



## BEHAVIORAL HEALTH SERVICES

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October 29, 2015

**TO:** Orange County Hospital Providers with an Inpatient Psychiatric Unit

**SUBJECT:** Psychiatric In-Patient Treatment

The Health Care Agency (HCA) has been working with the Hospital Association of Southern California (HASC) and others to find solutions to some of the challenges regarding psychiatric treatment for Orange County residents. This letter addresses some of the concerns that were identified in the August 13, 2015 HASC letter to the Orange County Board of Supervisors.

**Request to Authorize Hospitals to use Telepsychiatry.** HCA supports the use of telehealth. The law recognizes telehealth is an available tool for health care professionals where the patient is able to provide informed consent or for face-to-face mental health evaluation as defined in Welfare and Institutions Code section 5008(a). Any designated facility which intends to use telehealth should submit its draft policy and procedures to HCA Authority & Quality Improvement Services for review of compliance with Lanterman-Petris-Short (LPS) statutes.

**Remove policy prohibiting the treating ED physician from discontinuing 5150 hold in a LPS-designated hospital.** HCA has had no such policy. The professional person in charge of the facility or his or her designee may assess patients in LPS designated emergency departments for the appropriateness of involuntary detention. As a result of their assessment that the criteria of Welfare and Institutions Code section 5150 or 5585.50 are no longer met, these qualified professionals may discontinue an involuntary detention.

**Authorize Hospitals to establish direct patient transfer agreements.** Hospitals may establish direct transfer agreements. HCA encourages the use of these, especially between sister facilities within the same corporate healthcare systems.

**Authorize a County-contracted Hospital to directly admit patients to its Psychiatric Inpatient Unit from its ED.** HCA allows contracted hospitals to directly admit patients to its psychiatric unit from its ED. HCA, as the County of Orange Mental Health Plan (MHP), does not require a hospital to obtain prior payment authorization for an emergency admission, whether voluntary or involuntary, to a hospital providing emergency psychiatric inpatient hospital services. The County MHP does require the hospital providing emergency psychiatric inpatient hospital services to notify the County MHP point of contact (the County Crisis Stabilization Unit (CSU) known as ETS) within 10 calendar days of admission or within timelines specified within a contract if it is a contracted facility.

**Psychiatric In-Patient Treatment**

October 29, 2015

Page 2 of 2

The point of contact for persons under the age of 18 is the Children and Youth Behavioral Health (CYBH) Centralized Assessment Team (CAT). Historically, subsequent to this notification the CSU and CYBH CAT have confirmed patients for admission into County-contracted Medi-Cal or unfunded inpatient beds in order of referral. This was done to ensure equal access to all referring parties.

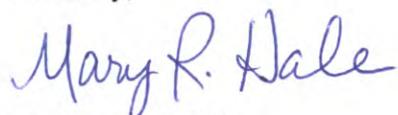
In response to the request of HASC, the CSU and CYBH CAT will discontinue the current confirmation process described above effective Monday, November 2, 2015. Thus, a County contracted or non-contracted hospital may directly admit a patient from their own or another ED to the inpatient psychiatric unit provided regulations are met. The CSU or CYBH CAT will assist with bed location services as a courtesy to the community when requested. Hospitals providing emergency psychiatric services in Orange County should assure that the patient meets criteria for medical necessity as described in California Code of Regulations (CCR), Title 9, section 1830.205, and that due to a mental disorder, the patient is a current danger to self or others or immediately unable to provide for, or utilize, food, shelter or clothing.

**Post 5150 Policies and Procedures on County Website.** Behavioral Health Services posts information regarding accessing services, resources, and programs on its website, <http://ochealthinfo.com/bhs>. We will be adding additional informative areas to this site to include BHS policies and procedures, information notices, and educational material on topics of interest to include who can become and how to become a designated provider or facility. Our goal is to have many of these available by January 1, 2016.

We are aware that there may be additional issues related to psychiatric inpatient services that need clarification and/or further discussion. HCA will continue to work with the hospitals and other community partners to identify solutions and more effective ways to provide appropriate mental health care to individuals in a psychiatric crisis.

Please contact Debbie Lent, Program Manager Adult and Older Adult Services, if you have any questions or need additional information. Debbie can be reached at 714-834-5035 or via email at [dlent@ochca.com](mailto:dlent@ochca.com).

Sincerely,



Mary R Hale, MS  
Deputy Agency Director

MRH: sg

cc: Mark Refowitz, Director, Health Care Agency  
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