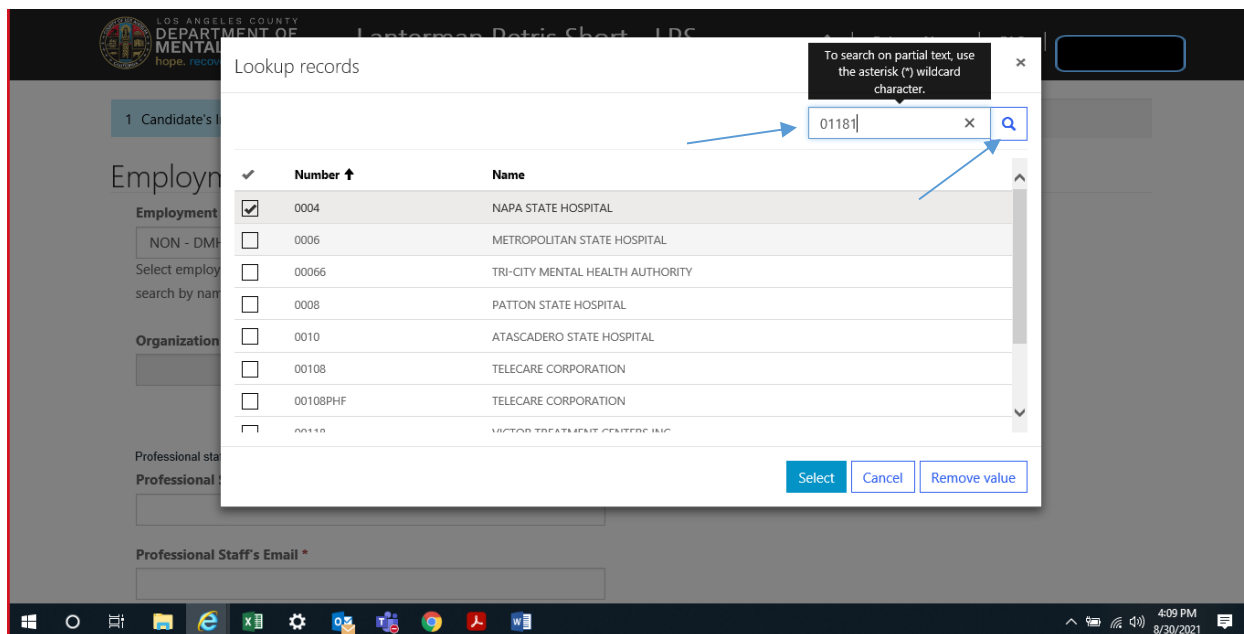
- Employment Type ***: A dropdown menu with 'NON - DMH Employee' selected. Below it, a note says 'Select employment type and then the [magnifying glass icon] to search by name or number.'
- Employment Start Date**: A text input field with a calendar icon.
- Organization Name ***: A text input field with a magnifying glass icon.
- Professional Staff Name ***: A text input field.
- Professional Staff's Email ***: A text input field.

The bottom of the screen shows a Windows taskbar with various application icons and a system tray with the time '4:07 PM' and date '8/30/2021'.

Click on magnifying glass to search for work location.

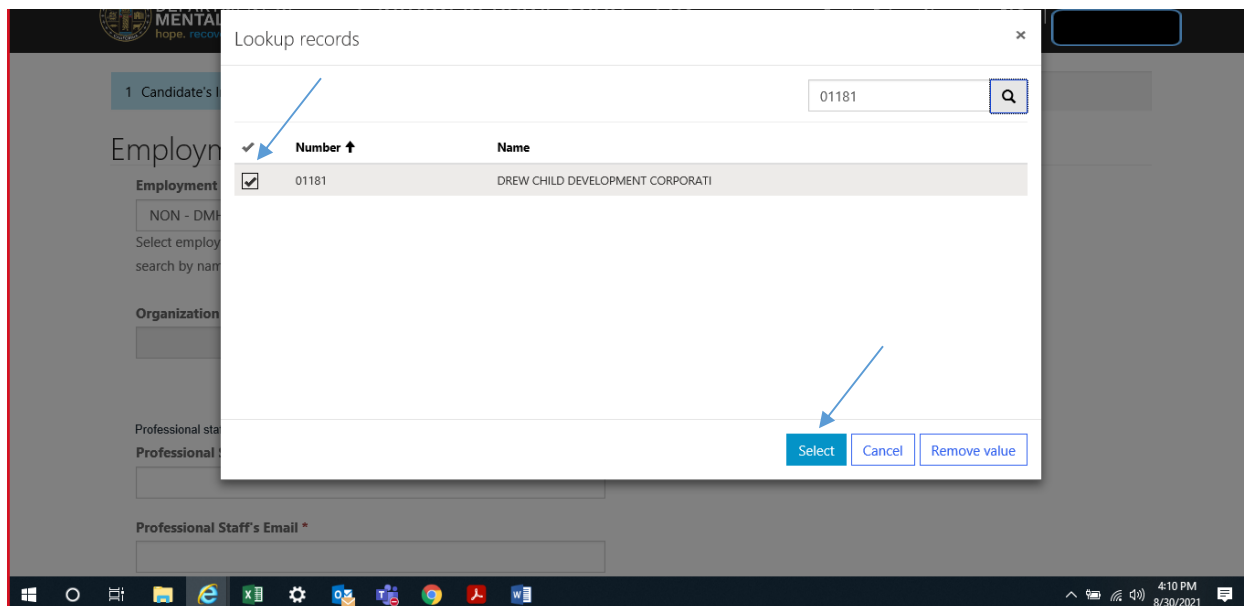
This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon next to the 'Organization Name' field. This icon is used to search for the work location.

In the search box, type in legal entity number and click on magnifying glass.



*If you are unsure of your legal entity number, please consult with administration of your facility/clinic location.

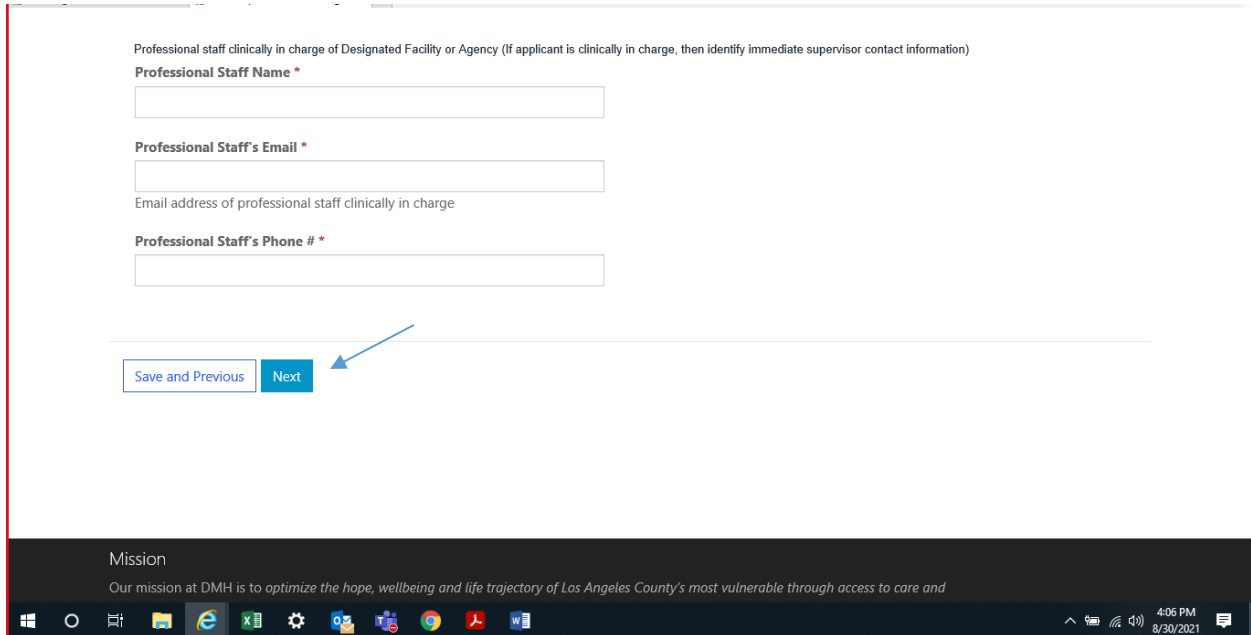
When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Email address of professional staff clinically in charge

Professional Staff's Phone # *

[Save and Previous](#) [Next](#)

Mission
Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and

Windows taskbar: 4:06 PM 8/30/2021

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Select Choose File to upload and attach attestation form.

Please note, each location added must have a separate attestation attached.

Next, select Save & Close at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File No file chosen

Save & Close

Select submit at the bottom of the screen.

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Lanterman Petris Short - LPS

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Authorization Renewal

Add Location

App Status	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	[Redacted]	[Redacted]	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES	[Redacted]	[Redacted]	[Redacted]	New

Authorization

Authorization Type: Renew

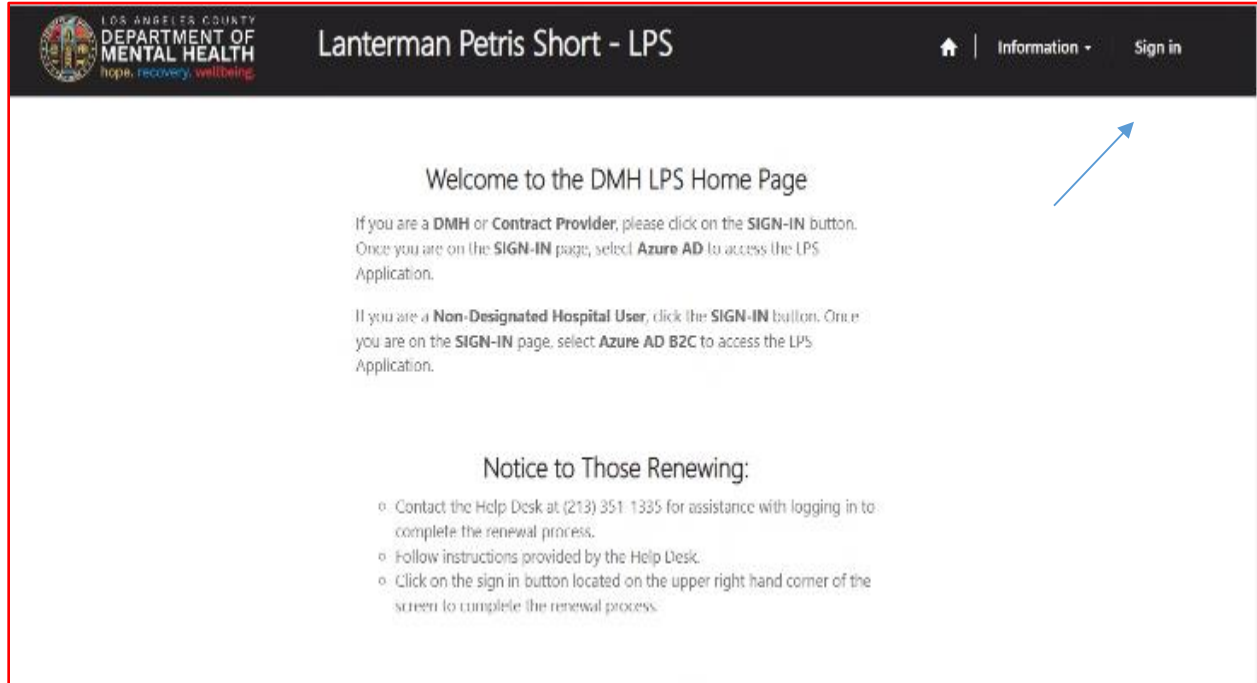
Evaluator Name: [Redacted]

