



CDSS

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DEPARTMENT OF SOCIAL SERVICES

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ARNOLD SCHWARZENEGGER
GOVERNOR

April 29, 2010

ALL COUNTY INFORMATION NOTICE NO. I-39-10

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY CWS PROGRAM MANAGERS
ALL CHIEF PROBATION OFFICERS
KARUK TRIBE

SUBJECT: THERAPEUTIC BEHAVIORAL SERVICES

REFERENCE: DEPARTMENT OF MENTAL HEALTH INFORMATION NOTICES
08-38 AND 09-10

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

This All County Information Notice provides important information regarding the availability of Therapeutic Behavioral Services (TBS), and strongly encourages counties to actively work with their local mental health partners to facilitate access to these services for children and youth in foster care who need them.

Background

In 1998 a class action lawsuit (Emily Q. v Bontá) brought against the State of California sought to have TBS included under Medi-Cal as an Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) supplemental service. In 2001 the court ruled in favor of the plaintiffs and issued a permanent injunction against the State in which TBS was recognized as a Medi-Cal reimbursable EPSDT supplemental specialty mental health service. The court further ordered the California Department of Mental Health (DMH) to take specific steps to increase access and utilization of TBS.

These steps were formalized in a Nine Point Plan that was approved by the court in November 2008. The Nine Point Plan describes what DMH will do to improve TBS in California. For example, the Plan significantly reduces administrative requirements related to the provision of TBS, clarifies definitions of eligible and “at risk” populations, and includes strategies to increase access and improve the quality of TBS, which is the Plan’s primary goal. The nine points of the Plan are listed below.

Summary of the Nine Point Plan

1. Eliminates many administrative requirements that have burdened counties in the past and have reduced the use of TBS;
2. Presents simple and direct language to clarify TBS eligibility requirements;
3. Establishes an accountability process and structure that DMH will use to monitor and improve TBS utilization in every county;
4. Describes a TBS best practice approach from assessment through service delivery and termination;
5. Proposes a multiagency coordination strategy to engage Social Services and Juvenile Justice agencies at the state and county levels in order to increase and improve TBS service access and delivery;
6. Establishes a statewide TBS training program;
7. Outlines technical assistance manuals covering both TBS practice and chart documentation;
8. Outlines an outreach strategy to increase awareness of TBS and expand its utilization statewide; and
9. Defines a process that will result in Court exit from the Emily Q matter.

TBS Definition

TBS is defined as a one-to-one behavioral mental health service available to children and youth with serious emotional challenges who are under age 21 and who are eligible for full scope Medi-Cal benefits without restrictions or limitations. TBS is never a stand-alone therapeutic intervention, but rather is used in conjunction with another specialty mental health service.

Emily Q Class Members

Class members are all current and future beneficiaries of the Medicaid program below age 21 in California who:

- Are placed in a facility with a Rate Classification Level 12 or above and/or a locked treatment facility for acute psychiatric inpatient hospital services for the treatment of mental health needs; or
- Have undergone at least one emergency psychiatric hospitalization related to their current presenting disability in the past 24 months; or
- Are being considered for placement in these facilities as a result of behaviors that may benefit from TBS interventions, whether or not such a facility is available.

TBS Eligibility

For children and youth identified as meeting the requirements for class membership, the need for TBS is determined based on the following criteria:

1. The child/youth is receiving other specialty mental health services; and

2. The clinical judgment of the mental health provider indicates that the short-term support of TBS is needed to:
 - a) prevent the child or youth from being in placed out of home care, or into a higher level of residential care; or
 - b) address a change in behavior or symptoms that is expected as a child or youth transitions to a home, foster home, or lower level of residential placement.

Information Resources

DMH Information Notices 08-38 and 09-10 provide additional detail and clarification regarding a variety of issues, such as eligibility criteria, Medi-Cal reimbursement, administrative requirements, and training opportunities. The California Department of Social Services (CDSS) has links to these letters available on its website at [CDSS Wraparound](#). In addition, there is a variety of information available on DMH's website at [DMH TBS Information](#). In addition, a Coordination of Care for TBS Best Practices Manual is forthcoming and expected to be available soon. County welfare departments may also be interested in reviewing DMH's data regarding utilization rates for TBS. Data is available statewide and by individual county, however, it is not specific to children in the child welfare system. TBS data is found at [DMH TBS Data](#).

DMH is highly committed to implementing the Nine Point Plan successfully, and providing counties with guidance and support that may lead to increased utilization of TBS. DMH is especially committed to improve TBS service delivery to the foster care population. In addition to receiving services through local county mental health departments, significant numbers of the Emily Q class members are served by Child Welfare, Probation, and the Juvenile Court. As a result, CDSS strongly encourages counties to work with local mental health departments to further align the interagency coordination of services. It is crucial that such coordination take place so that eligible children receive appropriate and timely services.

If you have any questions about this letter, please contact Cheryl Treadwell, Chief, Resources Development and Training Support Bureau at 916-651-6600.

Sincerely,

Original Document Signed By:

LINNÉ STOUT, Chief
Child Protection and Family Support Branch