Tuolumne County
Behavioral Health Department

Tami Mariscal
Director

Concurrent Review and Psychiatric Inpatient Hospital or Psychiatric Health Facility (PHF) Admission Notifications and Initial Authorization Requests Guidelines

Next working day from admission submit the required documents (Admit packet):

1. Physician face sheet with:
   - Full patient name
   - DOB
   - Date of Admission
   - Admitting Diagnosis
   - Admitting MD
2. Intake
3. Assessment
4. Labs
5. Full Psychiatric hold/status (5150/LPS or Vol)
6. Medi-Cal swipe showing Tuolumne County Primary

Patient admission and daily stay will not be authorized without all required documentation

For admission notifications and initial authorizations requests use the 24-hours a day and 7 days a week telephone access line:

Fax required documentation to 209-533-6288

For Questions, call Concurrent Review at 209-533-7097

1820.220. MHP Payment Authorization by a Point of Authorization.
(j) (4) Requests for MHP payment authorization for continued stay services shall be approved if written documentation has been provided to the MHP indicating that the beneficiary met the medical necessity reimbursement criteria for acute psychiatric inpatient hospital services for **each day** of service in addition to requirements for timeliness of notification and any mandatory requirements of the contract negotiated between the hospital and the MHP.