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California Department of Public Health



ARNOLD SCHWARZENEGGER
Governor

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AFL 09-42

TO: Acute Psychiatric Hospitals
General Acute Care Hospitals

SUBJECT: Care and Treatment of Psychiatric Emergency Medical Conditions

AUTHORITY: Assembly Bill (AB) 235 (Hayashi, Chapter 423, Statutes of 2009)

This letter is being sent to notify you of new legislation effective January 1, 2010, which affects emergency services provided in hospitals licensed by the California Department of Public Health (CDPH) Licensing and Certification (L&C) program.

AB 235 (Chapter 423, Statutes of 2009) defines a “psychiatric emergency medical condition” as a mental disorder that manifests itself by acute symptoms of sufficient severity that it renders the patient as being either an immediate danger to himself or others, or immediately unable to provide for or utilize food, shelter, or clothing, due to the mental disorder.

AB 235 states that the care and treatment necessary to relieve or eliminate a psychiatric emergency medical condition may include admission or transfer to a psychiatric unit within a general acute care hospital (GACH), or to an acute psychiatric hospital (APH). Patients may be transferred for admission to a psychiatric unit within a GACH or to an APH for care and treatment that is solely necessary to relieve or eliminate a psychiatric emergency medical condition.

AB 235 states that a patient may be transferred, provided that the patient’s psychiatric emergency medical condition is such that, within reasonable medical probability, no material deterioration of the psychiatric condition is likely because of the transfer, in the opinion of the treating provider. Pursuant to AB 235 requirements, a hospital transferring a patient shall seek to obtain the name and contact information of the patient’s health care service plan, and notify the patient’s health care service plan or the plan’s contracting medical provider of the transfer if contact information is obtained, as specified.

AB 235 also states the emergency services and care, as defined, shall not apply to Medi-Cal managed care plan contracts to the extent that those services are excluded from coverage under those contracts. Further, the addition of these provisions shall not be construed to require providers to seek authorization to provide emergency services and care to a patient who has a psychiatric emergency medical condition that is not otherwise required by law.

The information in this All Facilities Letter is a brief summary of a portion of AB 235, relative to the care and treatment of psychiatric emergency medical conditions. Facilities are responsible for following all applicable laws. CDPH's failure to expressly notify facilities of legislative changes does not relieve facilities of their responsibility for following all laws and for being aware of all legislative changes. Facilities should refer to the full text of AB 235 to ensure compliance.

If you have any questions, please contact your respective L&C District Office.

Sincerely,

Original Signed by Kathleen Billingsley, R.N.

Kathleen Billingsley, R.N.
Deputy Director
Center for Health Care Quality