Authorization Number: AUTH-001199

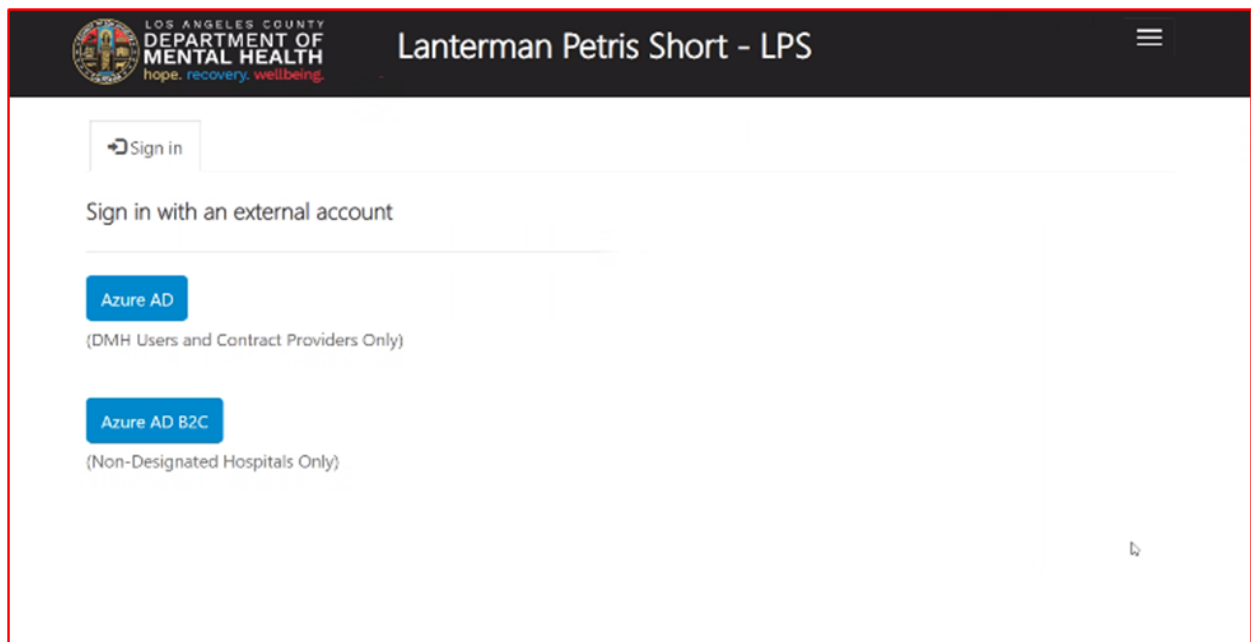
Submit

How to Add a Location while Renewing Non-Designated Hospital

Select the sign in button in the upper right-hand corner.



Select Azure AD B2C to start Add Location.



Sign in with Email Address and Password to begin Add Location.


The screenshot shows the top navigation bar of the LPS system with the Los Angeles County Department of Mental Health logo and the title "Lanterman Petris Short - LPS". A home icon and an "Information" dropdown menu are on the right. The main content area is titled "Returning User - Sign-In" and contains two input fields for "Email Address" and "Password". Below these fields is a link for "Forgot your password?" and a blue "Sign in" button. A horizontal line separates this section from the bottom, which includes an "OR" separator and a link "Don't have an account? Sign up now".

Select Authorization Renewal button.

The screenshot displays the LPS system dashboard. The top navigation bar includes the department logo, the title "Lanterman Petris Short - LPS", and links for "Release Notes", "FAQ", and a search bar. The main content area contains two instructional steps: "Step 1 - Click on the 'Start Request' button to begin the request." and "Step 2 - To edit, review, and submit application, click the drop-down arrow button [dropdown icon] below." Below the steps, the "Authorization Status" is shown as "Expired" and the "Authorization Expiration Date" is "10/1/2021". A blue arrow points from the text in Step 2 to a blue "Authorization Renewal" button. Below this is a table with the following columns: "LPS Application Type", "Created On", "NPI Number", "First Name", "Last Name", "Credential", "Name of Site", "Start Date", "App Status", and "Authorization Status". The table is currently empty, with the text "There are no records to display." below it.

LPS Application Type	Created On	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Add Location button.



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Lanterman Petris Short - LPS

[Home](#) | [Release Notes](#) | [FAQ](#) |

Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	<input type="text"/>		WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization

Authorization Type

Renew


Evaluator Name

Authorization Number

AUTH-001199

Submit

Review to ensure all fields are completed. If fields are blank, please provide information.

 Create ✕

Candidate's Information

LPS Application Type * <div>Renew</div>	Authorization <div>AUTH-001199</div>
First Name * <div></div>	Last Name * <div></div>
Email * <div></div>	Phone Number * <div></div>
Individual NPI Number * <div>1913191319</div>	
Job Title * <div>HPAI</div>	Scope of Practice * <div>County/DMH or Contracted Facility Sta</div>
Credential * <div>LCSW</div>	License No * <div></div>
Years Licensed * <div></div>	

Employment Information

Select NON-Designated Hospital from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. At the top, there is a navigation bar with the Los Angeles County Department of Mental Health logo, the title 'Lanterman Petris Short - LPS', and links for 'Release Notes' and 'FAQ'. Below the navigation bar, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The main heading is 'Employment Information'. Under this heading, there are several fields: 'Employment Type *' with a dropdown menu showing 'NON - Designated Hospital'; 'Employment Start Date' with a date picker; 'Non-Designated Hospitals *' with a search bar and a magnifying glass icon; 'Professional Staff Name *' with a text input field; and 'Professional Staff's Email *' with a text input field. A note below the search bar reads: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The Windows taskbar is visible at the bottom, showing the time as 4:13 PM on 8/30/2021.

Click on magnifying glass.

This screenshot is identical to the one above, but with a blue arrow pointing to the magnifying glass icon in the 'Non-Designated Hospitals *' search bar. The arrow originates from the right side of the screen and points directly to the magnifying glass icon, indicating where the user should click.

Select work location from list provided on page 1 or 2 and click select at the bottom of the screen.

The screenshot shows a 'Lookup records' dialog box with a search bar and a list of medical centers. The list includes: Catalina Island Medical Center (checked), Cedar Sinai Medical Center, Centinela Hospital Medical Center, Foothill Presbyterian Hospital, Long Beach Memorial Hospital, Martin Luther King, Jr. Community Hospital, Memorial Hospital of Gardena, and Palmdale Regional Medical Center. At the bottom of the dialog, there are three buttons: 'Select', 'Cancel', and 'Remove value'. A blue arrow points to the 'Select' button.

Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.

The screenshot shows a form titled 'Professional Staff' with the following fields: 'Professional Staff Name *', 'Professional Staff's Email *', and 'Professional Staff's Phone # *'. Below the form, there are two buttons: 'Save and Previous' and 'Next'. A blue arrow points to the 'Next' button.

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Select Choose File to upload and attach attestation form.

Please note, each location added must have a separate attestation attached.

Next, select Save & Close at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File No file chosen

Save & Close

Select submit at the bottom of the screen.

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Lanterman Petris Short - LPS

Home | Release Notes | FAQ

Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	[Redacted]	[Redacted]	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES	[Redacted]	[Redacted]	[Redacted]	New

Authorization

Authorization Type: Renew

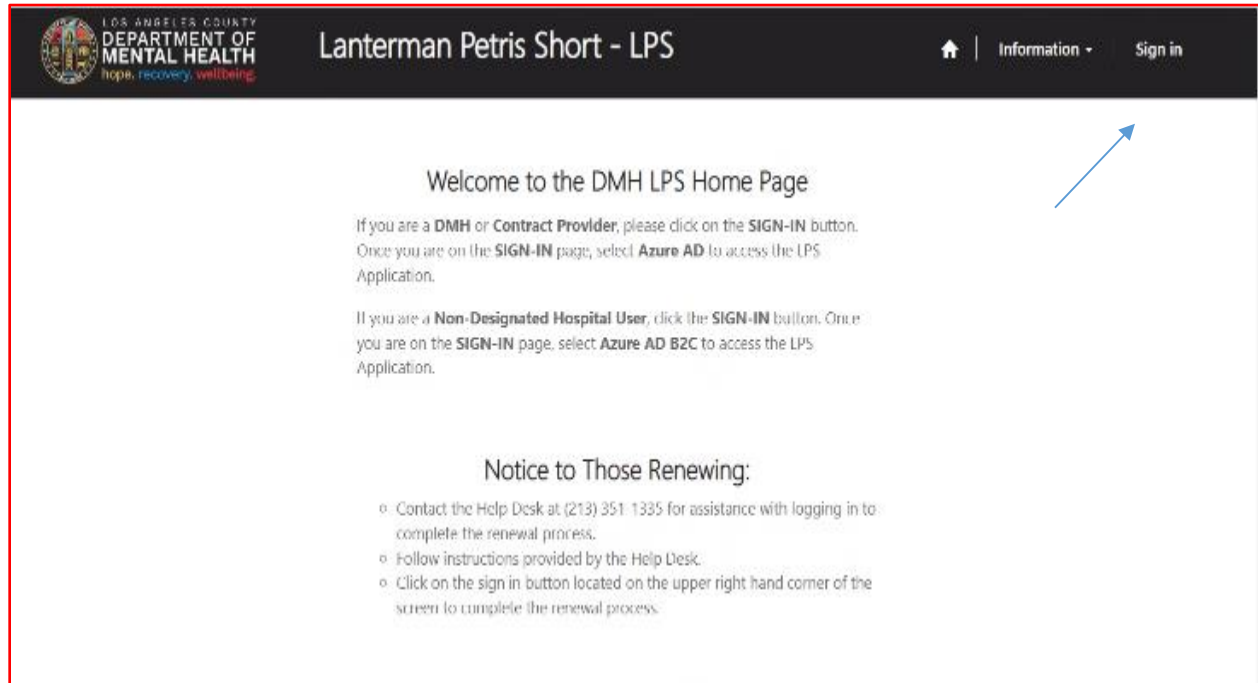
Evaluator Name: [Redacted]

