

**ALAMEDA COUNTY  
BEHAVIORAL HEALTH CARE SERVICES**

**CHILD AND YOUTH SERVICES  
DAY TREATMENT**

**PLACEMENT AUTHORIZATION  
AND  
SERVICES MANAGEMENT**

**July 23, 2003**

# **DAY TREATMENT PLACEMENT AUTHORIZATION AND SERVICES MANAGEMENT MANUAL**

## **A. Introduction**

ACBHCS and Children's Mental Health Services, in accordance with the CA State Department of Mental Health revised Day Treatment Regulations DMH 06-02, has implemented a formal Placement Authorization Procedure. This procedure requires that all clients placed in day treatment programs be authorized for placement by Alameda Co. BHCS.

Day Treatment services for children and youth are provided through a wide variety of programs determined by the type of client, age, referral process, and legal status of the client. Placement authorization, service input and Quality Assurance activity will vary depending upon the above factors. The following procedure details the Authorization Process needed for each client population and program provider.

## **B. How to Use this Manual**

Find your program type on the Day Treatment Authorization Grid. Locate the procedure number and refer to that procedure for step by step instructions regarding who completes the placement authorization form (and additional forms where indicated), where to send it for an Behavioral Health Care Services authorizing signature, and what to do next. The initial placement authorization will be returned to the program. Follow the grid and procedure to determine where the chart will go for continuing authorization.

## Day Treatment Authorization Grid

<b>Program Number</b>		<b>Type of Program</b>	<b>Completed by</b>	<b>Forms</b>	<b>Initial Authorization</b>	<b>Continuing Authorization</b>
<b>1</b>		AB3632 Day Treatment Programs with CSS Case Managers	CSS Case Manager	Placement Authorization	Chief of CSS	CQRT
<b>2</b>		AB3632 School Based Day Treatment Programs without CSS Case Managers	Provider	Placement Authorization	Chief of CSS	CQRT
<b>3</b>	<b>a</b>	AB3632 Residential RCL 12 <b>In-County</b>	CSS Case Manager	Placement Authorization	AB3632 Coordinator	CQRT
	<b>b</b>	AB3632 Residential RCL 12 <b>Out-of-County</b>	CSS Case Manager	Placement Authorization	AB3632 Coordinator	Quality Assurance Associate
<b>4</b>	<b>a</b>	AB3632 NPS/Residential RCL 13/14 <b>In-County</b>	CSS Case Manager	Placement Authorization	AB3632 Coordinator	CQRT
	<b>b</b>	AB3632 NPS/Residential RCL 13/14 <b>Out-of-County</b>	CSS Case Manager	Placement Authorization	AB3632 Coordinator	Quality Assurance Associate
<b>5</b>	<b>a</b>	DSS/ Residential RCL 12 w/Day Treatment w/BHCS Contracts <b>In-County</b>	Program or Project Destiny	Placement Authorization & Day Treatment Authorization Criteria	RCL 13/14 Coordinator	CQRT
	<b>b</b>	DSS/ Residential RCL 12 w/Day Treatment w/BHCS Contracts <b>Out-of-County</b>	Program or Project Destiny	Placement Authorization Day Treatment Authorization Criteria	RCL 13/14 Coordinator	Quality Assurance Associate
<b>6</b>	<b>a</b>	DSS/ Residential RCL 13/14 w/Day Treatment w/BHCS Contracts <b>In-County</b>	RCL 13/14 Coordinator	Placement Authorization	RCL 13/14 Coordinator	CQRT
	<b>b</b>	DSS/ Residential RCL 13/14 w/Day Treatment w/BHCS Contracts <b>Out-of-County</b>	RCL 13/14 Coordinator	Placement Authorization	RCL 13/14 Coordinator	Quality Assurance Associate

