



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
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Dear Colleague,

We are writing to inform you that individuals who need outpatient mental health treatment services have a wide range of clinics to choose from in New York City. This letter serves to familiarize you with those options for making referrals to mental health clinics. We would also like to bring your attention to a regulatory change that affects the referral process, and to highlight two important issues relating to admissions.

To facilitate linkages and referrals between providers, please see the attached PDF that lists current clinics and the different populations they serve, i.e., adult, child, adolescent. We encourage you to refer to the full range of available clinics when making referrals that are sensitive to client choice and convenience. For the most up-to-date information, please go the State Office of Mental Health website and search under the Mental Health Provider Directory.

Further, we want to inform you of a regulatory change affecting the referral process. Section §599.6 (c)(7)(i) of the new SOMH clinic regulations requires all licensed outpatient clinics to provide an initial assessment to the following populations within five business days of referral: inpatient, forensic, or emergency settings, those determined to be at high risk, and those determined to be in urgent need by local government. The New York City Department of Health and Mental Hygiene has identified additional populations deemed to be in urgent need of services, per §599.6 (c)(7)(i), as follows:

- Children/Youth leaving a Residential Treatment Facility (RTF) or Residential Treatment Center (RTC)
- Children/Youth referred by a Home Based Crisis Intervention Program (HBCI)
- Individuals in receipt of services from a mobile crisis team who are not currently receiving treatment
- Individuals in domestic violence shelter programs who are not currently receiving treatment
- Homeless individuals (including runaway and homeless youth) and those who present at NYC homeless shelters who are not currently receiving treatment

- Youth aging out of foster care who are not currently receiving treatment
- Individuals who have been discharged from an inpatient psychiatric facility within the last 60 days who are not currently receiving treatment
- Individuals referred by rape crisis centers
- Individuals referred by the juvenile justice or court system

If the individual is in a managed care plan, the referral source should check the provider network prior to making the referral to ensure the referral is made to a provider that accepts the individual's health plan.

Following initial assessment, the clinic is required to admit the individual or refer him/her to an appropriate provider of services, if indicated.

Finally, we would like to clarify two important issues that affect access to clinic services and have been brought to our attention in the past. First, if an individual requests medication treatment only, without accompanying psychotherapy, this alone does not constitute grounds to deny him/her admission to the clinic. Second, while many individuals receive treatment services within their communities, each individual has the right to receive services based on choice. This means that there are no geographic limitations (also known as catchment areas) on where you may refer an individual, based on where he/ she may choose to receive clinic services.

If you make a referral to an outpatient clinic and do not receive an appropriate response, please contact Anne Marie Bove, Deputy Director, New York City Field Office of the New York State Office of Mental Health for assistance. She may be reached at (212) 330-1650, extension 660.

As always, thank you for your continued efforts to serve the people of New York City.

Sincerely,



Trish Marsik
Assistant Commissioner
Bureau of Mental Health
Department of Health and Mental Hygiene



Lily Tom
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Bureau of Children, Youth and Families
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