Authorization Number: AUTH-001199

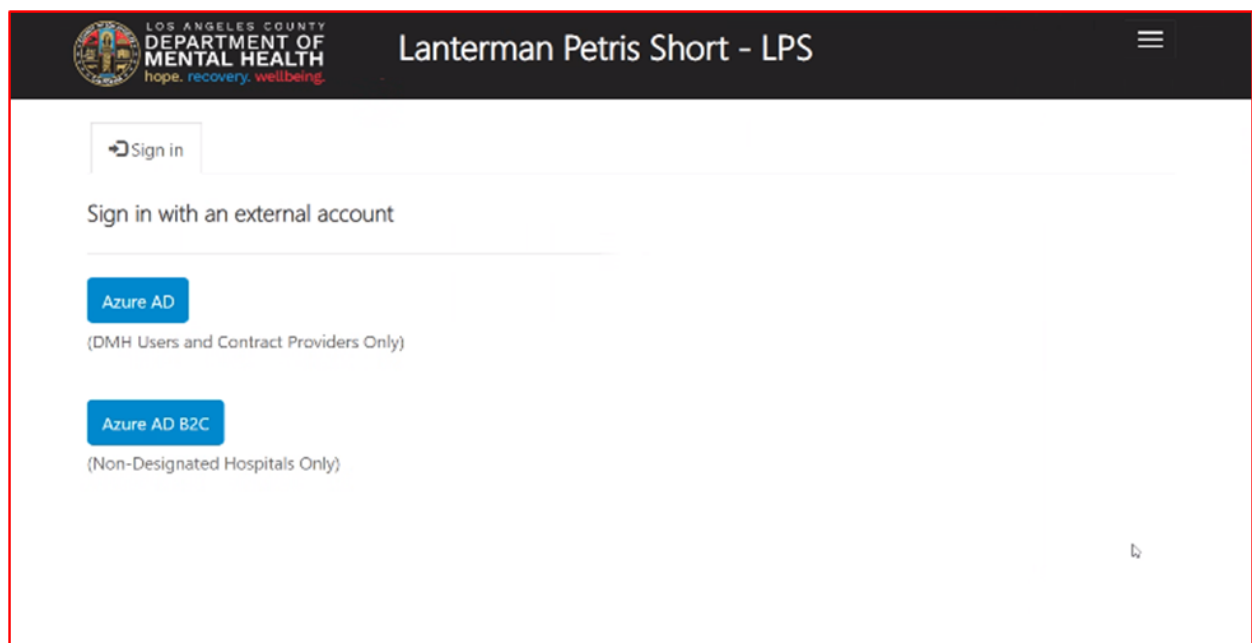
Submit

How to Change a Location while Renewing DMH Employees

Select the sign in button in the upper right-hand corner.



Select Azure AD to start Change Location.



Select Authorization Renewal button.

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Home | Release Notes | FAQ |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Expired** Authorization Expiration Date: 10/1/2021

[Authorization Renewal](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Add Location button.

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Authorization Renewal

[Add Location](#)


App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	<input type="text"/>	<input type="text"/>	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization

Authorization Type	Evaluator Name	Authorization Number
Renew	<input type="text"/>	AUTH-001199

[Submit](#)

Review to ensure all fields are completed. If fields are blank, please provide information.

 Create ✕

Candidate's Information

LPS Application Type * <div>Renew</div>	Authorization <div>AUTH-001199</div>
First Name * <div></div>	Last Name * <div></div>
Email * <div></div>	Phone Number * <div></div>
Individual NPI Number * <div>1913191319</div>	
Job Title * <div>HPIAI</div>	Scope of Practice * <div>County/DMH or Contracted Facility Sta</div>
Credential * <div>LCSW</div>	License No * <div></div>
Years Licensed * <div></div>	

Employment Information

Complete all fields.

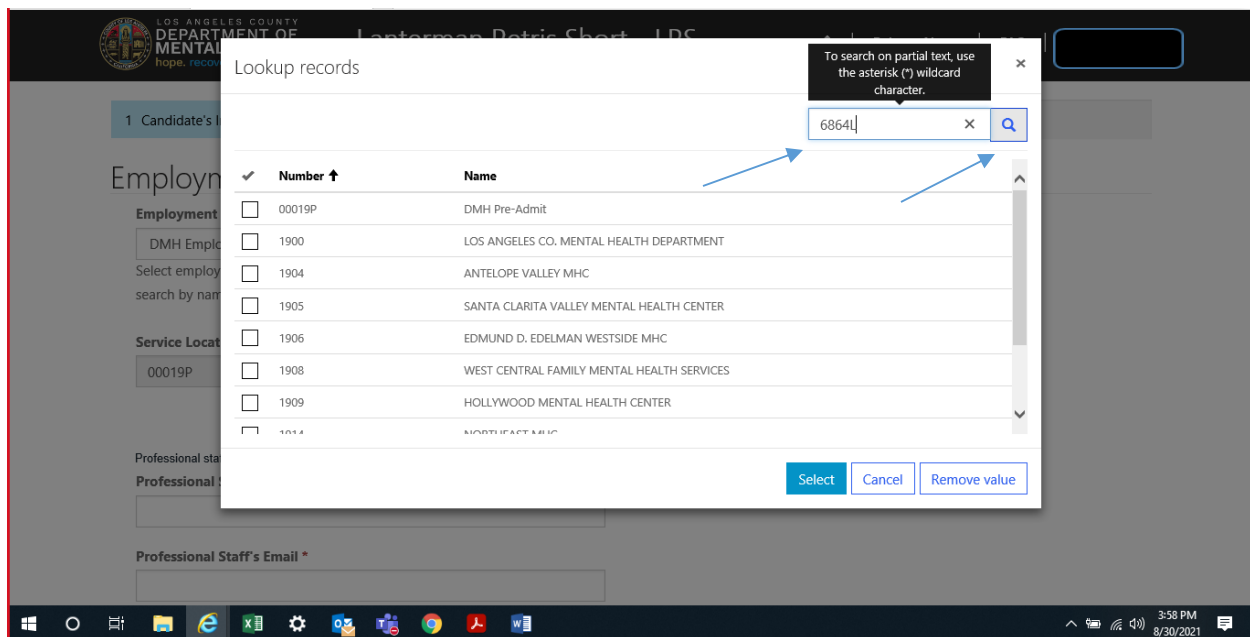
Select DMH Employee from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. At the top, there are three tabs: '1. Candidate's Information' (checked), '2. Employment Information' (active), and '3. Attestation for LPS'. Below the tabs, the title 'Employment Information' is displayed. The form includes a dropdown menu for 'DMH Employee' with options: 'DMH Employee', 'NON - DMH Employee', and 'NON - Designated Hospital'. To the right of this is the 'Employment Start Date' field. Below the dropdown is the 'Service Location *' field with a magnifying glass icon. Further down is the 'Professional Staff Name *' field, followed by the 'Professional Staff's Email *' field. The bottom of the screen shows a Windows taskbar with various application icons and a system clock indicating 3:51 PM on 6/30/2021.

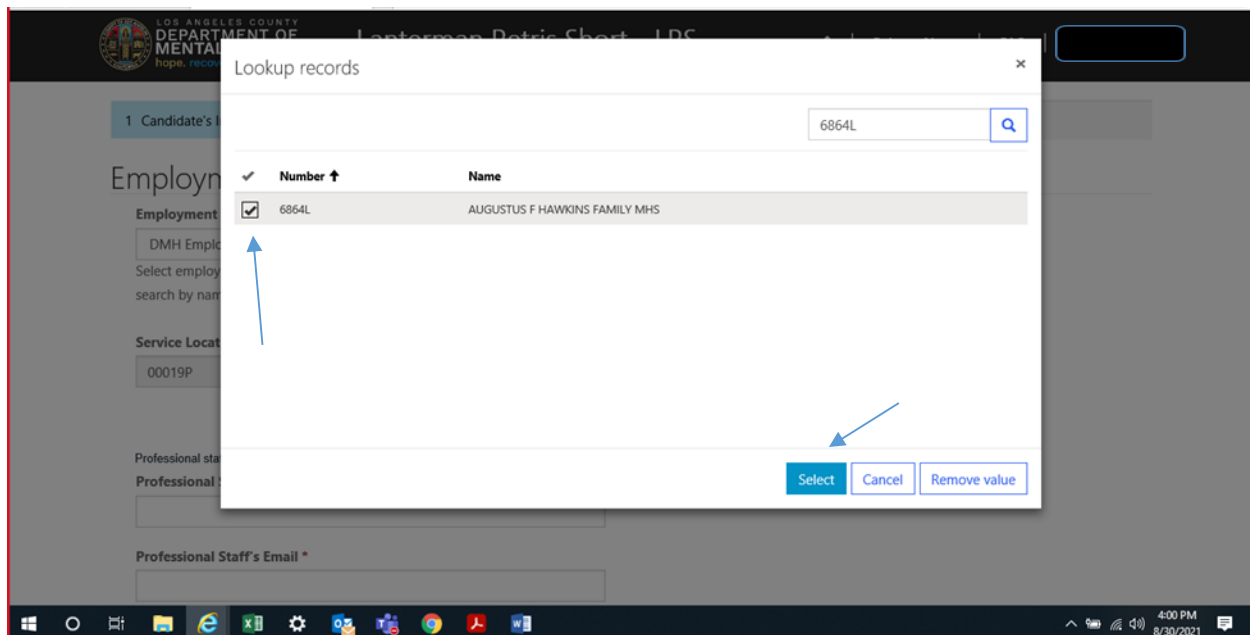
Click magnifying glass.

This screenshot is identical to the one above, showing the 'Employment Information' form. A blue arrow points to the magnifying glass icon next to the 'Service Location *' field, indicating where to click.

In the search box, type in provider number and click on magnifying glass.



