County of San Bernardino
Department of Behavioral Health

Reporting Procedures for Serving Foster Children Placed Out-of-County

Effective Date 03/13/09
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Purpose

To identify how the County of San Bernardino Behavioral Health (DBH) will authorize services to comply with Title 9, CCR § 1830.220(b)(4)(A), to ensure access to outpatient specialty mental health services for foster children/youth placed outside of the county of origin. This revised reporting procedure will ensure compliance with California Department of Mental Health (DMH) Information Notice No: 08-24.

Authorization of Out-of-County Medi-Cal Foster Children

Upon receipt of a Treatment Authorization Request (TAR) from the host county (sometimes called County-of-Origin), Behavioral Health's Access Unit will review for medical necessity and notify the host county within three (3) working days following the date of the request for authorization decision by completing the Out-of-Plan Payment Authorization Request/Approval Form

If it is determined that additional information is needed to determine medical necessity, Behavioral Health will request an extension of up to three (3) working days from the date the additional information is received, or fourteen (14) calendar days from receipt of the original TAR, whichever is less.

The request for extension shall be made by the utilization of the same TAR used for approval of services. The TAR will specify what additional information is needed for the determination of approval or denial.

Reimbursement for Services by Contract Providers

Arrangement of reimbursement for services provided to foster care/youth by Contract Provider will be made as follows:

1.	Once services have been authorized by the DBH Access Unit, the completed TAR will be forwarded to DBH Fiscal Administrative Services Office. The TAR authorizes payment in Part II (Payment Authorization).

Continued on next page

Reimbursement for Services by Contract Providers (continued)

2.	Within thirty (30) days of the date of authorization, DBH Fiscal Administrative Services Office will arrange for reimbursement to Contract Providers by the utilization of one of the following four methods: • Implement a Purchase Request with the Contract Provider for reimbursement of the initial treatment authorization • Implement a Purchase Order if initial analysis determines that the duration of services may be ongoing or the potential of a long-term relationship with the Contract Provider is determined • If it is determined that extensive treatment is necessary and the Contract Provider has established an ongoing relationship with DBH, a contractual relationship may be implemented with the Contract Provider. • Medi-Cal certification process will be initiated upon the establishment of a financial agreement with the Contract Provider

Reimbursement for Host County Services

Reimbursement to the Host County will be based on un-reimbursed costs. (e.g., gross costs not to exceed SMA, less Medi-Cal payment made directly to the Host County, less EPSDT. Balance is to be paid by DBH).

Resolution of Disagreement

Resolution of disagreement will be handled through an arbitration process. Disagreement that may arise as a result of the authorization and/or payment process will be resolved in accordance with Title 9 CCR § 1850.405 (c).

- Department of Behavioral Health will designate a non-affiliated Program Manager to provide arbitration as requested.
- Arbitrators will serve throughout the year on a scheduled rotation and can be identified upon request

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