



DBH Provider Directories Policy

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Policy In accordance with state and federal regulations and contractual requirements the Department of Behavioral Health (DBH) shall make provider directories available to clients, family members, and potential clients of Specialty Mental Health Services (SMHS) and/or Drug Medi-Cal Organized Delivery System (DMC-ODS) services.

Purpose The purpose of this policy is to ensure that:

- DBH, contracted providers, and Fee-For-Service (FFS) providers are aware provider directories are available, and may be offered to clients or provided upon request, and
- DBH, contract providers, and FFS providers understand what information must be reported to DBH to facilitate updating the applicable directory.

Provider Directory Availability DBH, contracted providers, and FFS providers shall make their provider directories available as follows:

- In electronic and paper form when a client first receives a SMHS or DMC-ODS service; and
- Made available on DBH's website in a machine-readable file and format as specified in federal law.

Provider Directory: Who is Included State and federal regulations require the following providers be reported in the provider directories:

- Provider organizations such as DBH contracted providers;
- Individual contracted practitioners who are directly contracted with DBH such as FFS providers or contracted physicians/psychiatrists;
- Each licensed, waived, registered or certified mental health or substance use disorder services provider employed by DBH, and
- Each licensed, waived, registered or certified mental health or substance use disorder services provider employed or contracted with a DBH contracted provider.

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Organizational Level - Required Elements of Provider Directory

In addition to which providers must be reported in the provider directories, federal law and state mandates require the following elements be included, at the organizational provider level:

- Name and group affiliation, if any;
 - Business address(es) of the physical location of the clinic(s);
 - Business telephone number(s);
 - Email address(es), as appropriate;
 - Website Uniform Resource Locator (URL), as appropriate;
 - Specialty, in terms of training, experience and specialization;
 - Services/modalities provided, including information about the populations served;
 - Whether the organizational provider is accepting new clients;
 - Cultural capabilities;
 - Linguistic capabilities, including languages offered, and
 - Whether the organizational provider's office/facility has accommodations for people with physical disabilities, including office, exam rooms and equipment.
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Rendering Provider Level – Required Elements of Provider Directory

Since every licensed, waived, registered or certified mental health or substance use disorder services provider needs to be reported, state and federal regulations require the following elements be included, at the rendering provider level:

- Type of practitioner (discipline);
- National Provider Identifier number;
- California professional license, waiver, registration or certification number and type of license (if not a license, needs to indicate waiver, registration or certification), and
- An indication whether the provider has completed cultural competence training.

Important Note: For pre-licensed psychologists with a DHCS issued Professional Licensing Waiver, the following information will be included: DHCS PLW, instead of a license number.

Non-Licensed Provider Level - Required Elements of Provider Directory

Since non-licensed providers also render services and because non-licensed providers are not mandated to be on the directory, the California Department of Health Care Services (DHCS) has advised counties to include the following footnote on the provider directory as it will notify clients or potential clients that services may be performed by a non-licensed provider:

“Services may be delivered by an individual provider, or a team of providers, who is working under the direction of a licensed practitioner operating within their scope of practice. Only licensed, waived, or registered mental health providers and licensed substance use disorder providers are listed on the Plan's provider directory.”

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Maintenance of the Provider Directory

DBH Quality Management Division (QM) shall ensure that information included in the provider directories is updated at least monthly, unless the information is made available in an online electronic searchable provider directory, which must be updated no later than thirty (30) calendar days after DBH receives updated provider information.

Written Informing Materials

The Beneficiary Handbook is a written informing material and is subject to language and format requirements specified in state and federal regulations, and shall meet the requirements noted in the DBH [Written Informing Materials Policy](#).

Related Policy or Procedure

DBH Standard Practice Manual:

- Written Informing Materials Policy ([QM6012](#))

Reference(s)

- CA Code of Regulations, Title 9, Chapter 11, Section 1810.410
 - Code of Federal Regulations, Title 42, Sections 438.10
 - Department of Health Care Services, MHSUDS Information Notice 18-020, Federal Provider Directory Requirements for Mental Health Plans (MHPs) and Drug Medi-Cal Organized Delivery System (DMC-ODS) Pilot Counties
 - California Department of Health Care Services Revenue Agreement for the Provision of Specialty Mental Health Services
 - California Department of Health Care Services Revenue Agreement for Substance Use Disorder Drug Medi-Cal Organized Delivery System
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