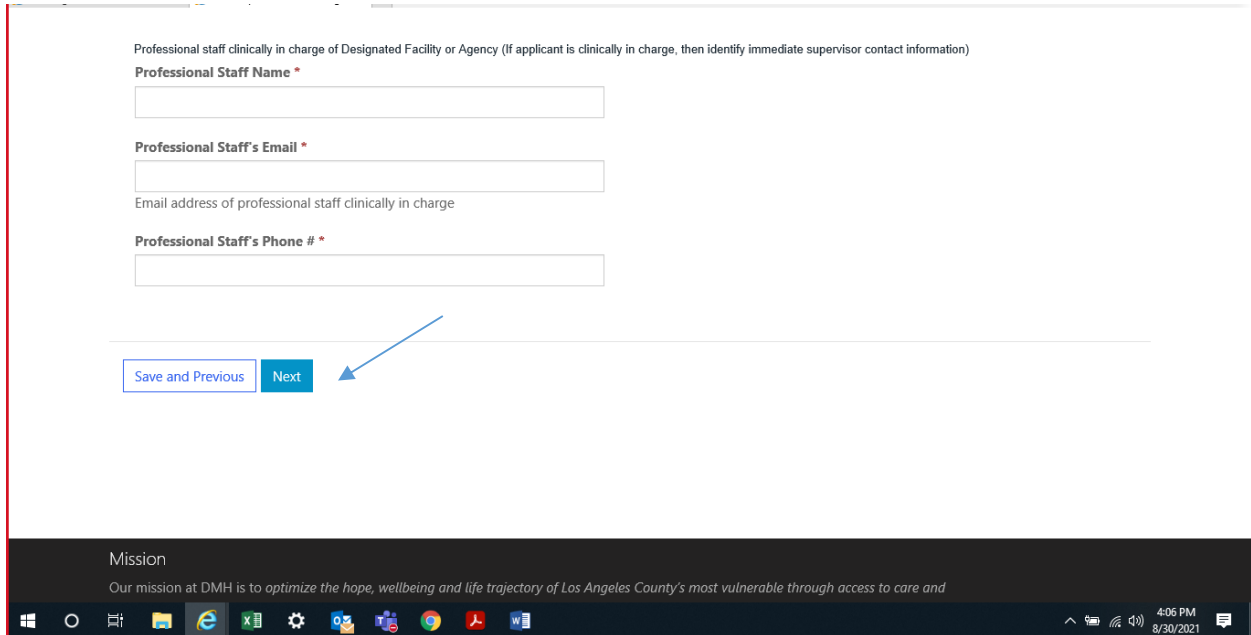
When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Email address of professional staff clinically in charge

Professional Staff's Phone # *

[Save and Previous](#) [Next](#)

Mission
Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and

Windows taskbar: 4:06 PM 8/30/2021

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Select Choose File to upload and attach attestation form.

Please note, each location added must have a separate attestation attached.

Next, select Save & Close at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File No file chosen

Save & Close

Delete location that is no longer needed.

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Lanterman Petris Short - LPS

Home | Release Notes | FAQ | Search

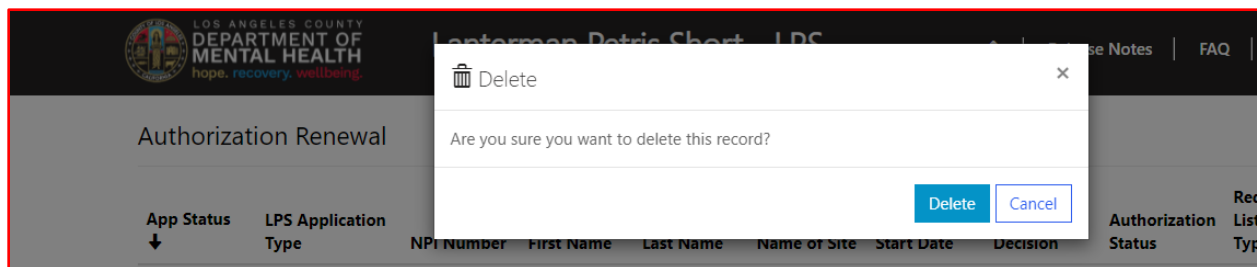
Authorization Renewal Add Location

App Status	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	[Redacted]	[Redacted]	RIO HONDO COMMUNITY MHC	12/10/2010			New
Unsubmitted	Renew	1913191319	[Redacted]	[Redacted]	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New

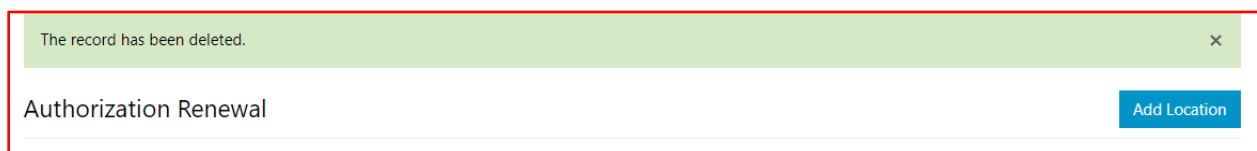
Authorization

Edit
Delete

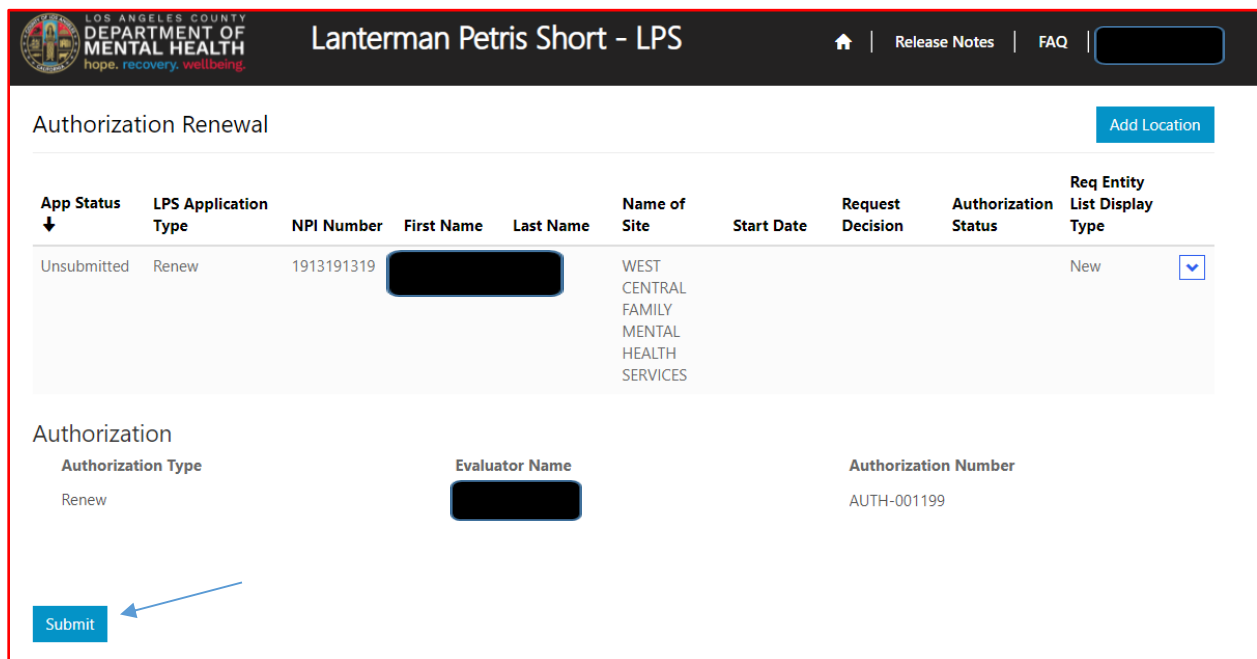
Select delete button.



The screen will confirm record deletion.

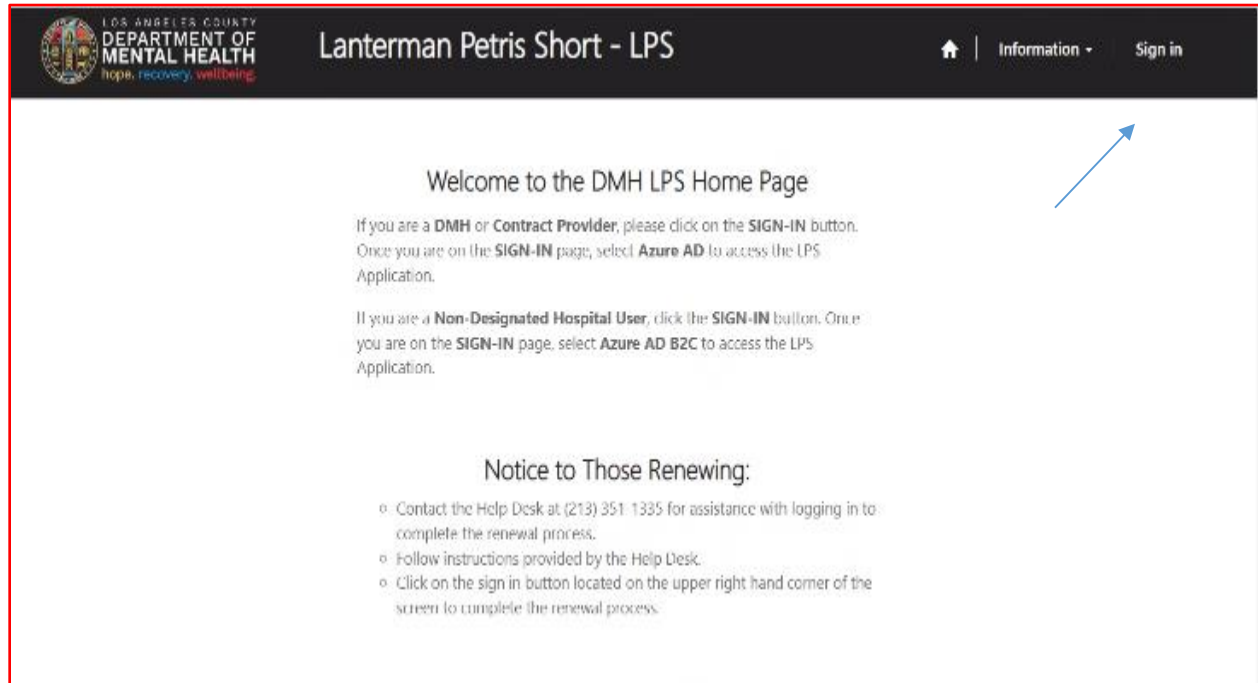


Select Submit button.



