San Bernardino County
Department of Behavioral Health

Closure of DBH Contract Provider Procedure

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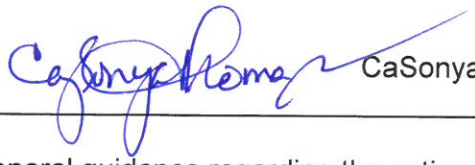

CaSonya Thomas, Director

Purpose

To provide general guidance regarding the actions the Department of Behavioral Health (DBH) and DBH contract providers must take when a DBH contract provider ceases operations due to closure.

Roles and Responsibilities

The following table outlines the roles, responsibilities and timeline related to the closure of a DBH contract provider:

Role	Responsibility	Timeline
Closing Contract Provider	Notifies DBH Administration of the decision to close.	Per the contract, 30 calendar days before closing, but for care continuity, it is preferred 60 days' notice be given
	Drafts closure notification to clients and provides to DBH. See Notification to Clients and Community section of this procedure regarding required elements.	Within two (2) business days of decision to close for DBH to review and approve.
	Posts notice to its clients at its applicable facility (ies).	Within 15 calendar days of decision to close.
	Ensures clinical and medical staff meets their ethical obligations regarding client care.	Ongoing during closure.
	Makes available to DBH any requested information that is necessary to comply with the DBH contract and State of California Standard Agreement [MHP Contract].	Ongoing during closure, but no later than seven (7) calendar days after closure.
	Enters outstanding services into DBH's Behavioral Health Management Information System (BHMIS).	Within 30 calendar days of last service date.
	Provides fiscal information to DBH Auditing.	Ongoing during closure and thereafter until final audit completed.

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Roles and Responsibilities, continued

Role	Responsibility	Timeline
Closing Contract Provider, continued	Inventories DBH funded equipment, furniture, etc., and adheres to DBH requests to return.	Within 15 calendar days of decision to close.
	Contacts DBH Medical Records for instructions on how to label, index, box and send medical records.	Within 15 calendar days of decision to close.
	Relinquishes custody of client medical records to the DBH Medical Records Supervisor.	Within seven (7) calendar days after closure.
	Works with DBH Information Technology to determine appropriate action, i.e., sanitize or return, regarding computer hard drives, copiers, external drives, etc., that contain protected health information.	Ongoing during closure but no later than 31 calendar days after closure (after last services are entered).
	Deactivates its National Provider Identifier (NPI) upon completion of all billing, if applicable.	Within 30 calendar days of closure.
	Deactivates its Medicare certification, if applicable.	Within thirty (30) days of closure.

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Roles and Responsibilities, continued

Role	Responsibility	Timeline
Applicable DBH Deputy Director or designee	Assembles a DBH Task Force with the applicable Program Manager as the Chair. Task Force shall consist of representatives of the following DBH Programs, as applicable: • Medical Services • Contracts • Quality Management • Fiscal Services • Auditing • Business Office • Information Technology • Facilities and Projects Management • Research and Evaluation • Medical Records • Access Unit • Patients' Rights Office • Cultural Competence and Ethnic Services • Compliance • Public Information Office **Note**: Attendance is required for the aforementioned DBH Programs and the attendee must be a representative who can take action when assigned a task.	Within five (5) business days of closure notice.
	Ensures all required actions are completed on the DBH Contract Provider Facility Closure Checklist.	Ongoing during closure but no later than 45 days after closure.
	Directs contract provider to the appropriate DBH Program for any technical assistance.	Ongoing during closure.

Important Note: It is the expectation for contract providers to adhere to timelines. Both DBH and the contract provider may only make deviations to the timeline upon mutual agreement.

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Closure of DBH Contract Provider Procedure, Continued

Notification to Clients and Community

When a DBH contract provider ceases operations due to closure, both DBH and the contract provider share responsibility in providing proper notification to clients and assisting the clients to ensure continuity of care. In order to ensure proper notification, the following guidelines shall be followed:

If...	Then...
Client is currently receiving services at contract provider clinic(s)	• Contract provider shall provide DBH with draft closure notification for clients within two (2) business days of decision to close. Letter shall contain the following information, as applicable: ○ Notice of termination of provider ○ Date services will no longer be provided ○ Alternate services that are available to the client ○ DBH Access Unit contact information ○ Instructions on how clients can obtain medical record information. • DBH shall review, approve and send letter back to contract provider to send within two (2) business days. • Contract provider shall send and post as indicated in the Roles and Responsibilities section of this procedure.
Client is no longer receiving services at contract provider clinic(s)	• Notification is not required.
Client relationship not yet established	• DBH contract provider who has determined it will not be providing services due to a closure shall refer potential clients who contact them by telephone or walk-in to the DBH Access Unit.

Note: For more detailed information regarding the transition of clients from Contract Agencies to the Department of Behavioral Health, please refer to DBH Information Notice 09-06.

