The following procedure describes the necessary steps for a provider to become authorized to provide and claim for specialty mental health services (SMHS) as part of the Sonoma County Mental Health Plan (MHP). Authorized providers are given a unique staff number for use in Medi-Cal claiming. All providers are required to maintain the required credentials in order to provide the SMHS approved for their assigned credentialing category. These procedures apply to both Sonoma County Behavioral Health (SCBH) staff as well as providers from SCBH contractors upon enrollment in the County billing system.

The Medi-Cal Provider Credentialing Procedure must be followed when:

1. A new provider requests to provide specialty mental health services as part of the MHP;
2. A current provider requests a change in their provider status;
3. A current provider no longer meets the requirements for their credentialing category;
4. Upon request from the SCBH Credentialing Committee

Providers of SMHS fall into five credentialing categories and include:

I. LICENSED STAFF

  1. Physician (M.D., D.O.)
  2. Licensed Psychologist (Ph.D., Psy.D.)
  3. Licensed Clinical Social Worker (LCSW)
  4. Licensed Marriage and Family Therapist (LMFT)
  5. Licensed Professional Clinical Counselor (LPCC)
  6. Registered Nurse (RN)
  7. Licensed Vocational Nurse (LVN)
  8. Psychiatric Technician (PT)
  9. Other Medical Professionals (i.e., PA’s and PNP’s)

II. WAIVERED PROFESSIONALS

  10. Registered Psychologist
  11. Registered Psychological Assistant
  12. Out of State licensees

III. REGISTERED ASSOCIATES

  13. Associate Marriage and Family Therapist (AMFT)
  14. Associate Clinical Social Workers (ASW)
  15. Associate Professional Clinical Counselor (APCC)

IV. GRADUATE STUDENTS

  16. Master’s and Doctoral Degree candidates

V. UNLICENSED WORKERS

  17. Mental Health Rehabilitation Specialist (MHRS)
  18. Adjunct Mental Health Staff (those not meeting above categories)
Credentialing Procedure

1. Contracted providers must complete MHS 144-Staff Number Request Form and submit it (along with the required documents for their credentialing category) to the Claims Unit. **Required documents** are listed below, along with the approved mental health activities for each type of provider. SCBH staff will submit the required documents to Human Resources at the time of hire but may be asked to provide current or updated documentation by the Claims Unit, Workforce Education and Training (WET), or Quality Assurance when needed.

2. The Claims Unit will ensure that all providers have a valid National Provider Identifier (NPI) number and are registered with the National Plan and Provider Enumeration System (NPPES) under the correct taxonomy.

3. The Claims Unit will obtain copies of any relevant license/registration/certification and check the California BreEZe or other applicable website to confirm that the license/registration/certification is current.

4. The Staff Number Request form and supporting documentation (see below credentialing categories for requirements) will be reviewed and approved by WET. In the absence or unavailability of WET, Quality Assurance (QA) may provide backup coverage for credentialing as needed. Any provider credentialing requests that do not meet the minimum requirements will be asked to provide additional information and/or may be reviewed by the Credentialing Committee or the assigned Section Manager.

5. When approved, a staff number will be issued to provider along with an **effective date**. Services may be provided and claimed for by the provider using the assigned staff number beginning with the effective date. Any services provided prior to the effective date are not billable.

6. SCBH Staff will be set up in the Avatar electronic health record in accordance with their credentials/scope of practice following staff number assignment.

7. Providers must notify WET or QA **immediately** if their provider status changes in any way. This may include an expired license/registration, name change, or a change in educational or new licensure/registration status. Providers cannot provide and claim for SMHS if they do not meet the requirements of their credentialing category. Clinical documentation will be reviewed by QA to ensure compliance with all contractual and regulatory requirements and ensure that staff do not provide services for which they do not possess the required credentials. See Monitoring Provider Credentials.

### Required Documents and Approved Activities

#### LICENSED STAFF

1. **Physician**
   a. Copy of current Drug Enforcement Administration (DEA) license.
   b. Copy of current Physician license from the Medical Board of California
   c. Evidence of completing an accredited psychiatry residency program (i.e. certificate, letter OR Board certification in psychiatry)
   d. Evidence of registration with Controlled Substance Utilization Review and Evaluation System (CURES 2.0)
2. Psychologist
   a. Copy of current license from the California Board of Psychology

3. LCSW, LMFT and LPCC
   a. Copy of current license from the California Board of Behavioral Sciences
   b. LPCC’s must provide documentation from the Board of Behavioral Sciences confirming that they meet the necessary educational/experiential requirements prior to working with couples and families.

4. Registered Nurse
   a. Copy of license from the California Board of Registered Nursing
   b. Evidence of experience/training in psychiatric nursing

5. Licensed Vocational Nurse and Psychiatric Technician
   a. Copy of license from the California Board of Registered Nursing and Psychiatric Technicians
   b. Evidence of experience/training in psychiatric nursing

6. Other Medical Professionals
   Other medical professionals such as Physician Assistants (PA) and Nurse Practitioners (NP) may become enrolled as network providers per Delegated Service Agreement or Standardized Procedures and credentialing is reviewed by the Medical Director and WET.