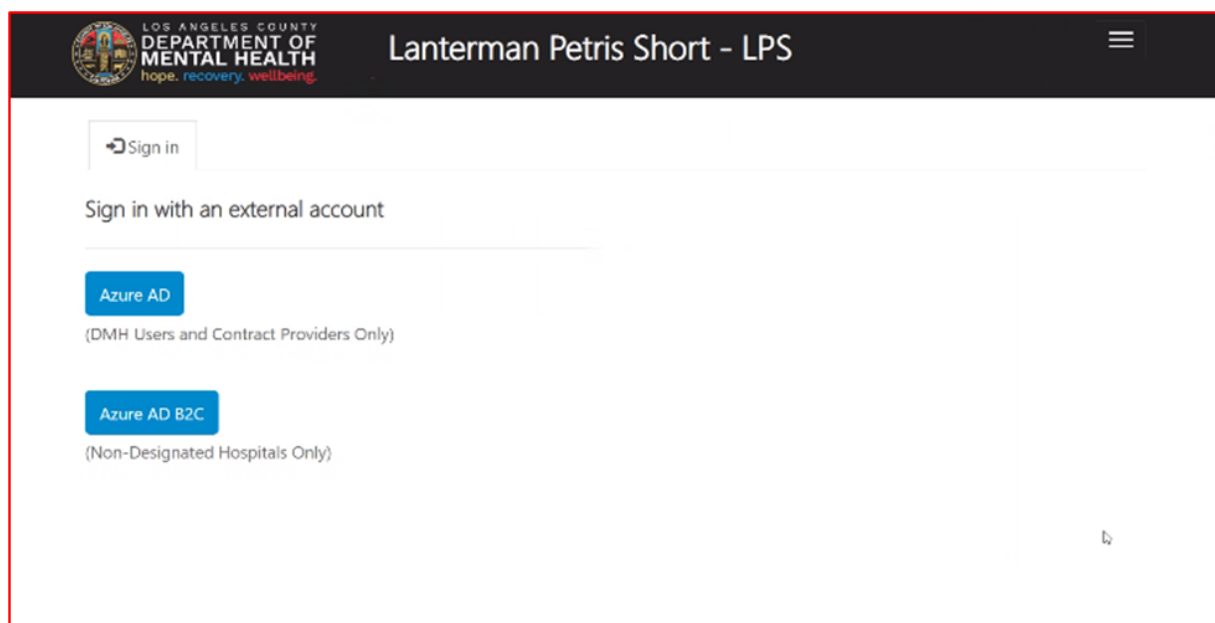
How to Change a Location while Renewing Non-DMH Employees

Select the sign in button in the upper right-hand corner.



Select Azure AD to start Change Location.

You may be required to enter your "C" number and password to access account.



Select Authorization Renewal button.

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Home | Release Notes | FAQ |

Step 1 - Click on the 'Start Request' button to begin the request.

Step 2 - To edit, review, and submit application, click the drop-down arrow button below.

Authorization Status: **Expired** Authorization Expiration Date: 10/1/2021

[Authorization Renewal](#)

LPS Application Type	Created On ↓	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Add Location button.

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Authorization Renewal

[Add Location](#)


App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	<input type="text"/>	<input type="text"/>	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization

Authorization Type: Renew Evaluator Name: Authorization Number: AUTH-001199

[Submit](#)

Review to ensure all fields are completed. If fields are blank, please provide information.

 Create ×

Candidate's Information

LPS Application Type * <div>Renew</div>	Authorization <div>AUTH-001199</div>
First Name * <div></div>	Last Name * <div></div>
Email * <div></div>	Phone Number * <div></div>
Individual NPI Number * <div>1913191319</div>	
Job Title * <div>HPAI</div>	Scope of Practice * <div>County/DMH or Contracted Facility Sta</div>
Credential * <div>LCSW</div>	License No * <div></div>
Years Licensed * <div></div>	

Employment Information

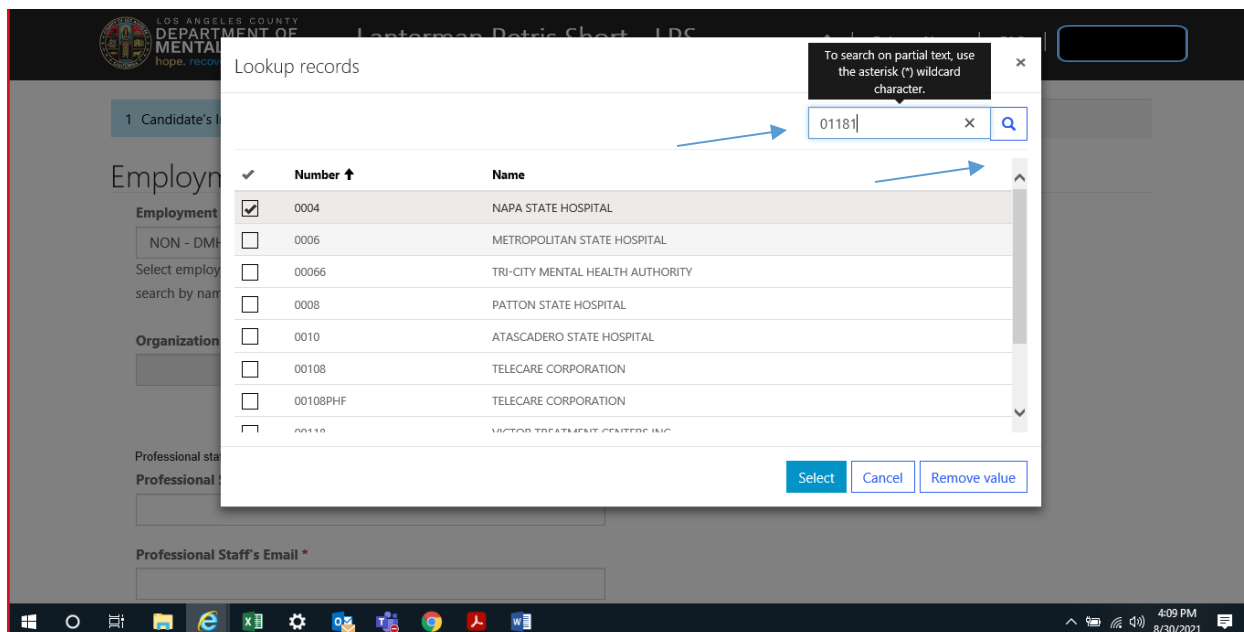
Select NON-DMH Employee from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. The header includes the Los Angeles County Department of Mental Health logo and the title 'Lanterman Petris Short - LPS'. The navigation bar shows three steps: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The form fields include: 'Employment Type *' with a dropdown menu showing 'NON - DMH Employee'; 'Employment Start Date' with a calendar icon; 'Organization Name *' with a search icon; 'Professional Staff Name *' with a text input field; and 'Professional Staff's Email *' with a text input field. A note below the email field states: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The Windows taskbar at the bottom shows the time as 4:07 PM on 8/30/2021.

Click on magnifying glass to search for work location.

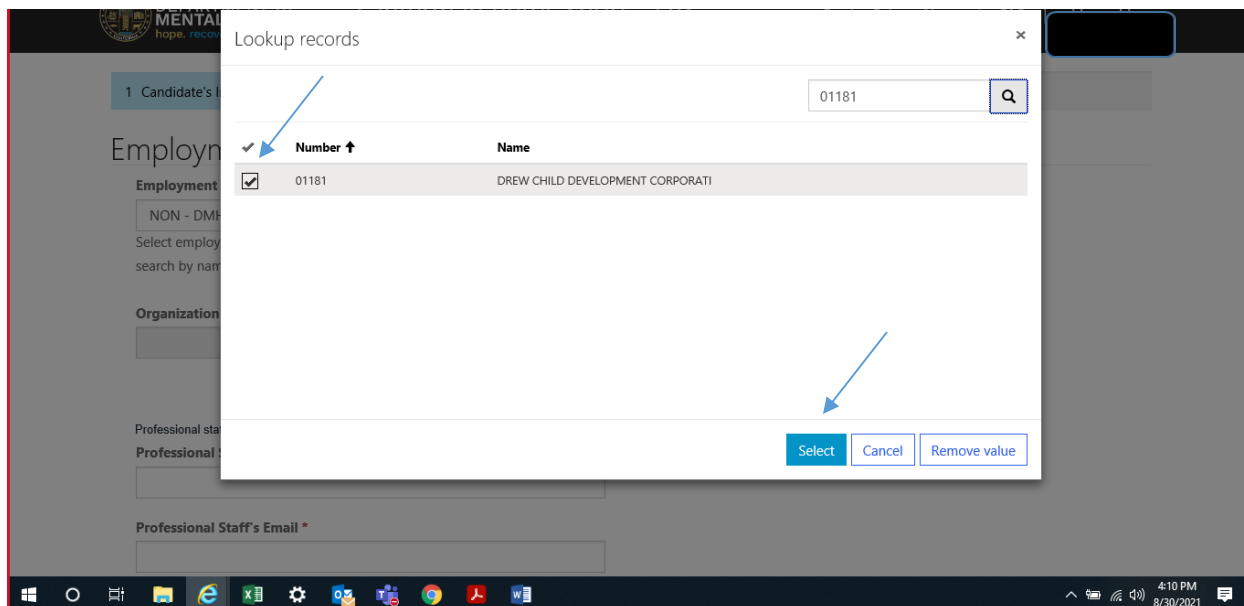
This screenshot is identical to the previous one, but with a blue arrow pointing to the magnifying glass icon in the 'Organization Name *' search field. The arrow originates from the right side of the form and points directly to the search icon. The rest of the form and the system header/footer are the same as in the previous screenshot.

In the search box, type in legal entity number and click on magnifying glass.



*If you are unsure of your legal entity number, please consult with administration of your facility/clinic location.

