



Specialty Mental Health Services (SMHS) Medi-Cal Decision-Making Tool

Purpose: This document is being provided to assist you in determining whether you would like to become a SMHS Medi-Cal organizational provider. Below are key areas needed to become a SMHS Medi-Cal organizational provider. The key areas are listed in order of recommended starting points based on completion time.

If you decide to move forward with becoming a SMHS Medi-Cal provider, a Medi-Cal Onboarding Tool will be made available, providing additional details and mechanisms to assist with status tracking and monitoring.

ACBHD support, resources, and technical assistance will also be made available.

Key Requirements for Becoming a SMHS Medi-Cal Organizational Provider	
Medi-Cal Site Certification Requirement	
<ul style="list-style-type: none"> • Obtain a Medi-Cal Site Certification through ACBHD • Reference: Site Certification Checklist: Community Based Organizations (CBOs) • Average completion time: 5 months 	
<input type="checkbox"/>	Ensure that your agency and providers who will be billing Medi-Cal have a National Provider Identifier (NPI) ¹ Note: If you have a SmartCare Program ID (formerly known as a Reporting Unit), your agency likely already has an NPI #.
<input type="checkbox"/>	Obtain or verify that you have a Fire Clearance ^{2,3} obtained within the last 12 months.
<input type="checkbox"/>	Submit a Program Change Request Form (PCR) to ACBHD Contracts Unit to initiate the process to become a SMHS Medi-Cal organizational provider Note: Requires valid NPI and Fire Clearance. A prefilled PCR template will be available.
<input type="checkbox"/>	Create and/or revise required Policies and Procedures (P&Ps) ⁴ and make them available to ACBHD Quality Assurance (QA) prior to the ACBHD onsite review Note: ACBHD P&Ps may be leveraged to create agency-specific P&Ps.
Privacy and Security Requirements ⁵	
<ul style="list-style-type: none"> • Ensure you have appropriate technical and physical safeguards in place to protect the privacy and security of clinical records. • Average completion time: Varies 	
<input type="checkbox"/>	Determine whether your agency will utilize the ACBHD clinical EHR (Clinician’s Gateway) or your own. Privacy and technical security safeguards ⁷ are accounted for by the ACBHD Clinical EHR. If using your own Clinical EHR, your agency must account for privacy and technical security safeguards.
<input type="checkbox"/>	Ensure facility and workstation physical safeguards ⁶ for Protected Health Information (PHI) hardcopies and electronic (ePHI) are met (e.g. PHI/ePHI not in publicly accessible space, use of double locks such as a cabinet and a door).
<input type="checkbox"/>	Ensure safeguards ⁶ for transportable electronic media (e.g. cell phones, tablets, memory cards) are met. Note: Alameda County Health (ACH) policies and templates may be leveraged
<input type="checkbox"/>	Ensure process for PHI/ePHI retention, storage, and destruction ⁶

Program and Staff Requirements^{8,9,10}
<ul style="list-style-type: none"> • Ensure you meet all program and staff licensure and training requirements. • Average completion time: 3 months
<input type="checkbox"/> Identify type(s) of Outpatient SMHS (e.g. Mental Health Services, such as therapy and collateral; Case Management/ Brokerage; Crisis Intervention; Peer Support Services ¹¹) your agency will deliver).
<input type="checkbox"/> Ensure your agency has identified a Head of Service (HOS) ⁹ with appropriate licensure (i.e. Licensed Mental Health Professional, such as LCSW, LMFT).
<input type="checkbox"/> Dedicate or designate Quality Assurance (QA) staff time to ensure Medi-Cal requirements are supported on an ongoing basis and liaise with ACBHD QA.
<input type="checkbox"/> Develop a process to credential and re-credential staff (i.e. verification of identity, license (if applicable), and exclusion status) ¹⁰ , and ensure all staff are appropriately credentialed.
<input type="checkbox"/> Ensure all agency staff have completed Training Requirements (e.g. Documentation ¹²).
Medi-Cal Quality Assessment, Performance Improvement, and Data Collection
<ul style="list-style-type: none"> • Ensure you have a process to track compliance with Medi-Cal requirements, including data collection and reporting. • Average initial set up completion time: 3 months
<input type="checkbox"/> Understand and complete ongoing data collection and reporting (e.g. network adequacy and timely access).
<input type="checkbox"/> Actively participate in ongoing Quality Assessment and Performance Improvement (QAPI) (e.g. State and ACBHD chart audits, beneficiary surveys, quality improvement projects, evidence based clinical practices).
<input type="checkbox"/> Understand and ensure Member Rights and Protections (i.e. informing materials, grievances, and appeals) are adhered to.

¹ See <https://www.acbhcs.org/providers/npi/npi.htm> for NPI information.

² For sites that have a room/office number listed on the fire clearance, include the room/office number in the primary practice site address section in NPPES.

³ See [Fire Clearance Requirements for Medi-Cal Site Certification](#)

⁴ Step 2 in [Site Certification Checklist: Community Based Organizations \(CBOs\)](#).

⁵ [45 CFR Part 164 - Security and Privacy](#).

⁶ [45 CFR § 164.310 - Security Physical Safeguards](#)

⁷ [45 CFR § 164.312 - Security Technical Safeguards](#)

⁸ Basic requirements of outpatient mental health services, in accordance with [9 CCR § 680](#)

⁹ HOS is a licensed mental health professional or other appropriate individual as described in 9 CCR § 622 through 630.

¹⁰ [1603-3-2-Credentialing-&-Re-Credentialing-Verification-P&P.pdf](#)

¹¹ [BHIN 22-026 Peer Support Services](#)

¹² Alameda County has adopted [Documentation Trainings - California Mental Health Services Authority](#)