

RESIDENTIAL EVALUATION AND REFERRAL PROCESS FOR INDIVIDUALS IN CUSTODY

The following procedure is for individuals being evaluated by Correctional Health (CH) 30 days prior to release or 60 days prior to release for modifiable individuals.

1. PO/Sheriff's Office/Other CH staff will notify CH of an individual that is 30 days from release or modifiable within 60 days of release. Notification can be sent to an evaluator with the following information:
 - Name and SSN
 - Sheriff ID number / Jail #
 - Date of Release and Modifiable date if applicable
 - Specific location of the client: which jail, pod number, etc.
2. CH will verify and review clients Other Health Care Coverage and residency
3. For general population individuals, CH will contact RTX to:
 - Verify the client has not received 2 prior Residential Tx episodes in SMC in last 12 months
 - Verify OHC and/or MC eligibility
 - Confirm client status on the waitlist with RTX team
 - Communicate timeframe of release and possible admission date into care
4. For AB109 and Unified Re-entry individuals, CH will contact RTX-SC to:
 - Verify the client has not received 2 prior Residential Tx episodes in SMC in last 12 months
 - Verify OHC and/or MC eligibility
 - Confirm client status on the waitlist with RTX-SC team
 - Communicate timeframe of release and possible admission date into care
5. If the client has no Health Care Coverage and/or has San Mateo County Medi-Cal, CH will conduct ASAM Residential Evaluation
6. If eligible for Residential, CH will:
 - Send evaluation to:
 - General Population clients: GRP_HS_BHRS_RTXTEAM@smcgov.onmicrosoft.com
 - AB109 and Unified Re-entry clients send to both: Daniel Lanzarin and Desirae Miller
7. If not eligible for Residential, however the individual is in need of SUD Tx, CH will:
 - Refer the client directly to an Outpatient SUD Treatment Provider.
8. RTX team will:
 - Input client data into the CAWS and upload the client's evaluation in Sharepoint
 - RTX will open the AOD RTX episode in Avatar to document work via progress notes
 - Notify MIS / create Authorization
 - Notify CH of Authorization
9. Once Authorization is final, CH and Provider will: (with PO when applicable)

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- Check with RTX/RTX-SC to confirm client position on waitlist
- Work on admission to care from custody
- Communicate to RTX staff/PO once admitted and complete the ARF at admission

Other things to consider:

- For Individuals seeking Residential Tx at release or once released in the community: Individuals can call the BHRS Call Center at 1-800-686-0101 or show in person at 310 Harbor Boulevard Building E, Belmont, CA during drop in hours.
Hours: 9AM to 11AM and 1PM to 3PM Monday to Friday.
**Note: this does not guarantee Residential services and is NOT same day placement.*
- For Individuals seeking Outpatient Services at release or once released in the community- Please go to your nearest Outpatient Provider or call Access Call Center 1-800-686-0101
- For Individuals with Medi-Cal outside of San Mateo County, please refer back to that County of Residence or follow procedures for MC transfer when appropriate
- For Individuals with Private Insurance, please refer to their Health Care Provider or they can be referred to a local SUD program as a Private Pay client.

CONTACTS:

RTX Contact Information:

802-6400 (ask to speak to ODS OD) or
GRP_HS_BHRS_RTXTEAM@smcgov.onmicrosoft.com

RTX-SC Contact Information:

Daniel- 508-6737 Desirae -508-6756
dlanzarin@smcgov.org and dmiller@smcgov.org

Local Bay Area Call Centers for SUD Services

San Mateo County ACCESS MH & SUD Services:	1-800-686-0101
Santa Cruz County ACCESS MH & SUD Services:	1-800-952-2335
Monterey County ACCESS MH & SUD Services:	1-888-258-6029
Santa Clara County Access Gateway:	1-800-488-9919
Napa County Substance Use Centralized Access Line:	1-707-253-4063
San Francisco Department of Public Health, Behavioral Health Services:	1-888 246-3333
Alameda County Behavioral Health Care Services:	1-800-491-9099

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Guidelines to Working with Individuals with Out-of County Medi-Cal

DHCS and the DMC ODS have changed the way Medi-Cal beneficiaries can access DMC services. Historically, any Medi-Cal beneficiary, regardless of their home county/Medi-Cal residency, could request and access standard DMC services with any DMC provider, as long as the services were medically necessary.

DHCS now requires Medi-Cal beneficiaries access services through their “home” county where their Medi-Cal benefits are attached. This means individuals with Medi-Cal must either be referred back to their home county for service, or request to have their Medi-Cal transferred to San Mateo County, a process that can take 60-90 days. An exception is when San Mateo County contracts with an out of county DMC provider for a service needed within our network. In this case, the provider receives a direct client referral from the home county for services.

There is no hard and fast rule about what to do when an individual seeking services has Medi-Cal active in another county. When working these individuals, please consider the following to help inform your recommendation.

- 1) Where does the client wish to obtain services? In home county? In SMC County? Is s/he relocating to get a fresh start and get away for people, places, things?
- 2) If client has M/Cal in another county, does s/he have other important physical or mental health services/providers s/he obtains there? Would it be disruptive to the individual to change these providers?
- 3) Does the client have dependent family members in his/her home county who receive M/Cal benefits? If the client seeks to transfer benefits to SMC, this can cause a disruption in care to family members. This is an important consideration when a client is thinking of changing his/her Medi-Cal.
- 4) Transferring Medi-Cal from one county to another can take up to 60 days. While a DMC provider can serve the client and use a “delay reason code” to submit retroactive billing and get paid once the client is part of Medi-Cal in SMC, other providers, such as primary care and mental health may not serve the client while s/he is in a Medi-Cal pending status. This can limit access/cause delays to important and needed services.
- 5) Is treatment mandated by SMC Courts, Probation, or Child Welfare? Is the care medically necessary? Or Not?