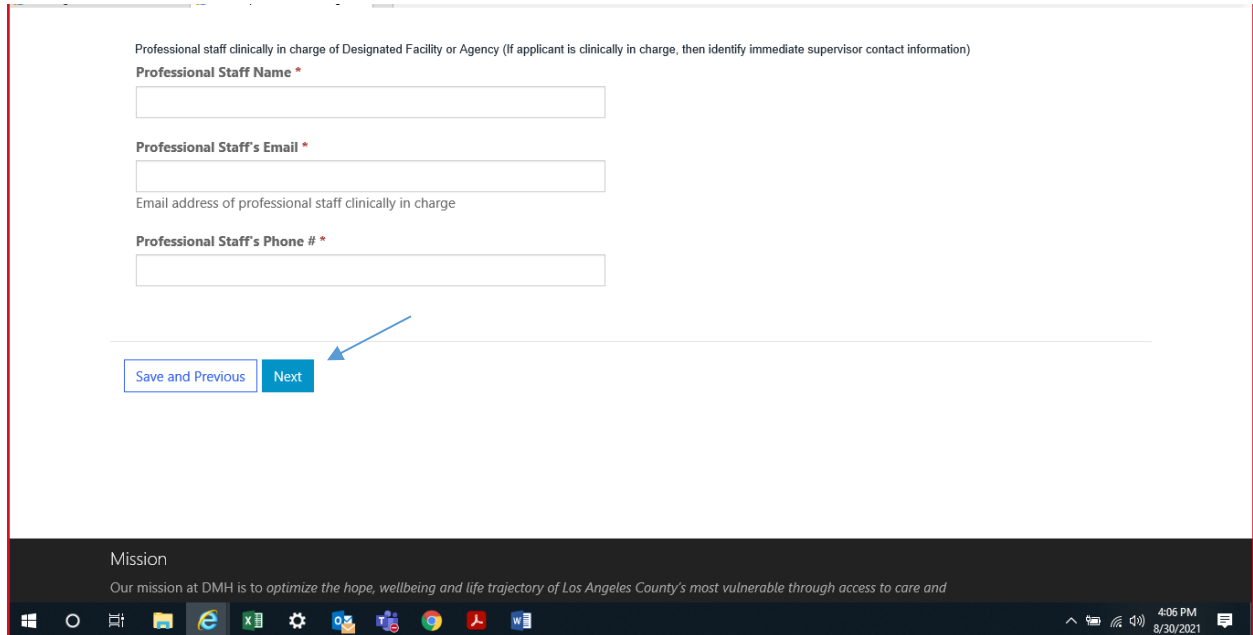
When work location loads, check the box and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.



Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)

Professional Staff Name *

Professional Staff's Email *

Email address of professional staff clinically in charge

Professional Staff's Phone # *

[Save and Previous](#) [Next](#)

Mission
Our mission at DMH is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and

Windows taskbar: 4:06 PM 8/30/2021

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Select Choose File to upload and attach attestation form.

Please note, each location added must have a separate attestation attached.

Next, select Save & Close at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File No file chosen

Save & Close

Delete location that is no longer needed.

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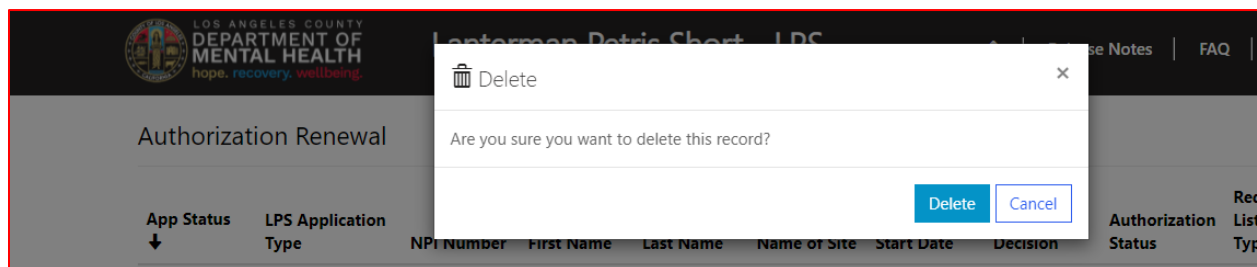
Home | Release Notes | FAQ | Search

Authorization Renewal Add Location

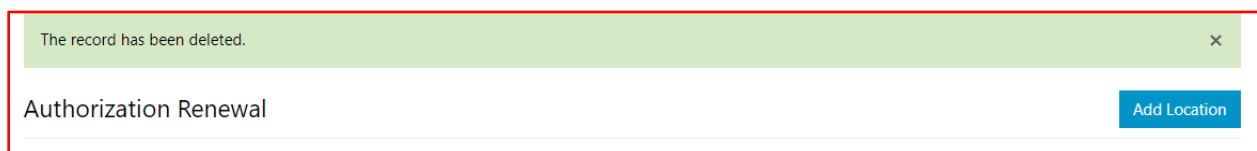
App Status	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	[REDACTED]	[REDACTED]	RIO HONDO COMMUNITY MHC	12/10/2010			New
Unsubmitted	Renew	1913191319	[REDACTED]	[REDACTED]	WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New

Authorization

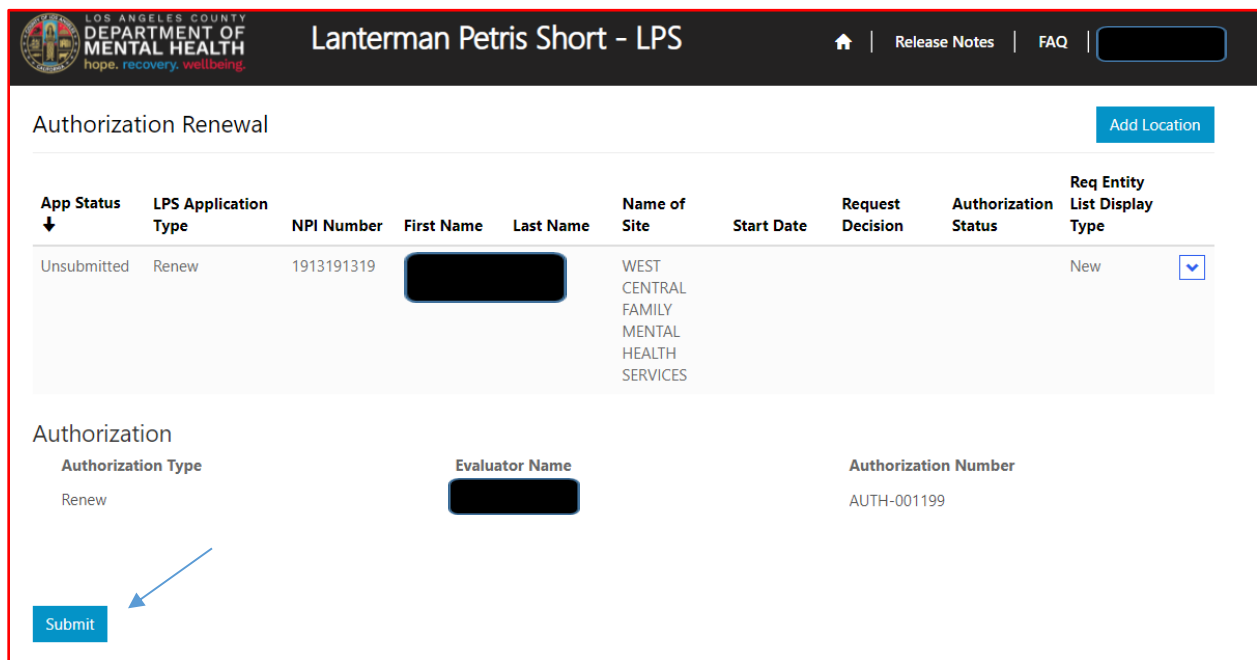
Select delete button.



The screen will confirm record deletion.

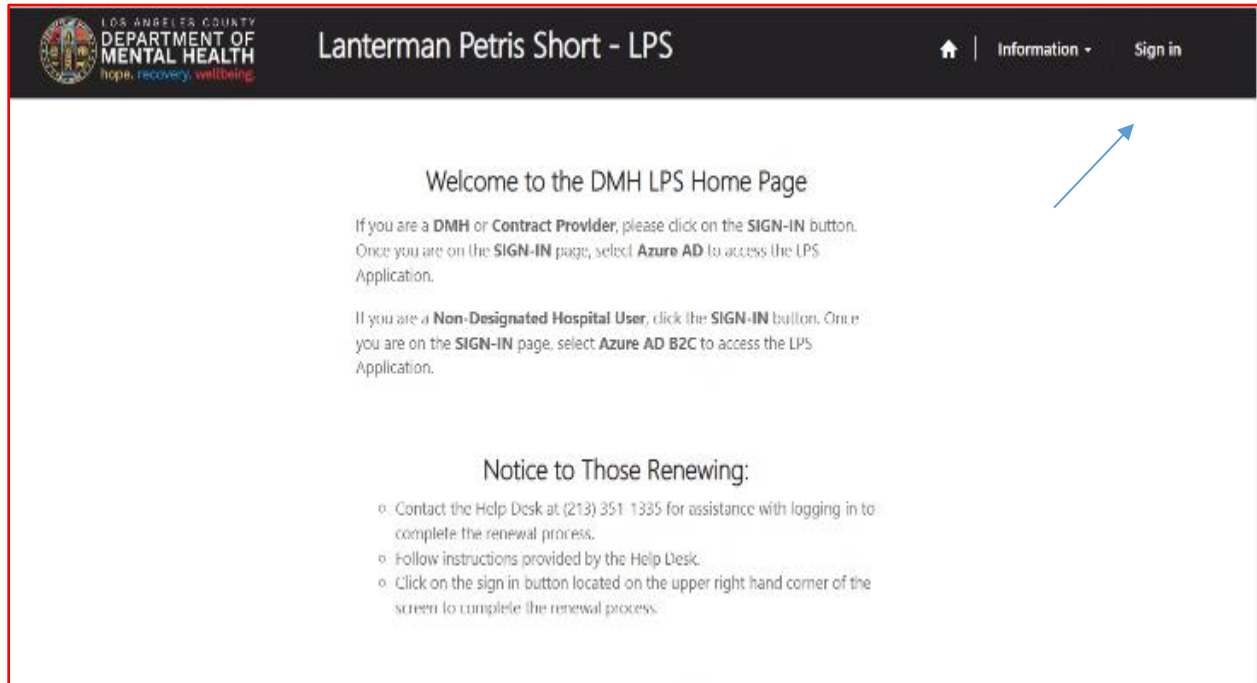


Select Submit button.