Licensed Staff Approved Activities

- Can function as a “Head of Service” on agency application
- Can authorize services as directed by the County
- Can conduct comprehensive assessments, provide a diagnosis, and develop client plans without co-signature (except for RN, LVN and PT staff, as providing a mental health diagnosis is out of their scope of practice unless extended through a Standardized Procedure). **NOTE:** SCBH requires co-signature of a licensed manager/supervisor on all assessments and client plans.
- Can co-sign the work of other staff members within their scope of practice
- Can provide and claim for all Mental Health Service categories within their scope of practice (example, a psychiatrist and registered nurse can claim for Medication Support Services, however, psychologists, LCSWs, LMFTs and LPCCs cannot)
- Licensed staff cannot provide any services that require licensure if their license is expired.

**WAIVERED PROFESSIONALS**

1. Registered Psychologists/Psychological Assistants
   a. Department of Health Care Services (DHCS) Waiver (requested by SCBH WET)
   b. Copy of current registration with the California Board of Psychology as a Registered Psychologist or Psychological Assistant.
   c. Diploma or transcripts showing at least 48 semester/trimester or 72 quarter units of graduate coursework completed, not including thesis, internship or dissertation. **NOTE:** Doctoral students, currently enrolled in a doctoral program, are considered to be graduate students and do not require a waiver.
   d. Current resume
   e. Employment/internship start date (in the position requiring the waiver)

2. Out of State Licensees
   a. DHCS Waiver (requested by SCBH WET)
b. Letter from the appropriate California licensing board stating that the licensee has sufficient experience to gain admission to the licensing examination
c. Copy of license/registration with their respective state licensing board

**Waivered Professional Approved Activities**

Waivered professional may perform the following activities under the supervision of a licensed professional within their scope of practice:

- Can function as a LPHA staff for the time dictated by the County and the DHCS waiver
  - **Note:** Waivers are valid for five (5) years. The waiver period runs continuously, even if the individual has received a waiver from another county. There are no provisions that allow for an extension of the waiver.
- **Cannot** function as the Head of Service unless they meet qualifications dictated by the California Code of Regulations.
- Can authorize services as directed by the County
- Can conduct comprehensive assessments, provide a diagnosis, and develop client plans without co-signature while under waiver (except for RN, LVN and PT staff, as providing a mental health diagnosis is out of their scope of practice unless extended through a Standardized Procedure). **NOTE:** SCBH requires co-signature of a licensed manager/supervisor on all assessments and client plans.
- Can co-sign the work of other staff members within their scope of practice (other than graduate students performing therapy)
- Waivered Professional staff cannot co-sign for a graduate student’s therapy work. Therapy work must be co-signed by a licensed professional within their scope of practice.
- Can provide and claim for all Mental Health Services within their scope of practice.
- **Cannot** hold themselves out as independent practitioners and claim as an Enrolled Network Provider
- Waivered staff cannot provide any services that require licensure if their waiver is expired.

**REGISTERED ASSOCIATES**

1. **AMFT, ASW, APCC**
   a. Copy of current registration from the California Board of Behavioral Sciences

**Registered Associate Approved Activities**

Associate Marriage and Family Therapists, Associate Clinical Social Workers, and Associate Professional Clinical Counselors may perform the following activities under the supervision of a licensed professional within their scope of practice:

- Can function as a LPHA staff for the time dictated by the County and DHCS
- **Cannot** function as the Head of Service unless they meet qualifications dictated by the California Code of Regulations
- Can authorize services as directed by the County
- Can conduct comprehensive assessments, provide a diagnosis, and develop client plans without co-signature of a licensed supervisor. **NOTE:** SCBH requires co-signature of a licensed manager/supervisor on all assessments and client plans.
- Can co-sign the work of other staff members within their scope of practice (other than graduate students performing therapy)
- Can provide and claim for all Mental Health Services within their scope of practice
• Cannot hold themselves out as independent practitioners and claim as an Enrolled Network Provider
• Registered associates cannot provide any services that require licensure if their registration is expired.

GRADUATE STUDENTS

1. Master’s and Doctoral Degree Candidates
   a. Name of graduate school and type of degree program (e.g., Master’s, Doctorate, clinical psychology or school counseling)
   b. Year in the above program (e.g., first-year, second-year student in a two year program)
   c. Name, and license number of primary clinical supervisor (supervisor must meet all licensing board requirements for supervision of interns)
   d. Effective dates of employment (start date and end date, if known)
   e. The above information must be submitted annually until job class update/change or staff number termination.

Graduate Student Approved Activities

Graduate Students may perform the following activities under the supervision of a licensed professional within their scope of practice:

• Can conduct comprehensive assessments, provide a diagnosis, and develop client plans, but require a co-signature by a licensed supervisor (except for RN, LVN and PT staff, as providing a mental health diagnosis is out of their scope of practice unless extended through a Standardized Procedure). NOTE: SCBH requires co-signature of a licensed manager/supervisor on all assessments and client plans.
• Can write progress notes but require a co-signature by a licensed supervisor.
• Can provide and claim for any Mental Health Services within their scope of practice but require oversight and co-signature on all clinical documents by a licensed supervisor.

