



Health Care Agency Behavioral Health Services Policies and Procedures	Section Name:	Human Resources
	Sub Section:	Staff Transitions
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	SIGNATURE	DATE APPROVED
Deputy Director Behavioral Health Services	<u>Signature on File</u>	<u>2/14/2024</u>

SUBJECT: Individual Provider Transitions Affecting HCA BHS Beneficiaries/Clients

PURPOSE:

To establish a uniform policy of providing a termination, transition, and notification process for beneficiaries/clients of the Health Care Agency (HCA) Behavioral Health Services (BHS) who have providers who transfer, are transferred, terminated, or resign from BHS.

POLICY:

It is the policy of BHS that beneficiaries/clients be given adequate time to terminate with their provider and transition to a new provider.

SCOPE:

These policy applies to outpatient BHS beneficiaries/clients and HCA BHS staff who provide services to beneficiaries/clients within BHS.

REFERENCES:

[09.01.08 Continuity of Care for Medi-Cal beneficiaries receiving Specialty Mental Health Services within the County of Orange Mental Health Plan](#)

[09.01.07 Out-of-Network Services for Drug Medi-Cal Organized Delivery System \(DMC-ODS\)](#)

PROCEDURE:

- I. Whenever possible, BHS beneficiaries/clients shall be given adequate time to terminate with their provider, taking into consideration HCA BHS administrative necessity. will :
 - A. Providers shall make every effort to offer a face-to-face transition/ termination session.
 - 1. This may include an introduction and/or a joint session with the new provider.
 - B. If a termination or joint session with the new provider cannot be provided, BHS beneficiaries/clients shall receive written notice of their provider’s transition and

date of the transition.

- C. Family members of those beneficiaries/clients, who have signed a release of information for family members to be contacted, may also receive the Notice of Change in Provider Service.

II. Administrators

- A. Managers shall consider issues of beneficiaries/clients' transition when transferring providers to meet administrative necessity.

- 1. Whenever possible, managers shall schedule transfers to allow for a transition period.
- 2. Managers shall also seek ways to meet both administrative and beneficiary/client needs, such as allowing a brief period of splitting time between old and new positions.

- B. Occasionally, it is necessary for administrative reasons to adjust caseloads by re-assigning beneficiaries/clients from one clinician to another.

- 1. This occurs, even though both clinicians continue to provide services at the clinic. When this is the case, the procedures in this Policy and Procedure shall apply.

- C. The supervisor responsible for implementing the change in clinicians shall meet with the clinicians involved and review the needs and status of the beneficiaries/clients being considered for transfer.

- D. The supervisor shall take clinical factors into account along with administrative necessity in making the final determination of which beneficiaries/clients will be transferred to another provider.

III. Service Chiefs/Program Supervisors Responsibilities:

- A. When a provider leaves without completing the tasks outlined below the Service Chief/Program Supervisor, or his/her designee shall:

- 1. Assemble the provider's caseload roster.
- 2. Attempt to contact the beneficiary/client by phone.
 - a) If they reach the beneficiary/client notify the beneficiary/client of the provider leaving and the name of the new provider.
- 3. If the phone contact is not possible, the Service Chief shall assure that the beneficiary/client is notified via a letter which will be mailed to the individual.

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- a) The contact shall be noted in the beneficiary/client's Electronic Health Record (EHR).
- b) The letter/notice shall be written in the beneficiary/client's appropriate language, for each beneficiary/client who was not informed in person.

IV. Required Components of Notice/Letter Must Include:

- A. Notification to the beneficiary/client of the change in their current provider's availability and how to contact the new provider.
- B. Include the name of the new provider (if the provider is temporarily assigned, include this information in the letter).
- C. Indicate how the beneficiary/client may contact the newly assigned provider.
- D. Encourage the beneficiary/client to call for an appointment with the new provider.

V. Provider Responsibilities:

- A. Provide as much prior notification as is possible when leaving employment.
- B. Provide their Service Chief/supervisor with a caseload roster.
- C. Attempt to personally contact each beneficiary/client on their caseload to inform the beneficiary/client of the impending transition.
- D. After notification, attempt to have at least one face-to-face meeting with each beneficiary/client to process the termination.
- E. Attempt to introduce the beneficiary/client to the new provider, or at least notify the beneficiary/client of the name of the new provider.

VI. Support Staff Responsibilities:

- A. Support staff shall ensure the notice is mailed promptly and scanned into the beneficiary/client's EHR.