**Day Treatment Authorization Grid**

<b>Program Number</b>		<b>Type of Program</b>	<b>Completed by</b>	<b>Forms</b>	<b>Initial Authorization</b>	<b>Continuing Authorization</b>
<b>7</b>	<b>a</b>	Five Plus Days of Day Treatment ( <b>Preauthorization is required</b> ) Community Treatment Facility (STARLIGHT)	RCL 13/14 Coordinator	Placement Authorization & RCL 13/14 Survey for Certification of Child	RCL 13/14 Coordinator	Santa Clara Host County/CQRT
	<b>b</b>	Other programs providing 5+days of day treatment (Avalon House-FFYC, etc.)	RCL 13/14 Coordinator	Placement Authorization & RCL 13/14 Survey for Certification of Child	RCL 13/14 Coordinator	Contra County Mental Health for Avalon or as determined by BHCS
<b>8</b>		Project Destiny youth in Day Treatment other than RCL 12, 13 and 14	Project Destiny or Program	Placement Authorization Day Treatment Authorization Criteria	AB3632 Coordinator	CQRT
<b>9</b>		Therapeutic Pre-School	Program	Placement Authorization Criteria for 0-5 Early Childhood Mental Health	Early Childhood Mental Health Coordinator	CQRT
<b>10</b>		Thunder Road	Program	Placement Authorization Day Treatment Authorization Criteria	Chief of Outpatient Services	CQRT
<b>11</b>		West Oakland	Program	Placement Authorization Day Treatment Authorization Criteria	Chief of Outpatient Services	CQRT

## **1. AB3632 Day Treatment Contract Programs with Children's Specialized Services Case Managers**

### **Program**

- Informs Case Manager of client's admit to program

### **CSS Case Managers**

- Check AB3632 Status
- Complete the Placement Authorization (PA) Form and turn into Chief of Children's Specialized Services (CSS) for signature

### **Chief of CSS**

- Chief of CSS places signed PA Form into designated PA in-box

### **Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

### **Program:**

- Enters services into PSP
- Follows CQRT Protocol for on-going authorization

### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM

## **2. AB3632 School Based Day Treatment Program without Children Specialized Services Case Managers**

### **Program**

- Accepts student
- Checks Medi-Cal status
- Completes Placement Authorization Form
- Faxes completed PA form to Chief of CSS for signature

### **Chief of CSS**

- Verifies AB3632 Status
- Signs PA form and places into designated PA IN-BOX

### **Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

### **Program**

- Enters services into PSP
- Chart goes to CQRT for continued Authorization
- Every 90 days for Intensive Day Tx.
- Every 180 days for Rehabilitative Day Tx.

### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM

### **3. AB3632 NPS/Residential RCL 12**

#### **a. In County**

##### **Program**

- Informs Case Manager of client's admission to program

##### **CSS Case Managers**

- Check AB3632 Status
- Complete the Placement Authorization (PA) Form and turn into AB3632 Coordinator for signature

##### **AB3632 Coordinator**

- AB3632 Coordinator places signed PA Form into designated PA IN-BOX

##### **Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

##### **Program**

- Chart goes to CQRT for continued authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.



**3. AB3632 NPS/Residential RCL 12**  
**b. Out of County**

**Program**

- Informs Case Manager of client's admission to program

**CSS Case Managers**

- Complete the Placement Authorization (PA) Form and turn into AB3632 Coordinator for signature

**AB3632 Coordinator**

- AB3632 Coordinator places signed PA Form into designated PA IN-BOX

**Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

**Program**

- Submits Episode Opening and Registration Forms to AB3632 Coordinator
- Submits invoices and daily attendance records to AB3632 Coordinator on a monthly basis
  - Invoices are approved and forwarded to BHCS Finance for payment

### **3. AB3632 NPS/Residential RCL 12**

#### **b. Out of County**

- Daily Day Treatment Attendance Records are used to enter services into PSP by Children's Specialized Services (CSS) clerical staff
- Chart is forwarded to Quality Assurance Associate for continued Authorization (see Out-of-County Day Treatment Reauthorization Process)

#### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM

#### **4. AB3632 NPS/Residential RCL 13/14**

##### **a. In County**

##### **Program**

- Informs Case Manager of client's admission to program

##### **CSS Case Managers**

- Check AB3632 Status
- Complete the Placement Authorization (PA) Form and turn into AB3632 Coordinator for signature

##### **AB3632 Coordinator**

- AB3632 Coordinator places signed PA Form into designated PA in-box

##### **Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per In-House PA In-Box Procedure

##### **Program**

- Enters services into PSP
- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.

