

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

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

The following Clinical Forms have been created, updated or discontinued and the [Clinical Forms Inventory](#) has been updated accordingly.

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

## UPDATED FORMS(S)

### MH 709 - Community Outreach Services

IBHIS Form (DO ONLY): COS/MAA/QA Service Note  
 Revision Date: 12/5/14  
 Type of Form (LE ONLY): Required Data Elements  
 Implementation: Upon transition to IBHIS (For LE, transition means submission of client data and claims)

#### REVISIONS:

- Duration in minutes instead of fifteen minute increments (FMI)
- Modified selections for Service Type, Race/Ethnicity (combined fields), Language, Program Area and Service Recipient
- Removed handicapped field and Service Type Description

#### REFERENCES/INSTRUCTIONS:

- The Community Outreach Services Manual is being updated to reflect these changes
- See the 837 Companion Guide for claiming requirements

### MH 633 - Supplemental COD Assessment

IBHIS Form (DO ONLY): Adult Substance Use Assessment  
 Revision Date: 4/17/15  
 Type of Form (LE ONLY): Optional  
 Implementation: For DO: 4/17/15

#### REVISIONS:

- Added field for the alcohol screening score
- Added check box regarding whether or not a brief intervention was provided in relation to the alcohol screening score
- The fields have been added to both the child and adult forms but are only required for adults and transitional age youth (TAY)

#### REFERENCES/INSTRUCTIONS:

- Refer to the SBIRT training materials on the [DMH Internet, Clinical Forms, Co-Occurring Disorders](#) for information regarding how to calculate the alcohol screening score and brief interventions

### MH 553 - Child/Adolescent Supplemental COD Assessment

IBHIS Form (DO ONLY): Child Substance Use Assessment  
 Revision Date: 4/17/15  
 Type of Form (LE ONLY): Optional  
 Implementation: For DO: 4/17/15

**OBsolete FORM(S):** None at this time

If you have any questions regarding this Bulletin, please contact your SA Liaison.

c: Executive Management Team	Judith Weigand, Compliance Program Office	Nancy Butram, Central Business Office
District Chiefs	Program Heads	Department QA staff
Pansy Washington, Managed Care	QA Service Area Liaisons	

1. All Directly-Operated Providers must utilize clinical forms approved by the QA Division. The Integrated Behavioral Health Information System (IBHIS) has incorporated all clinical forms and has been updated to reflect the changes noted on this Bulletin.
2. All Contract Providers must utilize clinical forms in a manner defined by the designation of the clinical form within the Clinical Forms Inventory.
  - a. Required Data Element: Must maintain all required data elements of the form and have a method for producing a paper form or electronic report with all the required data elements (“Required” form type has been eliminated. All “Required” forms are now “Required Data Element” forms.)
  - b. Required Concept (Formerly “Optional”): Must have a method of capturing the specific category of information indicated by the title and data elements of the form
  - c. Ownership: Must have a method for complying with all laws/regulations encompassed by the form  
 DMH Policy 104.08: Clinical Records Maintenance, Organization, and Content (Note: Policy 104.08 is being revised to reflect the above information)