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<tbody>
<tr>
<td>Cover Page</td>
<td>Updated Information</td>
<td>• Added reminder that DHCS is the DMC Authority (second cover page)</td>
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| Section A: Organized Delivery System | Updated Information | • Updated hyperlink to Intergovernmental Agreement (A.2)  
• Replaced Perinatal Services Network Guidelines (PSNG) with Perinatal Practice Guidelines (PPG); updated hyperlink for FY18/19 document (A.2, A.19)  
• Updated General Practice Guidelines for Care Coordination per DHCS guidance (A.6-27)  
• Updated hyperlink for drug testing guidelines (A.9)  
• Updated language for Physician Consultation to include using County-billable cost center to claim the cost on monthly invoices (A.12)  
• Updated hyperlink to FY18/19 Perinatal Practice Guidelines (A.19)  
• Updated language from Dual Diagnosis to Co-occurring (A.18)  
• Updated hyperlink for SAMHSA Tip 51 (A.19)  
• Updated hyperlink for SAMHSA Tip 56 (A.20) |
| Section B: Continuum of Care & Services | Updated Information | • Added language about profession staff/scope of practice (B.4)  
• Added requirements for mother/child groups in perinatal programs (B.5)  
• Updated group counseling to include standards for groups facilitated in the field and standards for mixing groups (B.5)  
• Updated Collateral Services to include no requirement for the client to be present (B.5)  
• Updated Recovery Services to include standards for accepting clients from other providers requirements for accessing services after completing treatment (B.6)  
• Updated verbiage regarding Recovery Residences, the community partner contracted to provide oversight, and funding guidelines (B.7) |
| Section C: Prevention Services & Specialty Programs | Updated Information | • Added language to Justice-Involved SUD Services to include County will not pay for report writing (C.3)  
• Added language about Justice Override clients (C.4) |
| Section D: Service Delivery | Updated Information | • Updated language for Target Populations (D.3-D.4)  
• Updated initial authorization to include requirement to submit to Optum within 24 hours of client’s admission (D.5)  
• Added DDN to list of required documents for continuing and extension authorization request (D.6-7)  
• Added Relapse Plan standard for residential facilities (D.7-8) |
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| Section D: Service Delivery (cont.) | Updated Information (cont.) | • Updated bed day hold standard to include preapproval requirement for holds beyond 7 days and added weekend pass standards (D.8)  
• Updated language for Beneficiary Handbook requirement to specifically reflect Acknowledgement of DMC-ODS Beneficiary Handbook and BHS Provider Directory form on the list of required intake/admission documents (D.10)  
• Added requirement for client to be provided with name/contact information of primary counselor and case manager (D.14)  
• Added Self-Help/Program Structure standards (D.16-17)  
• Added reference to Quick Guide-Residential Service with hyperlink (D.16)  
• Added treatment continuation standards (D.17)  
• Added standard for Recovery Services (D.20-24)  
• Added Transition of Care process (D.26-28)  
• Updated documentation standards to include CA Senate Bill 241 requirements for access to client records (D.29)  
• Updated language for Residential Timeline Progress Notes, including a daily note (D.33-34)  
• Added DHCS definition that a week is from Sunday to Saturday (D.34) |
| Section D: Service Delivery (cont.) | Removed | • Removed diagnosis requirement for Discharge Summary (D.18) |
| Section E: SUD Program Requirements | Updated Information | • Added language for program exclusions in Admission Policies, Procedures, Protocols section (E.1)  
• Added language about AOD Certification requirements including submission 120 days prior to expiration date (E.2)  
• Updated DHCS Info Notice for IMS (E.4)  
• Added language for Senate Bill 992 prohibiting denying admission solely on an individual having a valid prescription for narcotic replacement or MAT (E.4)  
• Added language for TB Control (E.11)  
• Added DHCS requirements for temporary site location of DMC provider during emergency (E.11)  
• Updated language for Charitable Choice regulations (E.12-13)  
• Updated phone number for PWD County Access Coordinator (E.14)  
• Updated language for Criminal Background Check Requirements to identify a COSDBHS standard (E.19)  
• Added clarification from DHCS for RN’s (E.20)  
• Added language for determining the salary cap of medical director (E.22-23) |
