



## Services for Children Placed Out-of-County, Foster and Probationary Youth Procedure

**Effective Date** 05/04/2009  
**Revised Date** 02/03/2021

  
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**Purpose** To provide the Department of Behavioral Health (DBH) a process for facilitating the provision of medically necessary Specialty Mental Health Services (SMHS) to foster youth and wards who are Medi-Cal beneficiaries and residing outside of their County of Jurisdiction (COJ) by authorizing, documenting, reimbursing and being reimbursed for services. Services provided to dependents and wards with the proper Foster Care Aide Code will be reimbursed in accordance with Title 9, CCR Section 1830.220(b)(4)(A) and under the provisions of Assembly Bill (AB) 1299.

**Authorization to Provide Out-of-County Services** In accordance with AB 1299, foster youth and wards who are placed out of their COJ will require authorization to transfer or start SMHS services. The presumptive transfer of Medi-Cal Benefits process will be facilitated by Child and Youth Collaborative Services (CYCS). The presumptive transfer process ensures timely conversion of the responsibility for the provision of services, or arrangement and payment for SMHS from the COJ to the county of residence. Senate bill 785 forms will not be applicable in a presumptive transfer.

**San Bernardino County Hosting Foster Children** CYCS will work closely with their out-of-county partner(s) to ensure proper processing of Presumptive Transfer referrals. The Presumptive Transfer process is initiated when a Notice of Presumptive Transfer (NOPT) of Medi-Cal is received. The following table outlines the roles and responsibilities for all parties involved in the presumptive transfer process for minors entering the DBH system of care:

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## Services for Children Placed Out-of-County, Foster and Probationary Youth Procedure, Continued

San Bernardino County Hosting Foster Children, continued

Roles	Responsibilities
CYCS	<ol style="list-style-type: none"> <li>1. Receives the notice of presumptive transfer (NOPT) and waiver requests/referrals through one of the following points of entry/contact:               <ul style="list-style-type: none"> <li>• Email at <a href="mailto:DBH-AB1299@dbh.sbcounty.gov">DBH-AB1299@dbh.sbcounty.gov</a></li> <li>• Telephone at (909) 387-5316</li> <li>• Fax at (909) 771-1127.</li> </ul> </li> <li>2. Processes the notice of presumptive transfer and waiver requests in order to provide appropriate and expedited assessments and recommendations for the referred child/youth.               <ul style="list-style-type: none"> <li>• NOPT: Provides a copy and any additional information to the identified clinical program.</li> <li>• Waivers from San Bernardino County Placing Agency: Provide a copy and any additional information to current Mental Health Plan (MHP) provider or facilitate access to an assessment.</li> <li>• Waivers from another County:                   <ol style="list-style-type: none"> <li>i. Review MyAvatar to identify any currently involved MHP providers</li> <li>ii. Send email acknowledgment to COJ Placing Agency and include current providers, if any.</li> </ol> </li> </ul> </li> </ol>
DBH Service Provider	<ol style="list-style-type: none"> <li>1. Obtain a completed <a href="#">Authorization of Release of Protected Health Information (PHI) (COM001)</a> in accordance with W &amp; I Code Section 5777.7 (b)(3)(B) to ensure that DBH may provide information regarding services to the child welfare agency in the COJ. NOTE: This authorization is not required to conduct the assessment and should not delay the provision of services.</li> <li>2. Conduct a clinical assessment, complete all departmental documentation, and proceed with planning and providing services as appropriate.</li> <li>3. Complete all documentation within the timeline consistent with DBH documentation requirements.</li> <li>4. Communicate with the placing agency in a consistent manner, which may include participating in Child and Family Team Meetings and providing copies of medical records as appropriate.</li> </ol>

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## Services for Children Placed Out-of-County, Foster and Probationary Youth Procedure, Continued

San Bernardino County Hosting Foster Children, continued

Roles	Responsibilities
Financial Interviewer	<ol style="list-style-type: none"> <li>1. A financial interviewer will verify Medi-Cal status once an NOPT has been received.</li> <li>2. Obtain and verify name and date of birth of the immediate family members residing in the household from the parent/guardian.</li> </ol> <p>The financial interviewer will follow departmental practices in accordance with CHD0308 Financial Interviewer Procedure and CHD0314 Monitoring and Authorizing of Out-of-County Medi-Cal Children Procedure as applicable.</p>

### Waiver Requests

The foster youth, the person or agency responsible for making mental health care decisions on behalf of the foster youth, the agency with responsibility for the care and placement of the foster youth, or the attorney for the foster child may request a waiver. Once a waiver request is made, the presumptive transfer is on hold pending the final decision by the placing agency or court. The placing agency must submit the waiver within seven (7) calendar days of the placing agency's determination of where the foster child will be placed out of the county.

The waiver request must include, at a minimum the following information:

- Name of the foster youth;
- Name and contact information of the requestor and their legal relationship to the foster youth; and
- A brief description of which exception(s) is/are believed to apply to waive the presumptive transfer.

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# Services for Children Placed Out-of-County, Foster and Probationary Youth Procedure, Continued

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## Presumptive Transfer Waiver

A processed waiver based on an exception to presumptive transfer shall be contingent upon the COJ demonstrating at least one the following conditions:

- Determination the transfer would disrupt the continuity of care or delay access to services provided to the foster child;
- Determination the transfer would interfere with family reunification efforts documented in the individual care plan;
- The foster child's placement in a county other than the COJ is expected to last less than six months;
- The foster child's residence is within 30 minutes of travel time to his or her established specialty mental health care provider in the county of original jurisdiction;
- An existing contract with a Specialty Mental Health Services (SMHS) provider, or
- The ability to enter a contract with an SMHS provider within 30 days of the waiver decision and the ability to deliver timely SMHS directly to dependents and wards.

The placing agency is responsible for communicating the decision to waive presumptive transfer to all relevant parties.

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## Related Policies and Procedures

DBH Standard Practice Manual:

- Financial Interviewer Procedure ([CHD0308](#))
  - Services for Children Placed Out-of-County Policy ([CHD0311](#))
  - Services for Children Placed Out-of-County, Adoption Assistance Program (AAP) and Kinship Guardianship Assistance Payment (KinGAP) Procedure ([CHD0311-2](#))
  - Monitoring and Authorizing of Out-of-County Medi-Cal Children Procedure ([CHD0314](#))
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## References

California Department of Mental Health, Information Notice No. 09-06, 17-032, 18-027  
Title 9, CCR Section 1830.220(b)(4)(A)  
Senate Bill 785  
Assembly Bill 1299  
WIC, Sections 14717.1, 5777.7, 11376, and 16125

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