AB1299 STRTP ADMISSION REPORT

Completed for Out-of-County Foster Youth Under Presumptive Transfer (Not Applicable for Youth Under Presumptive Transfer Waiver Who Are Managed Outside of the BHS Contract)

Client Initials					
Date of Admission					
County of Original Jurisdiction (Placing County)					
STRTP enter County of Original Jurisdiction in CCBH 3 rd Party Coverage					
(Refer to 3 rd Party Billing Instructions)					
Please indicate if Emergency Placement and complete items 1 through 6:					
IPC - Emergency Placement? (Placed in STRTP prior to Inter-Agency Placement Committee (IPC) screening)					
	 If placed prior to IPC screening, a licensed or waivered mental health professional through the STRTP shall make a written determination that the child requires the level of services and supervision provided at the STRTP to 				
meet their behavioral health and mental health service needs within 72 hours (DHCS Interim STRTP Regulations					
Version 2, Section 8 (f))					
	STRTP to coordinate with placing county for IPC review within 30 days of placement				
QI - Emergency Placement? (Placed in STRTP prior to completion of Qualified Individual Assessment)					
	 If placed prior to QI Assessment completion, placing agency will need to provide the QI Assessment reflecting 				
	STRTP level of care recommendation within 30 days of emergency placement				
1.	NOPT	o Placing county provided a copy of the Notice of Presumptive Transfer form (NOPT) to confirm			
		need for STRTP level of care prior to admission; and			
		 STRTP has reviewed and forwarded a copy of the NOPT to the Optum San Diego mental 			
		health point of contact per the CDSS Presumptive Transfer Website:		П	
		(Gwen Jajou : Phone – 800-798-2254 option 3 and 3, Fax – 866-220-4495)			
		https://www.cdss.ca.gov/inforesources/foster-care/presumptive-transfer/county-points-of-			
		<u>contact</u> ; and			
		Copy of NOPT is attached to this report			
2.	IPC	Placing county provided written documentation that IPC recommended/approved Group			
		Home/STRTP level of care (may be part of NOPT)			
3.	QI O Placing county provided a completed Qualified Individual Assessment Report prior to				
	placement?				
		o If QI Assessment not provided due to emergency placement, STRTP to resubmit AB1299			
	STRTP Admission Report by the 15 th of the following month				
		If you Ol Assessment Demont resource and of CTDTD Level of Comp?			
4	100	o If yes, QI Assessment Report recommended STRTP Level of Care?	Ш	Ш	
4.	LOC	Placing county provided written documentation that lower levels of intervention were insufficient and Group Home/STRTP level of care is warranted (may be part of NOPT or QI Assessment)			
_	SMHS	Placing county provided written documentation that client meets Medical Necessity, and the			
э.	SIVIDS	level of Specialty Mental Health Services offered through the San Diego County contract is			
		necessary to address client's needs (may be part of NOPT or QI Assessment)		Ш	
6.	CFT	STRTP has communicated to placing county expectation that placing county be an active			
υ.		participant in all CFT Meetings; and			
		 STRTP obtained written confirmation from placing county to be an active part of the Child 			
		and Family Team (CFT); and		Ш	
		 Ongoing verification of placing county participation is managed with STRTP ensuring active 			
		participation and documentation through CFT Meeting Notes			
		 STRTP has discussed the options of presumptive transfer or waiver with placing agency and 			
		the CFT			

Revised 3.24.22 Page | 1

Completed by STRTP	Completed by COR
AB1299 STRTP Admission Report and NOPT form was securely submitted to:	Any "NO" notation was reviewed by COR on:
☐ BHS COR via secure email on date:	Notes:
☐ Faxed to Optum at 866-220-4495 on date:	
Documentation for items 1-6 above verified by: Legal Entity Name: Program Name: Program Manager's Name:	
Comments (include rationale for any question marked "no" on question #1-6):	

Revised 3.24.22 Page | 2