



COUNTY OF YOLO
HEALTH AND HUMAN SERVICES AGENCY

POLICIES AND PROCEDURES

SECTION 5, CHAPTER 1, POLICY 019

INTAKE REQUIREMENTS

POLICY NUMBER:	5-1-019
SYSTEM OF CARE:	MENTAL HEALTH
FINALIZED DATE:	02.07.2023
EFFECTIVE:	07.01.2020
SUPERSEDES # :	Supersedes Policy #'s: 5-1-011 Intake and Coordination of Care

- A. PURPOSE:** To establish a uniform intake policy to ensure required information is obtained from beneficiaries of Yolo County Health and Human Services Agency (HHSA) Specialty Mental Health Services (SMHS) and Network Providers consistent with county, state and federal requirements.
- B. RELATED DOCUMENTS:**
1. Beneficiary Intake Packet
 2. Authorization for Use or Disclosure of Protected Health Information (PHI) Form
- C. DEFINITIONS:**
1. **Administrator:** Yolo County HHSA BH is the administrator of the Mental Health Plan (MHP), hereby referred to as the “Administrator”.
 2. **Network Providers:** Any provider, group of providers, or entity that has a network provider agreement with the Administrator and receives Medicaid funding directly or indirectly to order, refer or render covered services as a result of the contract (Title 42 Code of Federal Regulations [42 CFR] § 438.2).
 3. **Specialty Mental Health Services (SMHS):** as defined by the MHP Contract between HHSA BH and the California Department of Health Care Services (DHCS), Exhibit A, Attachment 2, Scope of Services.

D. POLICY: It is the policy of Yolo County HHSA BH (“The Administrator”) and its Network Providers to ensure eligible beneficiaries seeking behavioral health services receive required information about SMHS and provide required information to facilitate receipt of these services.

E. PROCEDURE: The Administrator and Network Providers shall assure:

1. Each beneficiary shall be required to complete intake paperwork upon initial request for service and/or upon any significant changes that would cause a need for the beneficiary’s record to be updated. All required information must be provided in a manner and format that may be easily understood and is readily accessible by beneficiaries.

At minimum, but not limited to, the following shall be required:

- a. Intake paperwork. A beneficiary shall have the following documentation provided and collected as applicable, during the intake process. The intake packet shall include and not be limited to:
 - i. Acknowledgement of receipt
 - ii. Admission information including:
 - a. Demographics
 - b. Client Service Information (CSI)
 - iii. Financial eligibility
 - iv. Collection of health history
 - v. Beneficiary Problem Resolution Brochure
 - vi. Client Grievance and Appeal materials
 - vii. Consent for Treatment
 - viii. Beneficiary Handbook Medi-Cal Mental Health Service Guide
 - ix. Notice of Privacy Practices
 - x. Privacy Practices Acknowledgement
2. Triage and management for all referrals for service request, including referrals to the appropriate level of care, occur upon the completion of a comprehensive assessment.
 - a. Initiation and documentation of admission(s), including:
 - i. Opening appropriate admission/episode in the beneficiary’s chart or appropriate equivalent;
 - ii. Offering, scheduling, tracking and reporting comprehensive assessments in accordance with Yolo County HHSA BH contracts, State and Federal regulations;
 - iii. Referrals for any emergent and urgent requests to a licensed professional, if needed.
3. Provision of a beneficiary’s choice of the person providing services to the extent possible and appropriate. (CCR, tit. 9, §1830.225(a) and 42 C.F.R. § 438.3(l).)

F. REFERENCES:

1. MHP Contract, Ex. A, Att.11
2. MHP Contract, Ex. A, Att. 12
3. 42 C.F.R. § 438.10
4. 45 CFR § 164.520
5. DHCS Information Notice 19-020: Client Services Information (CSI) Assessment Record

Approved by:

Karleen Jakowski

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02/09/2023

Date