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Minor Clients

Additional steps must be taken when the contract provider treats minor clients:

Step	Action
1	Contract provider shall provide written notification to the DBH Children' Services Program Manager II within one (1) business day of decision to close.
2	DBH Children's Services Program Manager II, together with the contract provider will coordinate a mutually agreeable solution for services to ensure no disruption of services occurs.

Transfer of Mental Health Client Medical Record to New Provider

When a DBH client is transferred from a closing contract provider to an existing/current contract provider or a DBH clinic, the following steps shall be taken:

1. Client shall sign an Authorization for Release of Protected Health Information (Spanish) form prior to the release of client medical record.
2. Within 30 days of closing and before providing charts to Medical records, the closing contract provider shall close the client episode in DBH's BHMIS.
3. Closing contract provider shall copy the following information from the client medical record and provide it to the receiving provider:
    - Consent for Outpatient Treatment
    - Diagnosis Sheet
    - Clinical Assessment
    - Client Plan
    - Care Necessity
    - Medication Order Sheet
    - Client Resource Assessment
    - HIPAA Acknowledgment
    - Advanced Health Care Directive form
    - Psychiatric Evaluation
    - Last Medical Doctor (MD) Medication Note
    - Last four (4) non-MD treatment notes
    - Discharge Summary
4. Client medical record shall then be processed according to the Retention and Storage of Medical Records section of this procedure.

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Transfer of Alcohol/Drug Services (ADS) Client Medical Record to New Provider

When a DBH-ADS client is transferred from a closing contract provider to another contract provider or a DBH clinic, the following steps shall be taken:

1. Client shall sign an Authorization for Release of Protected Health Information (Spanish) form prior to the release of client medical record.
2. Closing contract provider shall complete the Inter-Program Referral Form and fax the completed form to the receiving DBH-ADS provider.
3. Within 30 days of closing and before providing charts to Medical records, the closing contract provider shall close the client episode in DBH's BHMIS.
4. Closing contract provider shall copy the following information from the client medical record and provide it to the receiving provider:
   - SIMON Registration Form
   - Outpatient Consent to Treatment
   - Client Plan
   - Addiction Severity Index (ASI)
   - Current Treatment Plan
   - Discharge Summary
5. Client medical record shall then be processed according to the Retention and Storage of Medical Records section of this procedure.

Retention and Storage of Medical Records

When a provider closes, DBH must ensure that all client medical records are retained and stored in accordance with regulatory requirements and county guidelines. It is necessary to safeguard all medical records to protect the privacy and security of the clients. Additionally, retention of client medical records is required for audits and/or reviews from other governmental agencies.

DBH contract providers have an obligation to preserve client medical records for a minimum of seven (7) years following the discharge of an adult client. If the client is an un-emancipated minor, the medical record shall be kept at least one (1) year after the minor reaches age of eighteen years and in any case, for not less than 7 years, whichever is later. Likewise, the records of a pregnant client must be retained for 25 years after the birth of the child.

In order to ensure compliance with these requirements, DBH contract providers shall arrange for storage of medical records according to the following guidelines:

- Client medical records of county funded programs shall be stored in an appropriate confidential manner by DBH Medical Records.
- Maintain responsibility for boxing, indexing and delivering all records to DBH Medical Records.

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Retention and Storage of Medical Records, continued

- Client medical records of all non-county funded clients shall be stored in an appropriate confidential manner by the closed contract provider in accordance with the following table:

Services	Standards
Mental Health	Health and Safety Code, Section 12345
ADS	Alcohol and/or Other Drug Program Certification Standards, Section 17015 (e)

Consequences of non-compliance

Should contract providers fail to adhere to the requirements of this procedure, DBH is obligated to report non-compliance to the appropriate state licensing board and state governing agency. Examples of non-compliance, include, but not limited to, the following:

- Failure to relinquish medical records
- Medical records are not retained for the minimum required years
- Client abandonment

Non-compliance may cause a DBH contract provider to be ineligible for future contracts.

References

Alcohol and/or Other Drug Program Certification Standards, Section 17015(e)
California Business and Professions Code, Sections 480, 2960, 4982 4989.54, 4992.3
California Code of Regulation, Title 9, Section 784.28
California Code of Regulation, Title 16, Section 1881 (i)
California Health and Safety Code, Section 123145
Code of Federal Regulation, Title 42, Section 438.10 (f)(5)
DBH Clerical Manual
DBH Information Notice 09-06
State of California Standard Agreement (MHP), Specialty Mental Health Services

Related policies

DBH Standard Practice Manual:

- ADS 0203: DUI/DEJ Certified Provider Closure Procedure
- BOP 3033: Assignment, Closure, Merger or Relocation of Clinics Policy
- BOP 3033-2: Assignment of DBH Contract Provider Procedure
- BOP 3033-3: Merger of DBH Contract Provider Procedure
- BOP 3033-4: Relocation of Clinic Procedure