



**DEPARTMENT OF MENTAL HEALTH
POLICY/PROCEDURE**

SUBJECT RECOMMENDATIONS TO PRIVATE PAY MENTAL HEALTH SERVICE PROVIDERS/PRACTITIONERS	POLICY NO. 300.04	EFFECTIVE DATE 02/09/2015	PAGE 1 of 2
APPROVED BY:  Director	SUPERSEDES 100.2 03/01/2003	ORIGINAL ISSUE DATE 06/22/1988	DISTRIBUTION LEVEL(S) 1

PURPOSE

- 1.1 To prevent or avoid any appearance of professional favoritism in issuing Mental Health referrals from public (Los Angeles County Department of Mental Health [LACDMH]) to private resources when requested by persons who self-pay or have outside corporate health insurance.

DEFINITION

- 2.1 **Authorized Mental Health Discipline (AMHD):** LACDMH staff of the following disciplines who can provide direct services to clients (Reference 1):
 - Licensed Psychiatrist/Physician (MD/DO);
 - Certified Nurse Practitioner (NP), registered Clinical Nurse Specialist (CNS), Registered Nurse (RN);
 - Licensed or waived Psychologist (PhD/PsyD);
 - Licensed Clinical Social Worker (LCSW) or registered Masters in Social Work (Associate Clinical Social Worker - ASW) or out-of-state licensed-ready waived Masters in Social Work;
 - Licensed Marriage and Family Therapist (LMFT) or registered Marriage and Family Therapist (MFT) Intern or out-of-state licensed-ready waived MFT; and
 - All students of these disciplines with co-signature signifying final responsibility.

POLICY

- 3.1 Recommendations made by AMHDs to individuals seeking outside services shall not involve real or apparent conflicts of interests. (Authorities 1 and 2)



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PROCEDURE

- 4.1 When an AMHD makes a recommendation to a client or individual regarding mental health services that are provided outside of LACDMH, the recommendation shall be first discussed with the AMHD’s supervisor unless:
 - 4.1.1 The recommendation is to a professional organization not directly providing that service: e.g., American Psychological Association; or
 - 4.1.2 The recommendation is to a service provider which has no personal business or financial connection to the AMHD, as per Authorities 1 and 2.

AUTHORITY

- 1. [LACDMH Policy No. 608.02, Conflict of Interest](#)
- 2. [Los Angeles County Administrative Code, Title 5, Chapter 5.44](#)

REFERENCE

- 1. [Organizational Providers Manual](#)

RESPONSIBLE PARTY

LACDMH Office of the Medical Director