

## OPOH Summary of Changes – March 2026

SECTION	REVISION	WHAT HAS CHANGED (Section page number in parenthesis)
Cover Page	N/A	
Table of Contents	03/24/26	Updated entire document to reflect reformatting changes/ updates. Addressed accessibility issues.
Section A: Systems of Care	03/16/26	Addition of Harm reduction section (A2-A3) Replaced “client” with “member” throughout.
Section B: Compliance & Confidentiality	3/16/26	Corrected number for anonymous reporting to BAC throughout. Replaced “client” with “member” throughout.
Section C: Accessing Services	03/16/2026	Updated Out of Network Access section to include the following: Plan’s process for utilizing out-of-network providers when network adequacy or timely access standards cannot be met, Align the language with the DHCS MHP Contract, Clarify roles and responsibilities among referring providers, Optum (ASO), and the BHP and Add a “Member Protections” subsection to reinforce continuation of OON access when standards remain unmet and to clarify cost protections. (C17-20) Replaced “client” with “member” throughout.
Section D: Providing Specialty Mental Health Services	03/17/26	Formatting changes only – removed duplicate sections Replaced “client” with “member” throughout.
Section E: Integration with Physical Healthcare	03/18/2026	Formatting changes only - removed duplicate sections Replaced “client” with “member” throughout.
Section F: Beneficiary Rights, Grievances, Appeals	03/24/26	Formatting changes only- removed duplicate sections Replaced “client” with “member” throughout. Removal of CCC information and replacement with ASCMI information (F5)
Section G: Quality Improvement	03/25/2026	Updated POH language re: CIR reporting on Weekends and Holidays (G18-19) Replaced “client” with “member” throughout. Added information about the LPS IR reporting process (G19) and IR trainings (G16)
Section H: Cultural Competency	12/17/25	Formatting changes only
Section I: Management Info System	03/10/2026	Removal of CCBH training information and addition of info from BHS Memo regarding <i>Client Data in Legacy CCBH System</i> (I9) Replaced “client” with “member” throughout.
Section J: Provider Contracting	03/24/26	Added hyperlinks to Disbarment or Exclusion Federal and State Database Checks (J5)
Section K: Provider Issue Resolution	03/24/2026	Formatting changes only. Replaced “client” with “member” throughout. Replaced “Grievance and Appeal brochures” and “Grievance and Appeal posters” with new “Problem Resolution Process” language. (K8)

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Section L: Practice Guidelines	03/18/2026	Added clause about the youth trauma tools (BHIN 23-002) + link to DHCS approved list for youth-trauma screening tools (L5) Replaced “client” with “member” throughout. Added additional info to “reporting member deaths” (L6). Added back “continued care” and “discharge” guidelines (L13-14)
Section M: Staff Qualifications	N/A	
Section N: Data Requirements	03/25/26	Formatting, removed duplicate information throughout
Section O: TBD	N/A	Pending integration of BH Connect information-sections integrated into other parts of the OPOH.
Section P: MHSA	N/A	
Section Q: Payment Schedule & Budget Guidelines	03/25/26	Formatting, removal of old recoupment information
Section R: Quick Reference	N/A	
Appendix	N/A	