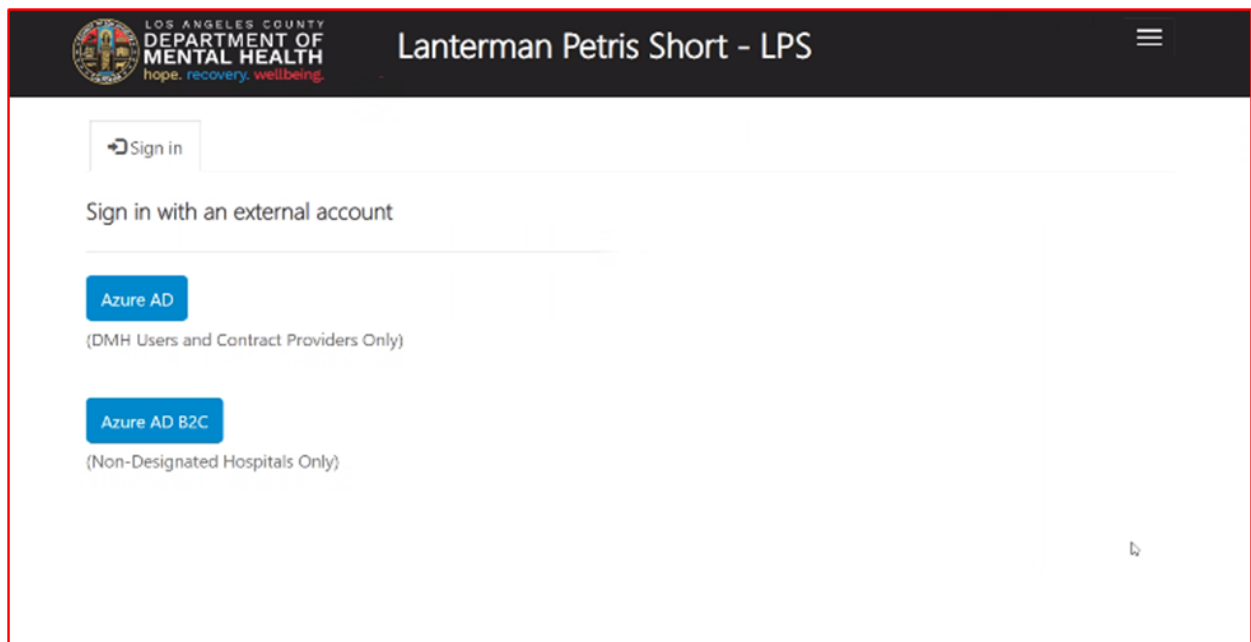


How to Change a Location while Renewing Non-Designated Hospital

Select the sign in button in the upper right-hand corner.



Select Azure AD B2C to start Change Location.



Sign in with Email Address and Password to begin Change Location.


The screenshot shows the top navigation bar of the LPS system with the Los Angeles County Department of Mental Health logo and the title "Lanterman Petris Short - LPS". A home icon and an "Information" dropdown menu are also present. The main content area is titled "Returning User - Sign-In" and contains two input fields for "Email Address" and "Password". Below these fields is a link for "Forgot your password?" and a blue "Sign in" button. A horizontal line separates this section from the bottom, which includes the text "OR" and a link "Don't have an account? Sign up now".

Select Authorization Renewal button.

The screenshot displays the LPS system dashboard. The top navigation bar includes the department logo, the title "Lanterman Petris Short - LPS", and links for "Release Notes", "FAQ", and a search bar. The main content area provides instructions for users: "Step 1 - Click on the 'Start Request' button to begin the request." and "Step 2 - To edit, review, and submit application, click the drop-down arrow button [dropdown icon] below." Below the instructions, the "Authorization Status" is shown as "Expired" and the "Authorization Expiration Date" is "10/1/2021". A blue "Authorization Renewal" button is highlighted with a blue arrow. Below this, there is a table with columns for "LPS Application Type", "Created On", "NPI Number", "First Name", "Last Name", "Credential", "Name of Site", "Start Date", "App Status", and "Authorization Status". The table is currently empty, with the text "There are no records to display." below it.

LPS Application Type	Created On	NPI Number	First Name	Last Name	Credential	Name of Site	Start Date	App Status	Authorization Status
There are no records to display.									

Select Add Location button.



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[Home](#) | [Release Notes](#) | [FAQ](#) |

Authorization Renewal

Add Location

App Status ↓	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319	<input type="text"/>		WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New <input type="button" value="v"/>

Authorization

Authorization Type

Renew


Evaluator Name

Authorization Number

AUTH-001199

Submit

Review to ensure all fields are completed. If fields are blank, please provide information.

 Create ×

Candidate's Information

LPS Application Type *	Authorization
<div>Renew</div>	<div>AUTH-001199</div>
First Name *	Last Name *
<div></div>	<div></div>
Email *	Phone Number *
<div></div>	<div></div>
Individual NPI Number *	
<div>1913191319</div>	
Job Title *	Scope of Practice *
<div>HPIAI</div>	<div>County/DMH or Contracted Facility Sta</div>
Credential *	License No *
<div>LCSW</div>	<div></div>
Years Licensed *	
<div></div>	

Employment Information

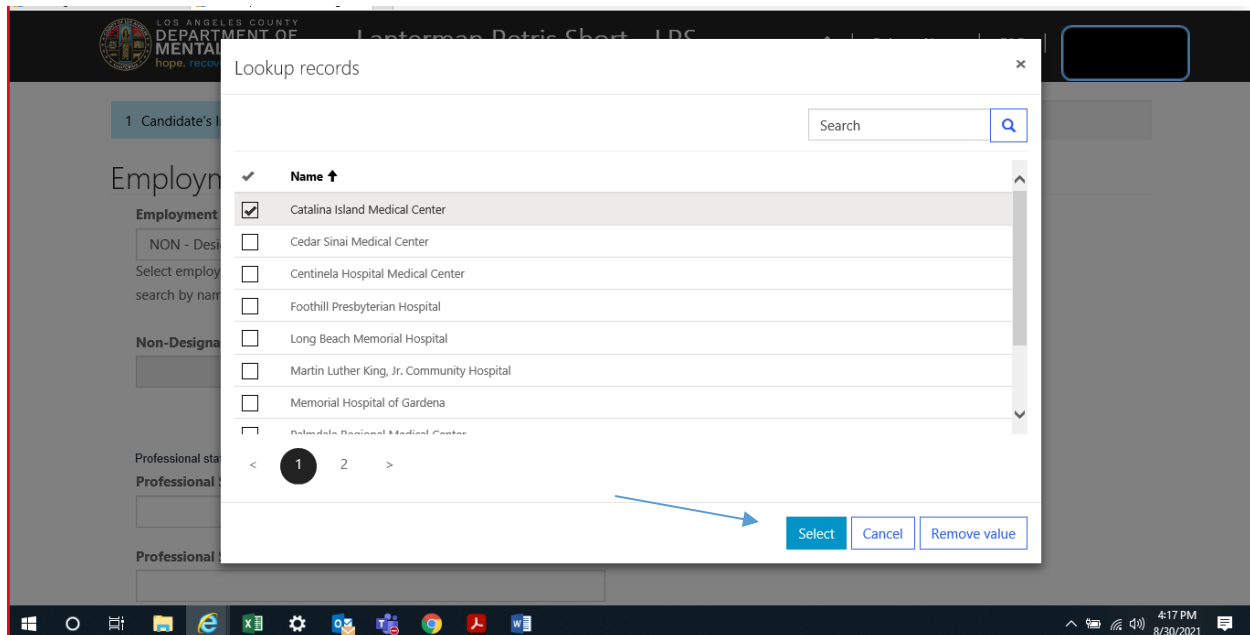
Select NON-Designated Hospital from the drop-down menu.

The screenshot shows the 'Employment Information' section of the LPS system. At the top, there is a header with the Los Angeles County Department of Mental Health logo and the text 'Lanterman Petris Short - LPS'. Below the header, there are three tabs: '1 Candidate's Information' (checked), '2 Employment Information' (active), and '3 Attestation for LPS'. The main heading is 'Employment Information'. Under this heading, there are several fields: 'Employment Type *' with a dropdown menu showing 'NON - Designated Hospital'; 'Employment Start Date' with a date picker; 'Non-Designated Hospitals *' with a search bar and a magnifying glass icon; 'Professional Staff Name *' with a text input field; and 'Professional Staff's Email *' with a text input field. A note below the search bar reads: 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The Windows taskbar is visible at the bottom, showing the time as 4:13 PM on 8/30/2021.

Click on magnifying glass.

This screenshot is identical to the one above, but with a blue arrow pointing to the magnifying glass icon in the 'Non-Designated Hospitals *' search bar. The arrow originates from the right side of the screen and points directly to the magnifying glass icon.

Select Work Location from list provided on page 1 or 2 and click select at the bottom of the screen.



Professional Staff

Professional staff clinically in charge of Designated Facility or Agency may include but is not limited to clinical supervisor, program manager, clinical director etc. (If applicant is clinically in charge, then identify immediate supervisor contact information).

Select next when done.

The screenshot shows a form titled 'Professional staff clinically in charge of Designated Facility or Agency (If applicant is clinically in charge, then identify immediate supervisor contact information)'. The form has three input fields: 'Professional Staff Name *', 'Professional Staff's Email *', and 'Professional Staff's Phone # *'. Below the fields are two buttons: 'Save and Previous' and 'Next'. A blue arrow points to the 'Next' button.

Attestation

Select attestation link, print form, and fill out attestation completely.

(Electronic completion is acceptable). Select Choose File to upload and attach attestation form.

Please note, each location added must have a separate attestation attached.

Next, select Save & Close at the bottom of the screen.

Attestation for LPS

http://file.lacounty.gov/sdsinter/dmh/1040626_AttestationforLPSAuthorizedApplicants.pdf

Please print the above linked document, complete, scan, and upload the signed attestation form.

Attach *

Choose File No file chosen

Save & Close

Delete location that is no longer needed.