**4. AB3632 NPS/Residential RCL 13/14**  
**b. Out Of County**

**Program and CSS Case Manager**

- Arrange client's admission to program

**CSS Case Managers**

- Complete the Placement Authorization (PA) Form and turn into AB 3632 Coordinator for signature

**AB3632 Coordinator**

- AB3632 Coordinator places signed PA Form into designated PA in-box

**Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol.

#### **4. AB3632 NPS/Residential RCL 13/14**

##### **b. Out Of County**

##### **Program**

- Submits Episode Opening and Registration Forms to AB3632 Coordinator
- Submits invoices and daily attendance records to AB3632 Coordinator on a monthly basis
  - Invoices are approved and forwarded to BHCS Finance for payment
  - Daily Day Treatment Attendance Records are used to enter services into PSP by Children's Specialized Services (CSS) clerical staff
  - Chart is forwarded to Quality Assurance Associate for continued Authorization (see Out-of-County Day Treatment Reauthorization Process)

##### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM

**5. DSS/ Residential RCL 12 w/Day Treatment w/BHCS Contracts**  
**a. In-County (Including Project Destiny placements, Adoption Assistance Program\* placements)**

**Program**

- Coordinates admission to program with DSS
- Checks Medi-Cal status
- Completes the Placement Authorization (PA) Form and Day Treatment Authorization Criteria Form
- Turns both forms into RCL 13/14 Coordinator for signature

**RCL 13/14 Coordinator**

- RCL 13/14 Coordinator places signed PA Form into designated PA In-box

**Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per in-house Placement Authorization In Box Procedure

**Program**

- Enters services into PSP
- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.

**Forms to use:**

- PLACEMENT AUTHORIZATION FORM
- DAY TREATMENT AUTHORIZATION CRITERIA FORM

**5. DSS/ Residential RCL 12 w/Day Treatment w/BHCS Contracts**  
**b. Out-Of-County (Including Adoption Assistance Program\*  
placements, Excluding Project Destiny placements)**

**Program**

- Coordinates admission to program with DSS
- Check Medi-Cal status
- Complete the Placement Authorization (PA) Form and Day Treatment Authorization Criteria Form and turn into RCL 13/14 Coordinator for signature

**RCL 13/14 Coordinator**

- RCL 13/14 Coordinator places signed PA Form into designated PA in-box

**Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per in-house Placement Authorization In Box Procedure

**5. DSS/ Residential RCL 12 w/Day Treatment w/BHCS Contracts**  
**b. Out-Of-County (Excluding Project Destiny placements)**

**Program**

- Submits Episode Opening and Registration Forms to AB3632 Coordinator
- Submits invoices and daily attendance records to AB3632 Coordinator on a monthly basis
  - Invoices are approved and forwarded to BHCS Finance for payment
  - Daily Day Treatment Attendance Records are used to enter services into PSP by Children's Specialized Services (CSS) clerical staff
- Chart is forwarded to Quality Assurance Associate for continued authorization (see Out-of-County Day Treatment Reauthorization Process)

**Forms to use:**

- PLACEMENT AUTHORIZATION FORM
- DAY TREATMENT AUTHORIZATION CRITERIA FORM

**\*Adoption Assistance Program residential placements must be approved by BHCS PRIOR to placement**



**6. DSS Residential RCL 13/14 w/Day Treatment w/BHCS Contracts**  
**a. In County (Including Project Destiny placements and Adoption Assistance Program\* placements)**

**Program**

- Coordinates admission to program with DSS
- Check Medi-Cal status
- Notify RC 13/14 Coordinator of admit date

**RCL 13/14 Coordinator**

- Complete the Placement Authorization (PA) Form
- RCL 13/14 Coordinator places signed PA Form into designated PA in-box

**Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

**Program**

- Enters services into PSP
- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx

**6. DSS Residential RCL 13/14 w/Day Treatment w/BHCS Contracts**  
**b. Out of County (Excluding Project Destiny placements)**

**Program**

- Coordinates admission to program with DSS
- Checks Medi-Cal status

**RCL 13/14 Coordinator**

- Complete the Placement Authorization (PA) Form
- RCL 13/14 Coordinator places signed PA Form into designated PA in-box

**Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

**6. DSS Residential RCL 13/14 w/Day Treatment w/BHCS Contracts**  
**b. Out of County (Excluding Project Destiny placements)**

