Provider Alert

Initial Issue Date: October 01, 2025 **FFS Acute Psychiatric Inpatient Facilities**

Alert No: 2025-03: TIMELY SUBMISSIONS OF TREATMENT AUTHORIZATION REQUESTS (TARs)

A Publication of the Local Mental Health Plan (LMHP) of the County of Los Angeles Department of Mental Health

IN THIS ISSUE

The purpose of this Provider Alert is to update previously published information to contracted and non-contracted fee-for-service hospitals regarding federal requirements related to authorization of Specialty Mental Health Services (SMHS), specifically, the concurrent review standards for Psychiatric Inpatient Hospital and Psychiatric Health Facility Services regarding timely submissions of Treatment Authorization Requests (TARs).

Background

On May 6, 2016, the Center for Medicare and Medicaid Services (CMS) published the Medicaid and Children's Health Insurance Program (CHIP) Managed Care Final Rule aimed at aligning the Medicaid (Medi-Cal in California) managed care regulations with requirements for other major sources of coverage. The Final Rule requirements for authorization became effective July 1, 2017. The Department of Health Care Services (DHCS) published two Behavioral Health Information Notices (BHIN)s, Numbers 19-026 and No. 22-017, respectively.

Pursuant to BHIN No. 19-026, DHCS required all Local Mental Health Plans (LMHPs) to conduct concurrent review and treatment authorization following the first day of patient admission to a general acute care hospital with psychiatric units, a psychiatric hospital, or a psychiatric health facility (PHF) certified by DHCS as Medi-Cal providers of inpatient services. The Los Angeles County Department of Mental Health (LACDMH) as the LMHP is revising its timeline for providers to submit required documentation to the Managed Care Operations – Treatment Authorization Request Unit (TAR Unit) to allow it to meet the BHIN requirements.

MHPs may elect to initially authorize multiple days, but each day of treatment must meet medical necessity for admission and/or continued stay criteria. Medical necessity criteria are found in California Code of Regulations (CCR), Title 9, Chapter 11, Section 1820.205. The diagnoses used shall conform to the diagnoses found in DSM 5 and a crosswalk to ICD 10 TR. The administrative day documentation requirements are found in BHIN No. 22-017.

Implementation

Beginning **October 01, 2025**, all documentation required for concurrent review and treatment authorization shall be submitted within 24 hours of patient admission, or by the first business day after a weekend or holiday. Lack of required accurate and timely documentation will put the hospital at risk of unanticipated denials.

Documents required during the notification of admission, or first upload, include:

- Initial TAR form
- Proof of Medi-Cal eligibility
- Hospital Face Sheet
- Beneficiary's order for admission, if physician's signature is obtained

NOTE: The order for admission may be submitted not later than the second upload so a physician signature can be obtained.

A completed Hospital Face Sheet shall include:

- Hospital name and address,
- Patient name and date of birth,
- Insurance coverage,
- Medi-Cal number and county of responsibility identified in the Medi-Cal Eligibility Data;
- Current address/place of residence;
- Date and time of admission;
- Working (provisional) diagnosis;
- Name and contact information of admitting, qualified and licensed practitioner; and
- Contact information for utilization review staff or responsible staff that has been delegated by the facility.

Review of the initial authorization request, or second upload:

When medically necessary for the beneficiary, before the end of the initial authorization period or a subsequent authorization period, the hospital shall submit a continued stay authorization request.

Documents required for the continued stay authorization request, or second upload, are:

1. Initial psychiatric evaluation, to include prior episode history that is relevant to current stay.
2. History and physical examination to include co-occurring factors such as substance use information and known medical history.
3. Psychosocial evaluation, including a discharge and aftercare plan that documents necessary follow-up care and social and community supports, as well as a recommended timeline to utilize in such care and supports.

In addition to the required documentation stated above, the hospital staff shall also upload the following documents:

a) Signed and dated physician orders, medication orders, medication administration records with documentation of response to current medications. The physician of record must be credentialed and contracted with the LMHP.
b) Signed and dated physician and nursing progress notes, social worker's notes, round sheets, and laboratory results.
c) Physician-signed and dated multidisciplinary treatment plan including any updates.

Consequence of not submitting the admission notification and accompanying documents within the required timeline

DHCS Information Notice No. 22-017 requires that all psychiatric inpatient level of care services in general acute care hospitals with psychiatric units, psychiatric hospitals, and PHFs certified by DHCS as Medi-Cal providers of inpatient services must have consistent guidelines for the authorization of inpatient services. The DMH TAR Unit will be denying the first day of admission if the admission notification is not received by the TAR Unit within 24 hours of admission, or by the first business day after a weekend or holiday.

Documents required for review of Continued Stay Authorization Request

DMH's Health Integration and Access TAR Unit shall issue a decision on a hospital's continued stay authorization request within 24 to 72 hours of receipt of the request. The documents presented by the hospitals shall be based on medical necessity criteria that are consistent with the current evidence-based clinical practice guidelines, principles, and processes.

The uploads shall be received by the upload submission days. The upload shall include all outstanding documents from the preceding days as outlined in the Provider to TAR Unit Communication Form. It is the provider's responsibility to review the Communication Form.

Should you have any questions, please contact TARUNIT@dmh.lacounty.gov

We thank you for your work and collaboration with LACDMH TAR Unit.