



REQUEST FOR SECOND OPINION

Potential and current DBH clients may request a second opinion from the Mental Health Plan (MHP) or Drug Medi-Cal Organized Delivery System (DMC-ODS), when the Department of Behavioral Health (DBH), or its network of providers determines you are not entitled to Specialty Mental Health Services (SMHS) or DMC-ODS services because you do not meet medical necessity.

When you request a second opinion, DBH will provide one by another licensed behavioral health professional (other than the professional who determined you were not eligible for services) within its network of care or outside the network, if requested. Either way, a request for second opinion will be at no cost to you.

Please fill out this form as best as you can in your own words. You may request assistance completing and submitting the form from any of the following:

- Staff/Provider at the clinic/program where you receive services
- DBH Access Unit at 1 (888) 743-1478 or (909) 386-8256
- DBH Patients' Rights Office at 1 (800) 440-2391.

To submit this request form, you can do one of the following:

- Directly give form to provider/receptionist at the clinic where you received services;
- Mail to: DBH Quality Management (QM)
303 E. Vanderbilt Way
San Bernardino, CA 92415-0026; or
- Email to: DBH-SecondOpinionRequest@dbh.sbcounty.gov, or
- Fax to DBH QM at (909) 890-0353

Note: You will NOT be subjected to discrimination or retaliation for seeking a second opinion.

Why did you originally come to DBH for help?

Which clinic(s) or provider(s) did you go to for services?

Please check who you would like to complete the second opinion:

Provider in the DBH network Provider outside the DBH network

Did you receive a Notice of Adverse Benefit Determination letter when denied services?
YES NO

Date of Request _____

Client Signature _____ Date _____

Client's Printed Name _____ Date _____

Date of Birth _____ Telephone No. (____) _____

Address _____

City _____ Zip _____

LANGUAGE ASSISTANCE TAGLINES

English

ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call 1 (888) 743-1478 (TTY: 7-1-1).

ATTENTION: Auxiliary aids and services, including but not limited to large print documents and alternative formats, are available to you free of charge upon request.
Call 1 (888) 743-1478 (TTY: 7-1-1).

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1 (888) 743-1478 (TTY: 7-1-1).

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1 (888) 743-1478 (TTY: 7-1-1).

Tagalog (Tagalog — Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1 (888) 743-1478 (TTY: 7-1-1).

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.
1 (888) 743-1478 (TTY: 7-1-1) 번으로 전화해 주십시오.

繁體中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1 (888) 743-1478 (TTY: 7-1-1)。

Հայերեն (Armenian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Չանգահարեք
1 (888) 743-1478 (TTY (հեռատիպ)՝ 7-1-1).

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1 (888) 743-1478 (телетайп: 7-1-1).

LANGUAGE ASSISTANCE TAGLINES

فارسی (Farsi)

شما برای رایگان بصورت زبانی تسهیلات کنید، می گفتگو فارسی زبان به اگره ج و ت بگیرید تماس (TTY: 7-1-1) 1 (888) 743-1478 با. باشد می فراهم

日本語 (Japanese)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

1 (888) 743-1478 (TTY: 7-1-1) まで、お電話にてご連絡ください。

Hmoob (Hmong) LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1 (888) 743-1478 (TTY: 7-1-1).

ਪੰਜਾਬੀ (Punjabi)

ਧਿਆਨ ਧਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬ ਬੋਲਦੇ ਹੋ, ਤੀਰੀ ਭਾਸ਼ਾ ਯ ਿੱਚ ਸਹਾਇਤਾ ਸੇ ਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ।
1 (888) 743-1478 (TTY: 7-1-1) ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic)

1 (888) 743-1478 برقم اتصل. بالمجان لك تتوافر اللغوية المساعدة خدمات فإن اللغة، اذكر تتحدث كنت إذا: ملحوظة (والبكم الصم هاتف رقم) 7-1-1)

हिंदी (Hindi) ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1 (888) 743-1478 (TTY: 7-1-1) पर कॉल करें।

ภาษาไทย (Thai)

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1 (888) 743-1478 (TTY: 7-1-1).

ខ្មែរ (Cambodian)

ប្រយ័ត្ន: អើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយមននកភាសា រោយមិនគិតថ្លៃ គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 1 (888) 743-1478 (TTY: 7-1-1)។

ພາສາລາວ (Lao)

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1 (888) 743-1478 (TTY: 7-1-1).