



**DEPARTMENT OF MENTAL HEALTH**  
 hope. recovery. wellbeing.

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Dear MAT providers,

Over the past week, there have been numerous changes to how our program operates due to the COVID-19 pandemic. We appreciate all of your incredible dedication to your work and the children we serve, as well as your amazing adaptability.

As many of you have reached out seeking guidance and support, we wanted to provide a summary of themes that have come up in the questions we have received. The following FAQ document is intended to provide the MAT community with some additional information specific to our program. We will update this FAQ as additional questions come up and want to encourage providers to continue to share their questions and concerns with DMH service area staff as well as countywide MAT administration.

Additional information related to QA, documentation, and Legal Entity providers is available from QA Bulletin 20-01: SMHS During COVID-19 and the Legal Entity provider letter (Department of Mental Health (DMH) COVID-19 Response) dated March 19, 2020.

It is important that MAT-eligible children and youth continue to receive appropriate mental health services at this time. We ask that provider agencies work diligently to identify capacity and accept cases under the guidelines offered in the QA documents referenced above.

Your work, dedication, and passion are truly appreciated.

Sincerely,  
 DMH MAT Countywide Team

<b>Question Topic: Telephone / Telehealth</b>	<b>Answer</b>
1) How do we proceed with MAT cases via phone and can cases be opened with phone contact only?	1) Please refer to QA Bulletin 20-01: SMHS During COVID-19 for guidance on telehealth and using online communication platforms (Skype, Zoom, etc.) to conduct mental health services.
2) Can we conduct MAT assessments with no face-to-face contact?	2) Providers are encouraged to follow the safety protocols provided by their agencies. While we appreciate some programs wanting to continue to see clients in their offices and/or in the field, face-to-face contact is not required to open or complete an assessment at this time.
3) What are the guidelines on obtaining consent for those	3) MAT cases have consent via court orders (Minute Order or Stand Alone Order) or the MH 179 form provided by DCFS. While additional consent is not

<p>intakes that are conducted via telephone?</p> <p>4) Is there information on how to obtain a diagnosis when conducting telehealth and telephone services?</p> <p>5) With current concerns regarding Covid-19, is there anything that has changed in how we present our MAT cases in meetings?</p> <p>6) What should we do if we are in the middle of a MAT case and we decide not to have a second face to face with the client for health safety reasons?</p> <p>7) What should we do if we have not had any face-to-face contacts with a MAT referral so far?</p>	<p>necessary, your agency policy may require you to obtain consent and you can do so by following the guidance in QA Bulletin 20-01: SMHS During COVID-19.</p> <p>4) Diagnosis via telephone or telehealth should be based on information obtained from the child/youth, caregiver, family members, collaterals, and records. Telehealth communication tools should allow for some direct observation of young children and babies in addition to virtual contact with school-aged children and youth.</p> <p>5) MAT (SOF and MAT/CFT) meetings should be held via telephone or telehealth platforms. While the meetings will not be held in person, the flow of the meeting should remain consistent with previous practice with necessary adjustments being made as needed.</p> <p>6) Continue with the assessment to the best of your ability, utilizing additional phone or telehealth contacts to obtain needed information to support the completion of the assessment and SOF document.</p> <p>7) Please refer to QA Bulletin 20-01: SMHS During COVID-19 for guidance on telehealth and using online communication platforms (Skype, Zoom, etc.) to conduct mental health services.</p>
<p><b>Question Topic: Case Assignment and Meetings</b></p>	<p><b>Answer</b></p>
<p>1) How long will MAT assignments be on hold and will MAT services be delayed in any way?</p> <p>2) Will DCFS coordinators be contacting us about scheduling MAT meetings? How do I get a hold of the DCFS CSW or CSAT staff?</p>	<p>1) New MAT cases will be assigned as usual via the DCFS MAT coordinators and/or DMH MAT service area staff, depending on DCFS office and service area. Contracted MAT providers should follow the safety protocols provided by their agency for continuing to conduct MAT assessments. There is no need to delay services when they are delivered via telephone or telehealth.</p> <p>2) The DCFS MAT coordinators will provide communication regarding SOF or MAT/CFT meetings. Please contact the DCFS MAT coordinator in the office where the meeting is scheduled as well as the service area DMH MAT staff if you need additional information. Face-to-face MAT meetings should be rescheduled into a telephone or telehealth platform</p>

<p>3) What if we are not able to adhere to the MAT timelines?</p> <p>4) What if caregivers refuse to participate in the assessment process? What if they do not have access to telehealth apps? Can cases be returned to DCFS?</p>	<p>format. If you are finding it difficult to get a hold of DCFS staff, please seek support from the DMH MAT team in your service area.</p> <p>3) Providers should continue to aim toward completing assessments within the existing MAT timelines. Adjustments may need to be made based on client availability and other factors. Please communicate projected delays to the DCFS MAT coordinator and DMH service area MAT staff well ahead of the scheduled MAT meetings.</p> <p>4) Barriers to engagement with caregivers should always be brought up to the DCFS MAT coordinator, CSW, and service area MAT staff as soon as they become apparent. Attempts to address these issues will be made with support from our DCFS partners. All viable avenues toward resolving the barrier to access should be pursued prior to making a collaborative decision regarding the status of the case.</p>
<p><b>Question Topic: Misc.</b></p>	<p><b>Answer</b></p>
<p>1) Will guidelines be given on expectations for high-risk clients?</p>	<p>1) High-risk clients should be prioritized and given the highest level of service and support.</p>