

To:	BHS Contracted Service Providers
From:	Behavioral Health Services
Date:	February 20, 2025
Title	Psychiatric Mental Health Nurse Practitioner Questionnaire and Attestation Form

This information notice provides new guidance to document the utilization of psychiatric mental health nurse practitioners (PMHNP) for both the mental health (MH) and substance use disorder (SUD) system of care (SOC), inclusive of the following:

- **Background**
- **Documentation Requirements**
- **Reference Documents**
- **Support**

BACKGROUND

- California’s Assembly Bill (AB) 890, chaptered in 2020, allows nurse practitioners (NPs) who meet certain criteria the authority to practice without physician supervision under the NP’s own license.
- AB 890 provides an opportunity for an NP, clinic and health system leaders to reevaluate how they deploy NPs working within institutions.
- AB 890 presents opportunities to increase access to health care for Californians especially those who live in underserved areas.
- Providers in the County of San Diego, Behavioral Health Services (BHS) SOC can include 103 PMHNPs and PMHNPs working under standardized procedures with collaborating physicians, in behavioral health settings across the lifespan.
- For PMHNPs working in youth settings, additional experience and/or training is needed.

DOCUMENTATION REQUIREMENTS

Where do I get the form?

The form can be found on the [OPTUM San Diego Organizational Providers Credentialing](#) website. At the time of credentialing, the authorized legal entity representatives and/or senior leadership will receive an email with the link to the form via Adobe Sign and instructions on how to complete it. The document is time sensitive and will require the Collaborative Agreement as an attachment, if applicable.

Who should complete the form?

Authorized legal entity representatives and/or senior leadership who have reviewed and understand the legal requirements allowing a PMHNP to perform the work within their organization.

Prior to completing the document:

- Authorized legal entity representatives and/or senior leadership should review the Questionnaire and Attestation Form as well as the Guide and Tips Sheet document referenced below.
- Any questions should be addressed prior to filling out the attestation either directly with OPTUM’s Credentialing Representative or via general inbox, BHSCredentialing@optum.com.
- A copy of the Collaborative Agreement, if applicable, should be ready to be attached when the Questionnaire and Attestation Form is completed in Adobe Sign.

For More Information:

- Contact OPTUM San Diego Credentialing at BHSCredentialing@optum.com



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How to complete the form:

- The name of the NP should match that which is listed on the License submitted with the credentialing documents.
- Provide the NP’s job description, note it must include their site of practice, population focus, age group, and anticipated scope of practice and/or job duties.
- Select the options that best describe the reference practitioner.
- Provide the estimated hours of experience since graduation and in the practitioner’s focus area.
- Authorized representatives/senior leadership at the legal entity will initial each attestation that applies to the referenced NP.

Where to send the form:

Upon completion of the Questionnaire and Attestation Form, the authorized legal entity representatives and/or senior leadership shall sign and send documents to the OPTUM Credentialing Representative assigned or to BHSCredentialing@optum.com.

REFERENCE DOCUMENTS

- [NP Questionnaire and Attestation Form](#)
- [Guide and Tips for Psychiatric Mental Health Nurse Practitioner Questionnaire](#)
- [Nurse Practitioners in BHS – 11-1-24.pdf](#)
- [California Assembly Bill 890](#)
- [California Business and Profession Code Section 2837.103](#)
- [Standardized Procedure Requirements for Nurse Practitioner Practice](#)

SUPPORT

For questions regarding the Questionnaire and Attestation Form, please contact OPTUM San Diego Credentialing Representative assigned to your entity/program. General questions can be sent to BHSCredentialing@optum.com.

For More Information:

- Contact OPTUM San Diego Credentialing at BHSCredentialing@optum.com