

This guide is for the Health Plan of San Mateo (HPSM) primary care providers to consider referral and resource pathways for members presenting with developmental and or behavioral issues. There are many services available for kids that extend beyond their Medi-Cal benefit.

Clinical Presentation or Service Need	Where to Refer
<p><b>Mental Health and Substance Use Treatment</b> Treatment for mental health symptoms or substance use impacting functioning. Services include: family therapy support and individual medication management support.</p>	<p><b>Access Call Center</b> Fax: 650-596-8065 Phone: 800-686-0101 Referral Form: <a href="http://www.hpsm.org/docs/default-source/provider-forms/bhrs_referral_form.pdf">www.hpsm.org/docs/default-source/provider-forms/bhrs_referral_form.pdf</a></p> <p><i>Members can self-refer. Members will be linked to the appropriate system of care: HPSM’s non-specialty mental health network (mild to moderate) BHR’s specialty mental health or substance use treatment.</i></p>
<p><b>Behavioral Health Treatment (BHT)</b> Child with Medi-Cal under 21 years old with Autism Spectrum Disorder (ASD), autism-like behaviors or suspected ASD with behaviors that interfere with learning and social interaction. Services include: Comprehensive Diagnostic Evaluation (CDE), Functional Behavioral Assessment (FBA), Applied Behavioral Analysis (ABA), parent/caregiver behavior training, social skills group.</p>	<p><b>Health Plan of San Mateo Behavioral Health Treatment Team</b> Fax: 650-829-2006 Referral Form: <a href="http://www.hpsm.org/docs/default-source/provider-services/behavioral-health/bht-referral-form.pdf">www.hpsm.org/docs/default-source/provider-services/behavioral-health/bht-referral-form.pdf</a></p> <p><i>Provider referral required.</i></p>
<p><b>Developmental Delay/GGRC Early Start Program</b> For children under 36 months with a 25% or more delay in adaptive, cognitive, communication, social, emotional, or physical and motor development, or for children under 36 months with established risk conditions or high-risk biomedical factors that could lead to a delay.</p>	<p><b>Golden Gate Regional Center</b> Fax: 888-339-3306 Phone: 888-339-3305 Email: <a href="mailto:intake@ggrc.org">intake@ggrc.org</a> Visit <a href="http://www.ggrc.org">www.ggrc.org</a> for referral forms for Early Start and Lanterman Programs</p>

<p><b>Developmental Disability/GGRC Lanterman Act Program</b></p> <p>Patients with intellectual disability, autism, epilepsy, cerebral palsy, or disabling conditions associated with an intellectual disability, or patients that require treatment like individuals with an intellectual disability.</p>	<p><b>Golden Gate Regional Center</b></p> <p>Fax: 888-339-3306</p> <p>Phone: 888-339-3305</p> <p>Email: <a href="mailto:intake@ggrc.org">intake@ggrc.org</a></p> <p>Visit <a href="http://www.ggrc.org">www.ggrc.org</a> for referral forms for Early Start and Lanterman Programs</p>
<p><b>Special Education/Early Start Program for Infants and Toddlers</b></p> <p>For children under 36 months with orthopedic, hearing and/or visual disabilities and who are not eligible for GGRC Lanterman Act Program.</p> <p><b>Individualized Education Program (IEP)</b></p> <p>For students with long term needs that affect their ability to learn at school.</p>	<p><b>San Mateo County Office of Education</b></p> <p>Web: <a href="http://www.smcoe.org">www.smcoe.org</a></p> <p>Phone: 650-802-5300</p>
<p><b>Neuromuscular Rehabilitation/Long-Term Physical Therapy/Occupational Therapy Support</b></p> <p>Individuals under age 21 requiring long term physical and/or occupational therapy support AND who present with CCS Medical Therapy Program eligible conditions.</p> <p>Eligible conditions include but are not limited to those with signs of spasticity related to cerebral palsy or traumatic brain injuries, neuromuscular diseases (e.g., muscular dystrophy), musculoskeletal diseases (e.g., arthrogyrosis), spina bifida, and brachial plexus injury.</p> <p>Children under age 3 with a neurologic injury putting them at risk for cerebral palsy may be eligible.</p>	<p><b>California Children’s Services Medical Therapy Unit</b></p> <p>Phone: 650-616-2500</p>
<p><b>Additional HPSM benefits as recommended and referred by PCP</b></p> <p>(Examples: Speech Therapy, Occupational Therapy, Physical Therapy)</p>	<p><b>HPSM Provider Directory</b></p> <p>Web: <a href="http://www.hpsm.org/provider/directory-search">www.hpsm.org/provider/directory-search</a></p> <p>Refer directly to servicing provider, using HPSM provider directory.</p>