



Quality Assurance Bulletin

Quality Assurance Unit

County of Los Angeles – Department of Mental Health

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ORGANIZATIONAL PROVIDER'S MANUAL UPDATES

The Organizational Provider's Manual (the Manual), revised May 14, 2026, has been updated to consolidate existing requirements from QA Bulletins, DMH policies, and recent Department of Health Care Services (DHCS) Behavioral Health Information Notices (BHINs). Furthermore, the language in the Manual has been updated to align with recent State Plan Amendment (SPA) updates. Key sections have also been reorganized to improve clarity and ensure readiness for Behavioral Health Transformation, Behavioral Health Services Act (BHSA), and Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) updates.

Significant updates to the Manual include:

- New section was added to Provider & Practitioner Qualifications, which includes a list of eligible practitioner types and incorporates 90-day rule guidelines from [QA Bulletin 24-01R](#);
- Updated criteria to access and medical necessity criteria for Specialty Mental Health Services (SMHS), per BHIN 26-001 and 26-002. Information for this section is detailed in QA Bulletin 26-04;
- Created new section for CANS/PSC-35 - Information from [QA Bulletin 19-02](#), [19-03](#), and [CANS/PSC Update FAQs](#) were incorporated;
- Updated Needs Evaluation language to reflect the Needs Evaluation Tool (NET) form is not required;
- Added new section for Level of Care Tools - Information from [QA Bulletin 24-09R](#) and [CANS/PSC Update FAQs](#) were incorporated;
- Added section on Discharge Planning as a best practice;
- Updated Intensive Home Based Services (IHBS) components to include therapy per SMHS Billing Manual;
- Updated hours of claimable Crisis Stabilization to 23 hours per guidance already put out by DMH Quality Assurance;
- Removed Socialization and Vocational Services as these are no longer claimable within DMH;
- Added concurrent authorization requirements for Adult Residential & Crisis Residential Treatment Services to align with DMH policy 400.02 on authorization and removed lockouts for Mental Health Services (MHS), Day Treatment Intensive (DTI), Day Rehabilitation (DR), Crisis Intervention (CI) and Crisis Stabilization (CS) within Adult Residential, following updates to the DHCS SMHS billing table. Refer to the Manual for important details;
- Added new section for medical necessity for Psychiatric Health Facility (PHF) and Psychiatric Inpatient Hospital Services for organizational purposes and to add updates per QA Bulletin 26-03 and BHIN 26-001;
- Added concurrent review requirement for PHF and Psychiatric Inpatient Hospital Services to align with [DMH Policy 400.02](#)- Additional information regarding concurrent review is forthcoming;
- Updated and added additional information on who can be head of service to align with DMH Medi-Cal Certification Policy;
- Added appendix for youth trauma tools per new QA Bulletin 26-03 and BHIN 26-002;

In addition to the significant changes listed above, the following is a list of updates to take note of. Please review the Manual for the details of each update.

- Updated the Peer Support Services (PSS) section, per BHIN 25-010. PSS can be a standalone service with no location-based lockouts. Service function code is now 20;
- Medication Support Services have been updated to include prescription, dispensing, monitoring, or administration of medication related to substance use disorder services for clients with a co-occurring mental health condition and substance use disorder. Maximum hours of services has been changed from a maximum of 4 hours per calendar day to a maximum of 4 hours within a 24-hour period;
- Program Requirements for Crisis Stabilization have been updated to include the availability of medical backup services;
- Removed crisis response protocol and weekly schedule requirements from Day Treatment Intensive as it is no longer a requirement by the Department of Health Care Services (DHCS). However, the requirement has been maintained in the DMH program Scope of Work / Program Service Exhibit;
- Added a statement that Targeted Case Management services may be billed separately from Adult Residential Services.

If contracted or directly-operated providers have questions related to this Bulletin, please contact the QA Policy and Technical Development team at QAPolicy@dmh.lacounty.gov.

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