

Memo

Date: August 25, 2025

To: Alameda County Behavioral Health Department (ACBHD) Specialty Mental Health Services (SMHS) and Drug Medi-Cal Organized Delivery System (DMC-ODS) Medi-Cal ACCESS Staff and Providers

From: Karen Capece, Quality Management Program Director *Kay*

Subject: **Determining Urgent Services – Specialty Mental Health Services and Substance Use Disorder Services**

The purpose of this memorandum is to provide integrated and standardized guidance to ACCESS staff and providers on how to determine urgency for Specialty Mental Health Services (SMHS) and Substance Use Disorder (SUD) service requests. This supersedes [Determining Urgent Services - Alameda County Mental Health Plan Memo \(2022\)](#).

Background and Timeliness Standards

The Mental Health Plan (MHP)/SMHS and Drug Medi-Cal Organized Delivery System (DMC-ODS)/SUD services are subject to federal network adequacy certification requirements and standards, which include timely access to services. Timely access standards are below; additional details may be referenced in [Timely Access to Service Standards and Tracking Requirements Policy and Procedure](#).

	SMHS	TIMELY ACCESS STANDARD	SUD	TIMELY ACCESS STANDARD
SERVICE TYPES	Non-Psychiatry	10 business days	Outpatient	10 business days
	Psychiatry	15 business days	Opioid Treatment (OTP) Services	3 business days
PRIOR (I.E. COUNTY) AUTHORIZATION REQUIRED SERVICES	<ul style="list-style-type: none"> Day Treatment Intensive (DTI) Day Rehabilitation (DR) Intensive Home-Based Services (IHBS) Therapeutic Behavioral Services (TBS) 	10 business days	Residential Treatment Services	10 business days

	<ul style="list-style-type: none"> Therapeutic Foster Care (TFC) 			
SERVICE URGENCY	Urgent Request (no prior authorization required)	48 hours	Urgent Request (no prior authorization required)	48 hours
	Urgent Request (prior authorization required)	96 hours	Urgent Request (prior authorization required)	96 hours

Urgent Service Definition

[California Health and Safety Code \(HSC\) 1367.01](#) defines a service request as urgent “when the enrollee’s condition is such that the enrollee faces an imminent and serious threat to his or her 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 enrollee’s life or health or could jeopardize the enrollee’s ability to regain maximum function.”

Urgent Service Operational Questions

One (1) “yes” response to any of the below questions indicates a service request is urgent.

MHP/SMHS Urgent Service Operational Questions:

- 1) Is the member pregnant or suffering a severe medical condition and at risk for complications if mental health symptoms are not addressed within the next 48-96 hours (i.e. 2-4 days)?
- 2) Does the member appear to be at imminent risk of suicide, homicide, grave disability, significant property destruction, loss of housing, risk of incarceration in the next 48-96 hours?
- 3) Is the member indicating running out of antipsychotics, mood stabilizers, and/or benzodiazepines within the next 7 days?

Reference ATTACHMENT 1: Medication List (Antipsychotics, Mood Stabilizers, Benzodiazepines)

- 4) Is there indication the member needs urgent mental health treatment services for other reasons?

DMC-ODS/SUD Urgent Service Operational Questions:

- 1) Does the member require withdrawal management services?
- 2) Is the member pregnant?

- 3) Does the member appear to be at imminent risk of overdosing on any substance in the next few hours or days?
- 4) Is the member indicating that they are running out of any anti-craving medication such as naltrexone, buprenorphine, or methadone?
- 5) Is there indication that the member needs urgent substance use treatment services for other reasons?

Action Required

Please share this information within your organization and program team, especially with those who directly engage with or receive member service requests.

Questions

If you have questions, please contact QATA@acgov.org.

ATTACHMENT 1: Medication List (Antipsychotics, Mood Stabilizers, Benzodiazepines)

ANTIPSYCHOTICS

aripiprazole	Abilify Maintena
aripiprazole lauroxil	Aristada
aripiprazole	Abilify
chlorpromazine	Thorazine
clozapine	Clozaril
fluphenazine	Prolixin
fluphenazine decanoate	Prolixin Decanoate
haloperidol	Haloperidol
haloperidol decanoate	Haldol Decanoate
loxapine	Loxitane
lurasidone	Latuda
molindone	Moban
olanzapine	Zyprexa
paliperidone palmitate	Invega Hafyera
paliperidone palmitate	Invega Sustenna
paliperidone palmitate	Invega Trinza
perphenazine	Trilafon
pimozide	Orap
quetiapine	Seroquel
risperidone	Perseris
risperidone	Risperdal
risperidone	Risperdal Consta
thioridazine	Mellaril
thiothixene	Navane
trifluoperazine	Stelazine
ziprasidone	Geodon

BENZODIAZEPINES

alprazolam	Xanax
clonazepam	Klonopin
diazepam	Valium
flurazepam	Dalmane
lorazepam	Ativan
temazepam	Restoril
triazolam	Halcion