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Home | Release Notes | FAQ |

Authorization Renewal

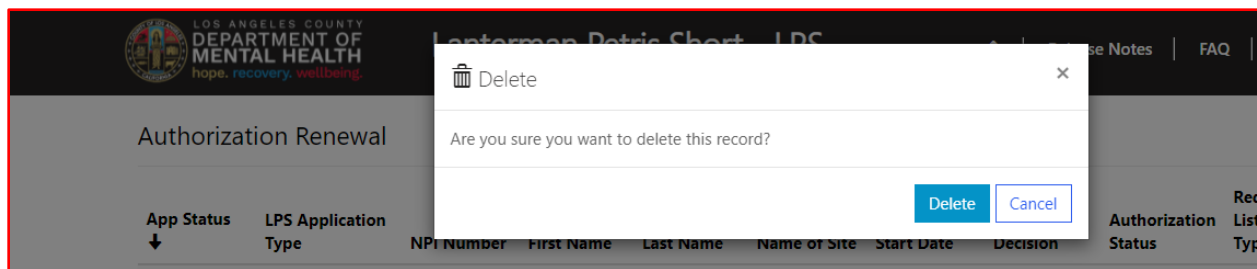
Add Location

App Status	LPS Application Type	NPI Number	First Name	Last Name	Name of Site	Start Date	Request Decision	Authorization Status	Req Entity List Display Type
Unsubmitted	Renew	1913191319			RIO HONDO COMMUNITY MHC	12/10/2010			New
Unsubmitted	Renew	1913191319			WEST CENTRAL FAMILY MENTAL HEALTH SERVICES				New

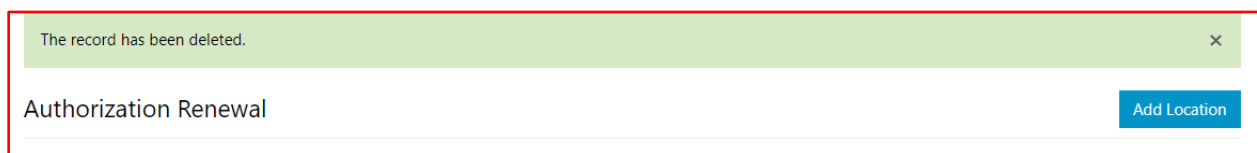
Authorization

Edit
Delete

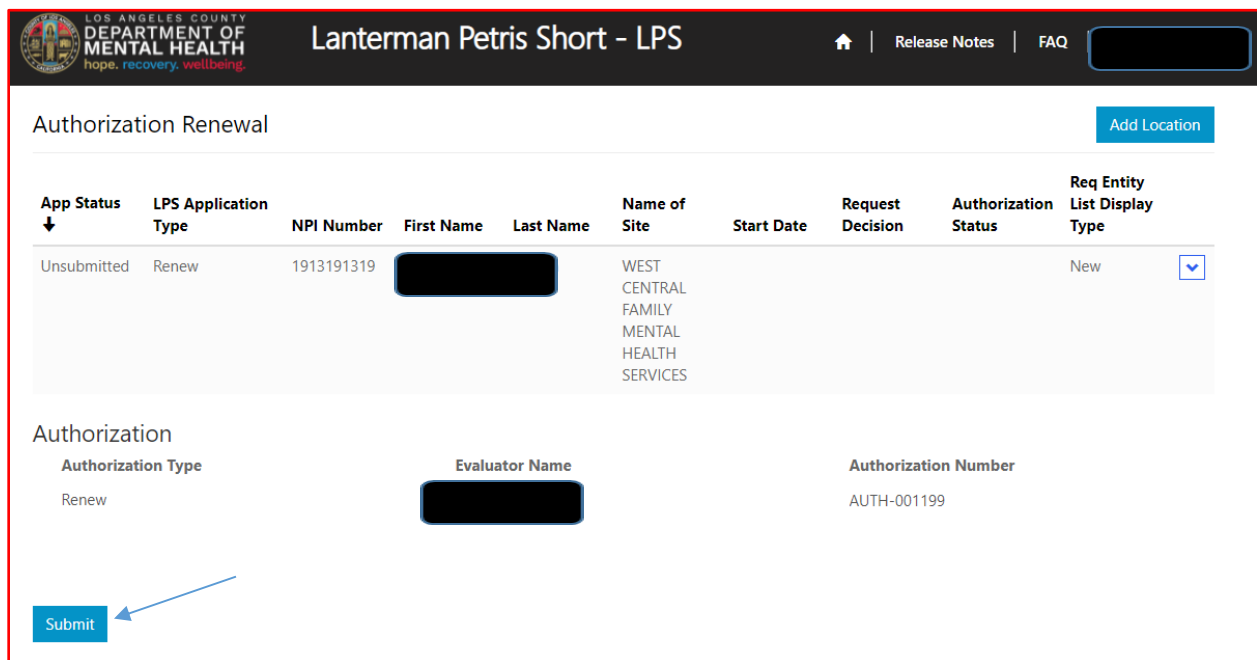
Select delete button.



The screen will confirm record deletion.




Select submit button.




LPS Training and Exam Directions

Click “Continue Training” button to begin the Initial LPS Authorization Training.



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Continue Training

Upon completion of each training video, the attestation check box will appear. Please select check box to move to the next training Module.



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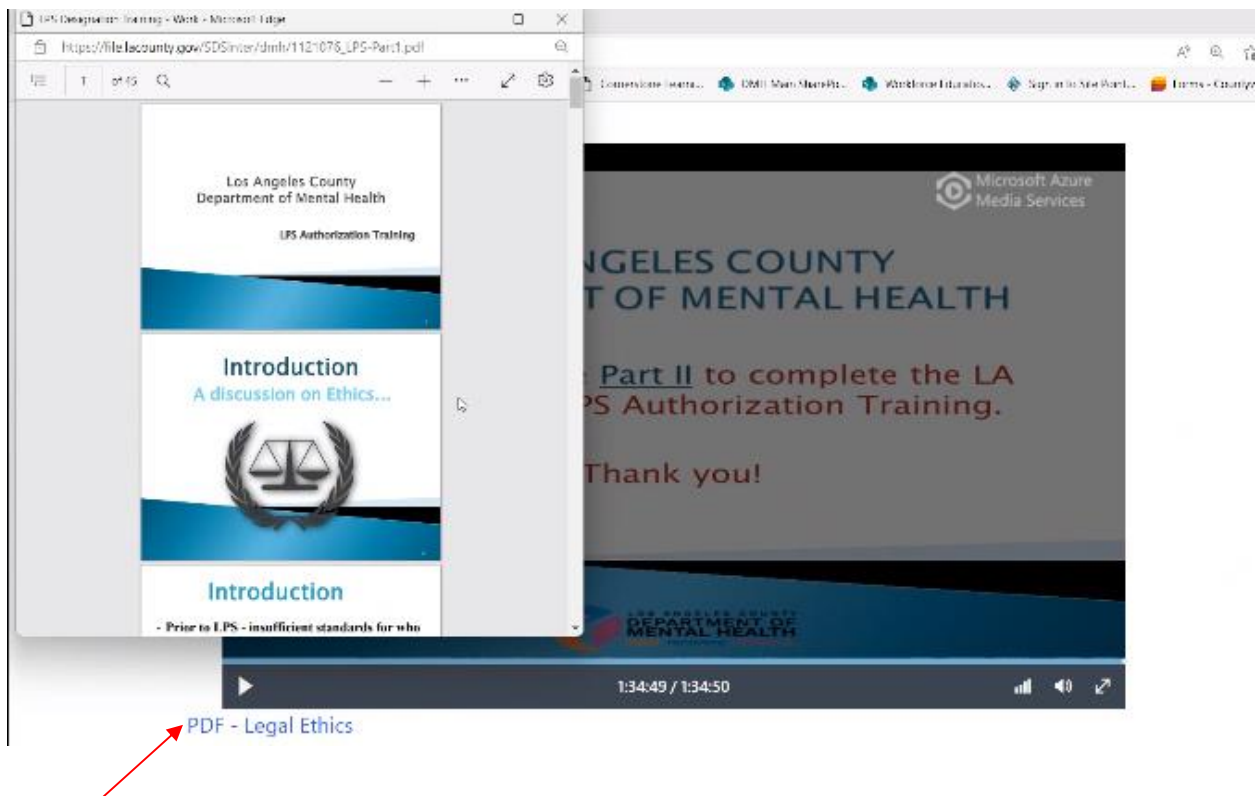
Please go to the [Part II](#) to complete the LA County DMH LPS Authorization Training.

Thank you!

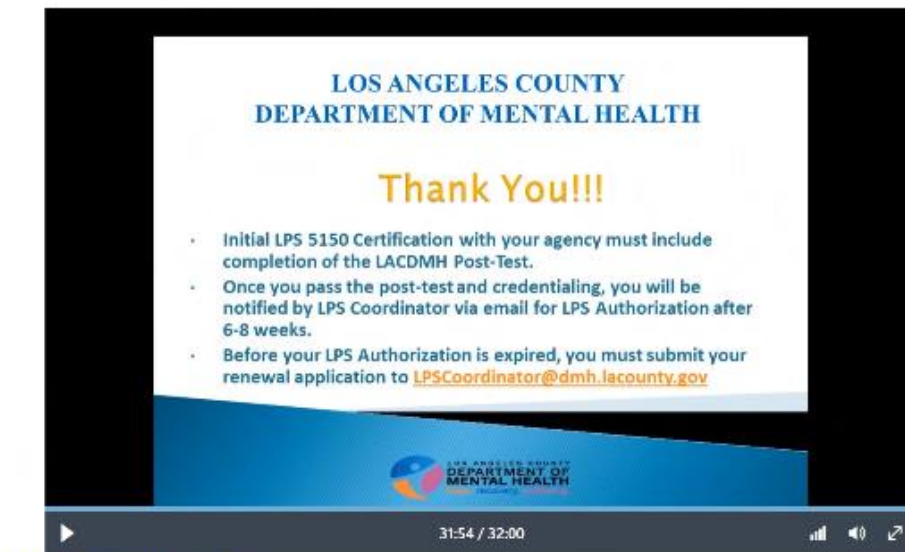


1:34:49 / 1:34:50

To view PowerPoint slides, please click on PDF hyperlink



Upon completion of module three, select “Exam Page” button when you are ready to take the exam. You will need to take the exam within 30 days.



PDF - Practical Application

☒ I have completed the Module 3 video in full.

Exam Page

Please read the exam page instructions carefully and when ready select “Begin Exam” button. Once you begin the exam, you will not be able to go backwards to change/review your answers. If for any reason you were logged out of the exam prior to finishing, you will need to contact LPS Training at lpstraining@dmh.lacounty.gov. If you do not complete the exam within the 2-hour time frame, your exam will be scored based on the questions answered up until that point.

Exam Page

Welcome to the Online LPS Exam. You have 2 hours to complete the exam. The exam consists of 50 questions multiple choice.

- No study materials are allowed during the exam.
- You are not to share or reproduce exam content.
- You are not to receive assistance while taking the exam.

A score of 70% will be required to pass. If you fail the exam, eligibility to retest will occur after a 7-day period. If you fail the exam a second time, you will need to wait another 7 days and must retake the Online LPS Training before you can retest. If you fail the exam a third time, you will not be eligible to apply for the LPS Authorization Training and Exam for a 1 year time period.

Begin Exam

Please click the “Submit” button for grading.

LPS EXAMINATION

You have completed your LPS examination. Please click the submit button for grading.

Submit



Exam results may take up to several minutes. If results have not been received after several minutes, please check your email for exam results. (Pass/Fail).

Exam Completed

Exam Results: ...pending

Results processing may take up to several minutes. If results have not been received after several minutes, please check your email for exam results.

Exam results will appear on your screen. If you pass, you will receive the LPS Authorization letter via email.

Exam Completed

Exam Results: **PASSED**



Congratulations, you have successfully passed the LPS Exam. You will receive the LPS Authorization letter via email. For questions, please submit an email inquiry to LPSCoordinator@dmh.lacounty.gov