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| Section E: SUD Program Requirements (cont.) | Updated Information (cont.)     | • Updated link for Federal System for Award Management (SAM) (E.23)  
• Added LVN as option for on-duty overnight staff (E.26)  
• Changed WM-3.2 IMS standard from required to recommended (E.26)  
• Changed WM-3.2 staffing standard for nursing staff from required to recommended (E.26)  
• Added standard for P&P’s when in-house 24/7 nursing staff is not used (E.26)                                                                 |
| Section F: Provider Contracting Section F: Provider Contracting (cont.) | Updated Information               | • Updated Restrictions on Salaries to reflect Level II with new hyperlink (F.5)  
• Updated DPC 203 Transfer of Disposition of Minor Equipment Form(s) and Procedures (F.11-17)                                                                                                       |
| Section G: Quality Management   | Updated Information               | • Added QAR timeline from SUDURM instructions for QAR Forms (G.7-8)  
• Updated hyperlink for CHHS (G.10)  
• Updated SIR Line with new number (G.15-16)  
• Added language requiring self-addressed envelopes to be stamped; available upon request from advocacy organizations (G.19)  
• Added language for records requests by advocacy organizations (G.20)  
• Added Grievance Exemption definition and standards (G.20)  
• Updated grievance and appeal language with 14-day extension circumstances (G.22, G.23, G.24)  
• Updated Grievance/Appeal language to specify receipt of notification must be postmarked within five calendar days (G.23-table)  
• Updated requirements for NOABD logs (G.27)                                                                 |
| Section H: Administrative Oversight | Updated Information               | • Updated link for new CalOMS Data Dictionary-2018 (H.1)  
• Removed info about BHS CalOMS webinar (H.1)  
• Added language for creating encounter in SanWITS; included link the Provider Services Guide (H.2)  
• Updated contact information for County DATAR analyst (H.2)  
• Added hyperlink for SanWITS User’s Guide (H.3)  
• Removed separate Optum contact number for SanWITS after hours/weekend help desk support; all support calls can now be made using the same number (H.3) |
| Section I: Resources            | Updated Information               | • Replaced Perinatal Services Network Guidelines (PSNG) with Perinatal Practice Guidelines (PPG); updated hyperlink for FY18/19 document (I.2)  
• Updated SIR Line with new number (I.2)                                                                                                           |
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<td>Section I: Resources</td>
<td>Updated Information (cont.)</td>
<td>• Removed separate Optum contact number for SanWITS after hours/weekend help desk support; all support calls can now be made using the same number (I.2)</td>
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<tr>
<td>Appendices</td>
<td>Updated Information</td>
<td>• Updated “System of Care Glossary of Common Terms” with clarifying information on Collateral Services and added definition of Justice Override (Appendix A.2)</td>
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<td></td>
<td>• Added “DMC-ODS Staff Services Categories” (Appendix B.2)</td>
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<td>• Added “Recovery Residences – Supplemental Funding Guidelines” (Appendix B.3)</td>
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<td>• Added “Recovery Services Transition Flowchart” (Appendix B.3)</td>
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<td>• Updated “SUD Residential Clinical Documentation and Authorization Request Timelines Quick Guide” (Appendix D.1)</td>
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<td>• Updated PWD Referral List (E.5)</td>
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<td>• Updated “Serious Incident Report of Findings (SIROF)” (Appendix G.2)</td>
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<td>Appendices (cont.)</td>
<td>Removed</td>
<td>• Removed definition for Complaint from “System of Care Glossary of Terms” (Appendix A.2)</td>
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<tr>
<td>All Sections</td>
<td>Updated Information</td>
<td>• Updated all hyperlinks for Optum, SUDURM, and BHS Billing Manual</td>
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<td>Removed</td>
<td>• All references and language for “complaints”</td>
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