

Client Services Information (CSI) Timeliness Definitions

Data Element	Working Definition
New Client	A brand new outpatient client to the MHP
	who has received no services in this county
	(likely no psp#)
New Returning	A client who has not received outpatient
	services in over 12 months.
Type of Service	Psychiatry- evaluation of the need for
	administration of and education about the
	risks and benefits associated with medication.
	Outpatient-Crisis services, Mental Health
	Services, and Fee for Service, Case
	management
	Outpatient services prior authorization-
	Intensive home based services, day treatment intensive,
	day rehabilitation, therapeutic behavioral services,
Urgent Services	therapeutic foster care A request for services is considered urgent
organi services	when the beneficiary's condition is such that
	they face and imminent and serious threat to
	their health, including but not limited to, the
	potential loss of life, limb, or other major
	bodily function, or the normal timeframe for
	the decision making process, would be
	detrimental to the beneficiary's life or health
	or could jeopardize the enrollee's ability to
	regain maximum function.
Date of First Contact to Request	Date of first contact to request Specialty
Services	Mental Health Services
	By a client or legal guardian.
	Medi-cal eligible is defined as someone who
	has medi-cal insurance or may have medi-cal



	insurance retroactively applied. Clients can
	not be in a lock out setting.
Assessment	Any intervention in which the purpose is to
	gather information necessary to complete a
	client's Medi-cal compliant assessment
	document. This includes assessing the client
	for medical necessity for specialty mental
	health services.
Referral Source	Entity, organization, individual, community,
	family member etc., submitting a request for
	assessment and treatment for a new client or
	new returning client.
Assessment appointment first offer	The first date offered to a new or prospective
date	client for an assessment appointment. This
	may occur by phone.
Assessment appointment second offer	The second date offered to a new or
date	prospective client for and assessment
	appointment. This may occur by phone.
Assessment Appointment third offer	The third date offered to a new or prospective
date	client for an assessment appointment. This
	may occur by phone.
Assessment Appointment Accepted	The first assessment date accepted by the
Date	beneficiary
Medical Necessity	Per Medi-cal, a service is medically necessary
	if it is needed to address a particular health
	condition and the following criteria are met:
	1) the diagnosis is included/covered, 2) the
	condition results in a functional impairment,
	3) the proposed intervention addresses the
	impairment, and 4) the condition would not
	be responsive to treatment by a physical
	health care provider. For Specialty Mental
	Health Services the beneficiary's

	impairments, as a result of their mental
	health condition, must fall in the moderate-
	severe range.
	A probability the child will not
	progress developmentally, as
	individually appropriate or children
	covered under EPSDT qualify if they
	have a mental disorder that can be
	corrected or ameliorated with mental
	health services.
Assessment Start Date	Date of the first assessment appointment.
	This indicates that the beneficiary completed
	the first assessment appointment.
	*this can be in person or on the phone
Assessment End Date	The date the Medi-cal compliant assessment
	document is completed and signed.
	Must include at least one in person visit to
	complete the mental status exam and
	diagnosis section of the assessment
Treatment Appointment First Offer	The first date an appointment is offered to a
Date	new or new returning client to provide crisis
	intervention, crisis stabilization, mental
	health services, targeted case management,
	intensive care coordination, and medication
	support services
	Treatment services do not include assessment
	or treatment planning interventions
Treatment Appointment Second Offer	The second date an appointment is offered to
	a new or new returning client to provide crisis
	intervention, crisis stabilization, mental
	health services, targeted case management,
	intensive care coordination, and medication
	support services

	Treatment services do not include assessment
	or treatment planning interventions
Treatment Appointment Third Offer	The third date an appointment is offered to a
	new or new returning client to provide crisis
	intervention, crisis stabilization, mental
	health services, targeted case management,
	intensive care coordination, and medication
	support services
	Treatment services do not include assessment
	or treatment planning interventions
Treatment Start date	The first date a provider delivers a crisis
	intervention, crisis stabilization, mental
	health services, targeted case management,
	intensive care coordination, and medication
	support services
	Treatment services do not include assessment
	or treatment planning interventions
	*can be the same day as the assessment start
	date, can be over the phone.
Closed Out Date	The close out date is when the assessment has
	been completed and the client has started
	treatment as defined above.
	Or when the beneficiary does not complete
	the assessment process and the case is closed.
Closure Reason	Reason/s the assessment or treatment
	process was discontinued
	If assessment end date and treatment start
	date are entered you will not need to
	complete this section.
Referred To	List of options to which the beneficiary was
	referred if found to not meet medical
	necessity criteria.