

Get Patients to the Right Behavioral Healthcare – Fast

CLEAR REFERRALS HELP ENSURE TIMELY ACCESS TO THE RIGHT LEVEL OF SUPPORT

Quick, accurate referrals play a critical role in helping patients access the behavioral healthcare they need without unnecessary delays. Whether a patient requires non-specialty mental health or specialty mental health services, choosing the appropriate level of care supports timely treatment, better outcomes and smoother care coordination.

Use the information below to support effective behavioral health referrals and help connect patients to the services that best meet their needs.

Understand the types of behavioral health services



Non-specialty Mental Health (NSMH):

Support for mild to moderate needs

Available services include:

- Outpatient therapy
- Psychiatric evaluation
- Medication management

NSMH is recommended for patients with:

- Mild to moderate depression or anxiety
- Adjustment disorders
- Stress-related concerns
- Situational or life-transition challenges



Specialty Mental Health Services (SMHS):

Support for complex or high-acuity needs

Available services include:

- Crisis intervention
- Stabilization
- Inpatient/residential treatment

SMHS includes coordination with:

- County Mental Health Plan
- Specialized or intensive programs


Collaboration across providers supports smooth transitions and continuity of care for patients with higher acuity or more complex behavioral health needs.

(continued)



Behavioral health referral workflow

Steps/Workflow	What to do
1 Screen patient for behavioral health and social needs	Begin by assessing the patient’s behavioral health concerns, level of severity, and any social determinants of health that may impact care, such as housing, transportation, access to meals, etc.
2 Select the appropriate service (see table on page 1)	Match the patient to the provider or services best suited to their needs.
3 Refer and coordinate care for patients	<ul style="list-style-type: none"> • Mild to moderate behavioral health needs – refer them to the Behavioral Health Customer Contact Center listed on the back of their Health Net* member ID card for evaluation and connection to a behavioral health provider. Note: Providers must share relevant medical records regarding the patient’s diagnosis and document care appropriately. • Severe behavioral health needs for Medi-Cal patients – refer them to the County Mental Health Plan for SMHS. • Not sure which level of care is appropriate – refer patients to the Behavioral Health Customer Contact Center listed on the back of their Health Net member ID card for screening and guidance on the best level of care.



Questions?

If you need support for patients who need help with behavioral health or substance use disorder services:

1. **Call the Health Net Provider Services Center** at **800-675-6110**.
2. **Behavioral health providers** can call **844-966-0298**.

Your actions make a difference

Physicians, practitioners and other providers are essential in identifying patients’ needs and making appropriate referrals. Coordinating and communicating across systems helps ensure each patient receives personalized, seamless care.

To ensure timely, appropriate care:

- **Refer patients to the Behavioral Health Customer Contact Center** listed on the back of their Health Net member ID card for support and care coordination. **Patients may also select a behavioral health provider online at healthnet.com.**
- **Accept referrals** that align with screening outcomes.
- **Deliver care within your scope of practice** and in accordance with clinical guidelines.
- **Communicate changes about a patient’s clinical status** that may require escalation.

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