



Quality Assurance Bulletin

Quality Assurance Division

County of Los Angeles – Department of Mental Health
Jonathan E. Sherin, M.D., Ph.D., Director

June 29, 2018

No. 18-08

FINAL RULE: ACCESS TO CARE

This Bulletin serves as additional guidance to QA Bulletin 18-02 “Final Rule: Network Adequacy”, which previously advised that new timely access to care standards must be met by all Los Angeles County Department of Mental Health (LACDMH) directly-operated, contracted and fee-for-service providers starting July 1, 2018. The provision for these new requirements is based on State and federal law and regulation.

The attached “Timely Access to Care” timeframe requirements serve as interim policy effective July 1, 2018. The QA Division is in the process of updating and finalizing LACDMH Policy No. 302.07: Access to Care.

Key Modifications and Reminders:

- Access to care standards apply for all requests for service whether an initial or subsequent request.
- All requests must be screened and/or triaged to determine whether the need meets the emergency, urgent, expedited, or routine standard.

NOTE: For initial requests, there is a formal screening and triage process. For subsequent requests, there is no formal screening and/or triage requirements. A new policy, Responding to Initial Requests for Service, will be issued shortly.

If Directly-Operated or Contracted providers have any questions regarding this Bulletin, please contact your Service Area QA Liaison.

c: Jonathan Sherin, M.D., PhD
Discipline Chiefs
QA Division Staff
Compliance Program Office
Giri Patterikalam, Revenue Systems

Curley Bonds, M.D.
Deputy Directors
SA QIC Liaisons
Zena Jacobi, CBO

Greg Polk
Program Managers
Legal Entity QA Contacts
Mirian Avalos, CIOB

Timely Access to Care

Wait Times from Date of Request to First Offered Appointment			
Emergency	Wait Time	DMH Policy	Authority
Crisis Evaluation <i>Services for a condition or situation in which a client presents a current danger to self or others or is immediately unable to provide for or utilize food, clothing, or shelter</i>	ASAP, Same Day	302.02 302.07 302.12	CCR Title 9, Chapter 11 CA WIC 5150/5585
Urgent	Wait Time	DMH Policy	Authority
Urgent Services <i>Services for a condition or situation that, if not addressed, would be highly likely to result in an immediate emergency condition</i>	48 hours (no pre-authorization) 96 hours (pre-authorization)	302.07	CFR Title 42, 438 CCR Title 28, 1300.67.2.2
Expedited	Wait Time	DMH Policy	Authority
Expedited Services <i>Based on triage, services that require a more timely response than a regularly scheduled appointment consistent with good professional practice (e.g. has run out/will run out of medication prior to routine appointment, significant distress) (Title 28)</i>	Prior to 10/15 business days as indicated	302.07	CCR Title 28, 1300.67.2.2
Other Types of Appointments	Wait Time	DMH Policy	Authority
ACCESS - Priority <i>ACCESS Appointment Line priority designation</i>	5 business days	302.07	-----
DC - Priority <i>Discharged from acute inpatient facility, jail or juvenile justice facility</i>	5 business days from date of discharge	302.07	NCQA/HEDIS Measure
Routine Appointments	Wait Time	DMH Policy	Authority
Routine MHS, TCM, MSS (non Psychiatrist)	10 business days	302.07	DHCS Info Notice 18-011 CCR Title 28, 1300.67.2.2
Routine Psychiatrist Services	15 business days	302.07	DHCS Info Notice 18-011 CCR Title 28, 1300.67.2.2
Rescheduled Appointments	Wait Time	DMH Policy	Authority
Canceled/Missed	Within above timeframes from date of appointment/request for new appointment	302.07	-----

NOTES:

The appointment times for routine services may be extended beyond the ten (10) or fifteen (15) business day standard under the following circumstances:

- If no treatment plan: determination by an Authorized Mental Health Discipline (AMHD) acting within the scope of his/her practice and consistent with professionally recognized standards of practice that a longer waiting time will not have a detrimental impact on the health of the client.
- If treatment plan: in accord with frequency on the tx plan or, if client requests more frequent services than are listed on the tx plan, and the services listed on the tx plan are beyond the 10 or 15 business day standards, then determination by an Authorized Mental Health Discipline (AMHD) acting within scope of his/her practice and consistent with professionally recognized standards of practice that a longer waiting time will not have a detrimental impact on the health of the client.

Every effort shall be made to provide potential clients who screen for medication needs an initial medication appointment on the same day as the initial clinical appointment. Minimally, both appointments must be made at the point of the request.