UNLICENSED WORKERS

1. Mental Health Rehabilitation Specialist
   a. Job title and description (if not a SCBH employee)
   b. Evidence of meeting one of the following requirements
      i. Has a Bachelor’s Degree and four years of experience in a mental health setting as a specialist in the fields of physical restoration, social adjustment, or vocational adjustment
         • Up to two years of graduate professional education may be substituted for the experience requirement on a year-for-year basis
         • Up to two years of post-associate degree clinical experience may be substituted for the required educational experience in addition to the requirement for four years’ experience in a mental health setting
      ii. Has a Master’s Degree and two years of full-time equivalent (FTE) experience in a mental health setting.
      iii. Has an Associate’s Degree and six years of FTE experience in a mental health setting. At least two of the six years must be post-degree experience.

MHRS Approved Activities

• Can function as a “Head of Service” on an agency application
• Can co-sign the work of other staff members as allowed by the County within their scope of practice (e.g., not therapy and assessment).
- Can develop client plans. **NOTE:** SCBH requires co-signature of a licensed manager/supervisor on all client plans.
- Can provide and claim for the following Mental Health Services: Targeted Case Management, Plan Development, Individual/Group Rehabilitation, Crisis Intervention, and Therapeutic Behavioral Services, within their scope of practice (refer to contract/job description).

2. **Adjunct Mental Health Staff**

   The County has the prerogative and program flexibility to integrate and define other staff who can provide direct or supportive specialty mental health services as determined by the County administration and approved by DHCS. It should be noted that it is not a requirement that staff are paid for services provided and claimed to Medi-Cal (i.e., staff may include unpaid undergraduate students/interns, volunteers or advocates) as long these unpaid persons meet Medi-Cal rules and regulations regarding claiming and scope of practice. Providers are considered for this job category on a case-by-case basis and are reviewed by WET and the assigned SCBH Section Manager. Approval is determined by the SCBH Division Director.

   For consideration in this category, please provide the following:
   a. Job title and description
   b. List of SMHS that the candidate will provide
   c. Current resume
   d. Copy of diploma/degree, training certificates, and/or transcripts showing relevant coursework completed.
   e. Evidence of a Plan of Supervision to provide training so that the candidate meets or will meet all job and specialty mental health service provision requirements, including documentation and billing standards for these services. This may be in the form of a letter from the Head of Service attesting that the candidate meets or will meet all requirements and will be supervised by a licensed physician, licensed psychologist, licensed clinical social worker, licensed marriage and family therapist, or registered nurse with a master’s degree in a mental health field.

   **Monitoring Provider Credentials**
   **(County Staff and Independent Contractors)**

1. WET acts as the credentialing manager for SCBH program staff and independent contractors.

2. WET receives a bi-weekly expiring credentials list from DHS-HR and forwards the list, sorted by team, to Program Managers, Section Managers, and Quality Management. Additionally, WET performs bi-weekly checks of the Independent Contractor list and Waivered Staff list, notifying Program/Section Managers of any contract/waivered staff due for renewal of credentials. WET directs Program Managers to ensure that staff renew their credentials (prior to expiration) and send proof of renewal to WET and DHS-HR. Acceptable proof of renewal includes the following:
   a. Photocopy of license, registration, or certification.
   b. Fax copy of license, registration, or certification.
   c. Scan copy of license, registration, or certification.
   d. Screenshot of renewed status posted to online credentialing site (i.e. BreEZε, CCAPP, CADTP).

3. WET monitors/tracks that documents are received by both WET and DHS-HR.

4. WET works directly with staff and Program Managers to resolve delays/obstacles to renewal process. Evidence of completed application and fees paid may be submitted to show that renewal is being processed but this does not establish that renewal requirements are met. Staff should ultimately submit
proof of valid licensure/registration upon receipt and should plan ahead to allow for processing times of license/registration boards. WET retains documentation of attempts to resolve delays.

5. If it is determined that any staff person is unlikely to renew in time to meet minimum requirements for their position, then prior to expiration of required credentials, WET will schedule a meeting with (at minimum) the Program Manager, QA, DHS-HR, and DHS-Compliance. Additional attendees may include the staff person, BH Administration, Section Manager, or others needed to make a decision regarding the staff person’s employment status.

6. The above will hold a meeting to discuss the staff’s anticipated lapse in required credentials and plan next steps, which may include demotion to a job class that does not require the credentials that the staff failed to maintain, or termination, as approved by the BH Division Director.

7. After plan is made by the above review team, WET will coordinate with DHS-HR to schedule a meeting with the staff person, union representatives (at the discretion of staff), Program Manager, QA, DHS-HR, and DHS-Compliance to review decision and plan for the staff person.