**Program**

- Submits Episode Opening and Registration Forms to AB3632 Coordinator
- Submits invoices and daily attendance records to AB3632 Coordinator on a monthly basis
  - Invoices are approved and forwarded to BHCS Finance for payment
  - Daily Day Treatment Attendance Records are used to enter services into PSP by Children's Specialized Services (CSS) clerical staff
- Chart is forwarded to Quality Assurance Associate for continued Authorization (see Out-of-County Day Treatment Reauthorization Process)

**Forms to use:**

- PLACEMENT AUTHORIZATION FORM

**\*Adoption Assistance Program residential placements must be approved by BHCS PRIOR to placement.**

## **7. Five Plus Days of Day Treatment (PRE-AUTHORIZATION IS REQUIRED)**

### **a. Community Treatment Facility (STARLIGHT)**

#### **Program**

- Prior to admission, the program must notify the RCL 13/14 Coordinator of the admission date.

#### **RCL 13/14 Coordinator**

- Completes the Placement Authorization (PA) Form and RCL 13/14 Survey for Certification of Child, prior to admission
- Faxes signed forms to Santa Clara County Liaison

#### **Clerical Staff**

- Faxes signed PA Form to Program
- Distributes copies per CSS protocol

#### **Program**

- Enters services into PSP
- Chart is forwarded to host county for ongoing Quality Review

**7. Five Plus Days of Day Treatment  
(PRE-AUTHORIZATION IS REQUIRED)**

**b. Other programs providing 5+ days of day treatment  
(Avalon House, FFYC)**

**Program**

- Prior to admission, the program must notify the RCL 13/14 Coordinator of the admission date.

**RCL 13/14 Coordinator**

- Completes the Placement Authorization (PA) Form prior to admission
- Faxes signed PA Form to program

**Clerical Staff**

- Distributes copies per CSS protocol

**Forms to use:**

- PLACEMENT AUTHORIZATION FORM

## **8. Project Destiny youth in Day Treatment other than RCL 12, 13 and 14, in-county Providers only**

### **Day Treatment Program :**

- Identify Project Destiny status
- Check Medi-cal Status
- Complete the Placement Authorization (PA) Form and the Day Treatment Authorization Criteria Form
- Fax both forms to AB3632 Coordinator

### **AB3632 Coordinator**

- AB3632 Coordinator places signed PA Form into designated PA in-box

### **Clerical Staff**

- Distributes copies per CSS protocol

### **Program**

- Enters services into PSP
- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.

### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM
- DAY TREATMENT AUTHORIZATION CRITERIA FORM

## **9. Therapeutic Pre-School**

### **Program**

- Assesses client for admission to program
- Check Medi-Cal status
- Complete the Placement Authorization (PA) Form and Criteria for 0-5 Early Childhood Mental Health and turn into Early Childhood Mental Health Coordinator for signature

### **Early Childhood Mental Health Coordinator**

- Signs PA Form and distributes to Program, PST and QA

### **Program**

- Enters services into PSP
- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.

### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM
- CRITERIA FOR 0-5 EARLY CHILDHOOD MENTAL HEALTH

## **10. Thunder Road**

### **Program**

- Assesses client for admission to program
- Check Medi-Cal status
- Complete the Placement Authorization (PA) Form and Day Treatment Authorization Criteria form and turn into Chief of Outpatient Services for signature

### **Chief of Outpatient Services**

- Signs PA Form and distributes to Program, PST and QA offices

### **Program**

- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.

### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM
- DAY TREATMENT AUTHORIZATION CRITERIA FORM



## **11. West Oakland**

### **Program**

- Assesses client for admission to program
- Check Medi-Cal status
- Complete the Placement Authorization (PA) Form and Day Treatment Authorization Criteria form and turn into Chief of Outpatient Services for signature

### **Chief of Outpatient Services**

- Signs PA Form and distributes to Program, PST and QA offices

### **Program**

- Chart goes to CQRT for continued Authorization
  - Every 90 days for Intensive Day Tx.
  - Every 180 days for Rehabilitative Day Tx.

### **Forms to use:**

- PLACEMENT AUTHORIZATION FORM
- DAY TREATMENT AUTHORIZATION CRITERIA FORM

## Out-of-County Day Treatment Reauthorization Procedure

In accordance with the Day Treatment Authorization Procedure, Out-of-County providers are required to obtain continued authorization through prospective Clinical Quality Review Team (CQRT) process. Prospective review occurs **prior to the delivery of requested health care services** to provide a mechanism to review medical necessity, service necessity, quality review and authorization. All Out of County CQRT Reauthorizations will be done by the Quality Assurance (QA) Office of Alameda County Behavioral Health Care Services (BHCS).

