

EHR Intake Flow

CaIMHSA

Request

START SERVICES (NEW CLIENT)

Done in **Inquiry** screen

Verify Medi-Cal (**Inquiry: Insurance tab**)

Basic Demographics (client identifiers) (**Inquiry: Demographics tab**)

Create a client ID (**Link/Create Client button**)

Includes referring agency information if applicable

NOTE: In some instances, requests for SMHS do not require completion of the Screening Tool for Medi-Cal Mental Health Services. Be sure to understand when a screening is and is not required, as outlined in [DHCS BHIN 25-020](#). When not required, you may move to "Request Enrollment in the Program That Will Conduct the Assessment".

COMPLETE SCREENING TOOL

- Enroll the client in an Access Program (**Client Programs > New > Program Assignment Details**) **OR** use **Disposition section of Inquiry**: select Disposition, enter the Access Program with today's date.
- Request for MH services: use required DHCS screenings: (**Adult Medi-Cal Screening Tool & Youth Medi-Cal Screening Tool**)
Result determines the system of care that will conduct the initial assessment
- Request for SUD services: use **Brief Questionnaire for Initial Placement (BQulP)**

REQUEST ENROLLMENT IN THE PROGRAM THAT WILL CONDUCT THE ASSESSMENT

- **Use Disposition section of Inquiry**: select the disposition, then select the program that will conduct the assessment and enter today's date.
- If the program you're referring to allows you to schedule appointments for them, move onto the next step. Otherwise, send a message to the program manager to alert them of the referral so that they can schedule the initial appointment.
- Discharge the client from the Access program (**Client Programs > Program Assignment Details**)

CLIENT ATTENDS APPOINTMENT: COMPLETE INTAKE

- Enroll the client in the assessing program (**Client Programs > Program Assignment Details**)
- Complete intake packets (**links on Client Dashboard: Client Tracking widget**)
- Complete legal forms/consents
- Complete full demographic data set, including contacts, aliases, PCP, etc.
- Complete CSI Demographics, CalOMS, etc.
- Enter client's insurance information (**Client Coverage**)

REFER TO MCP FOR ASSESSMENT

- Document referral (**Client Information: External Referral tab**)
- Provide Screening Tool with the referral

SCHEDULE AN ASSESSMENT APPOINTMENT

- Schedule an assessment appointment with the Requested program (**Appointment Search > Service Note**)
- Create a Timelines Record for this request. Choose the document based on the type of service requested:
 - DMC-ODS Outpatient Timeliness Record
 - DMC-ODS Opioid Timeliness Record
 - DMC-State Plan Outpatient Timeliness Record
 - DMC-State Plan Opioid Timeliness Record
 - MH Non-Psychiatric Timeliness Record
 - MH Psychiatric Timeliness Record

COMPLETE CLINICAL ASSESSMENT (CALAIM ASSESSMENT; CA ASAM)

- Determines if the client meets access criteria for the requested service
- Determines what services the client will receive
- Document any services done during clinical assessment process (**Service Note**)
- Document the diagnosis (**Diagnosis Document**)

CLOSE OUT REFERRAL

- Ensure timely MCP appointment occurs
- Document follow up to ensure referral is closed (**Client Information: External Referral tab**)

REFER TO MCP

- Complete **NOABD Delivery System**
- Document referral (**Client Information: External Referral tab**)
- Complete the **Transition of Care** tool.
- Discharge from the program that completed the assessment (**Client Programs > Program Assignment Details**)
- Complete the Timelines Record

PROVIDE SERVICES

- Complete **Service Notes**
- If needed, request enrollment in additional programs using the disposition section (**Service Note: Disposition tab**)
- Complete Timeliness Record