LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH
hope. recovery. wellbeing.

ECM
ENHANCED CARE MANAGEMENT

Date: _____

DMH IBHIS#: _____

SSN: _____

Enhanced Care Management (ECM) Referral Form

Client Information

Name: _____ Date of Birth: _____

Gender: ☐Male ☐Female ☐Other: _____ Preferred Language: _____

Contact Address: _____

City: _____ ZIP Code: _____ Service Area:___ Phone Number:_____

Current Living Situation: ☐ Homeless ☐ Hotel/Motel ☐ Shelter ☐ House/Apt. ☐ With Family/ Non-Relative Adult

☐ SRO ☐ Sober Living ☐ CRTP ☐ Other_____

Primary Contact Name: _____ Relationship: _____

Primary Contact Phone Number: _____

Refferal Source

Referring Person Name:_____ Agency: _____

Program: _____ Phone Number: _____

Service Area:_____ Email Address:_____

Managed Care Plan (MCP) & Insurance Information

MCP Provider: ☐ Anthem ☐ Molina ☐ HealthNet ☐ LA Care **Medi-Cal ID Number:** _____

Eligibility for DMH ECM Services

Does the client meet the eligibility criteria for participation in the county Specialty Mental Health system?

☐ Yes ☐ No

Is the client experiencing at least one complex social factor influencing their health?

☐ Yes ☐ No

Does the client meet one or more of the following criteria?

☐ High risk for institutionalization, overdose, and/or suicide
☐ Uses crisis services, emergency rooms, urgent care, or inpatient stays as the sole source of care
☐ Has had two or more emergency department visits or hospitalizations due to serious mental illness or substance use disorder in the past 12 months

Reason(s) for Referral

Primary Supportive Needs:

☐ Mental Health Services Linkage ☐ Substance Use Support ☐ Linkage to Housing Navigation Support
☐ Primary Care Connection ☐ Dental Care Linkage ☐ Vision Care Linkage ☐ Food Assistance
☐ Other: _____

Mental Health Diagnosis: _____

Brief Description of Client Needs:

Submit this completed referral form via email to DMHECM@dmh.lacounty.gov

For questions please contact:

Service Areas 1-4: Hosun Kwon, Program Manager (213) 804-2710
Service Areas 5-8: Lilia G. Padilla, Program Manager (213) 465-5154