### **Continued Re-Authorization Process**

#### STEP 1:

As with current practices, the continued reauthorization review occurs every 180 days for Rehabilitative Day Treatment and 90 days for Intensive Day Treatment. The provider needs to complete “CQRT Authorization Form” (see forms section) through the Clinical Supervisor’s signature and submit it with a duplicate of the medical record covering the period of time from the Initial Placement Authorization date. For subsequent reauthorizations, providers need only submit the portions of the medical records covering period that is being reviewed along with the current “CQRT Authorization Form”.

**Out-of-County**  
**Day Treatment Reauthorization Procedure**

**STEP 2:**

CQRT reauthorization documents must be to the QA office ***no more than two weeks before the end of the authorization cycle (90 or 180 days) and before the 4th Thursday of the month*** (the CQRT meeting date) in which it is due. Delayed submissions may result in services being unauthorized.

**STEP 3:**

The “CQRT Authorization Form” will be faxed to the provider from the CQRT within 24 hours of the CQRT meeting date. The original CQRT Authorization Form will be maintained in the QA Office along with the duplicate medical record.

Submit the required documentation by mail to the Quality Assurance Office with the **name, phone and fax number of the provider’s QA contact.**

(Submission of materials must comply with Federal PHI Privacy practices.)

**Quality Assurance Office / CQRT**

**C/O Nina Berg**

**Alameda County Behavioral Health Care Services**

**2000 Embarcadero Cove, Suite 400**

**Oakland, CA 94112**

Additional information and/or forms may be acquired through the Quality Assurance Office at 510-567-8105.

## **Programs (by type)**

### **AB3632 Day Treatment Students**

#### **Contract Programs with CSS Case Managers**

- EBAC: Oakland, Fremont, Barnard White MS
- La Cheim: Richmond, Oakland, Pleasant Hill
- Seneca: San Leandro, Fremont
- Lincoln
- La Familia (Darwin Center)
- STARS Community School

## **Programs (by type)**

### **AB3632 Day Treatment Students**

#### **School Based Contract Programs w/o CSS Case Managers**

- Cleveland ES
- Sequoia ES
- Madison
- West Lake
- Montera
- Elmhurst MS
- Oakland HS
- Skyline HS
- Longwood ES
- Cesar Chavez MS
- Mt. Eden HS
- Mendenhall MS
- Dublin HS

## **Programs (by type)**

### **Pre-School Day Treatment Students**

- EBAC Therapeutic Nursery School
- Seneca Building Blocks

### **RCL 12, 13/14 Placements**

**Placing Agencies: Child and Family Services AB3632**

- County Contract Facilities:
  - Lincoln
  - Fred Finch
  - Seneca
  - STARS
  - STARLIGHT
  - Out of County contracted facilities

## CONTACTS

<b>Name, Title</b>	<b>Site</b>	<b>Phone</b>	<b>FAX</b>
<b>Ellen Muir, LCSW Chief of Children's Specialized Services</b>	<b>Children's Specialized Services</b>	(510) 268-7941	(510) 763-2647
<b>Elizabeth A. Uno, PhD AB3632 Coordinator</b>	<b>Children's Specialized Services</b>	(510) 268-7975	(510) 763-2647
<b>Lisa Quartiroli, LCSW RCL13/14 Coordinator</b>	<b>Children's Specialized Services</b>	(510) 268-7976	(510) 763-2647
<b>Margie Padilla, LCSW Early Childhood MH Coordinator</b>	<b>Early Childhood MH Services</b>	(510) 777-2103	(510) 793-3972
<b>Alfred Toles, LCSW Chief of Outpatient Services</b>	<b>Oakland Children's Services</b>	(510) 481-3771	(510) 481-3770
<b>Damon Bennett, Quality Assurance Associate</b>	<b>BHCS Embarcadero Cove</b>	(510) 567-8114	(510) 567-8130

**THIS PRESENTATION MADE POSSIBLE BY  
THE EFFORTS OF THE  
FOLLOWING PEOPLE**

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