



7.3.21 PERINATAL SERVICES

Issue Date: 10/2013

Revision History: 12/22/2025

References: 45 CFR §96.131, California Department of Health Care Services (DHCS) Perinatal Practice Guidelines, Intergovernmental Agreement for Drug Medi-Cal Organized Delivery System, multi-year 2023-2027 and subsequent versions

Policy Owner: Behavioral Health Division, Quality Assessment and Performance Improvement (QAPI), Quality Assurance Manager

Director Signature: **Signature on File**

I. Policy Statement

Sonoma County Department of Health Services, Behavioral Health Division (DHS-BHD), Substance Use Disorder (SUD), and Community Recovery Services section will comply with all federal, state, and local laws regarding the provision of perinatal substance use treatment, as well as with the standards set forth in the California Department of Health Care Services (DHCS) Perinatal Practice Guidelines (PPG).

II. Scope

This policy applies to all DHS-BHD Covered Persons including employees (full-time, part-time, extra-help), unpaid interns, paid interns, temporary agency workers, registered volunteers, and all individual providers contractually designated as covered persons. Covered Persons do not include Community Based Organization (CBO) staff.

III. Definitions

Not Applicable

IV. Policy

- A. The purpose of the SUD PPG is to ensure delivery of quality SUD treatment services and adherence to state and federal regulations. The SUD PPG provides regulatory guidance and best practices on perinatal requirements, serving pregnant and parenting women in accordance with Drug Medi-Cal Organized Delivery System (DMC-ODS), California Advancing and Innovating Medi-Cal (CalAIM), and the Substance Use Prevention, Treatment, and Recovery Services Block Grant (SUBG) Perinatal Set-Aside from the Substance Abuse and Mental Health Services Administration (SAMHSA).

Treatment providers must serve the following individuals with a SUD as follows:

1. Women who are pregnant.
2. Women with dependent children.
3. Women attempting to regain custody of their children.
4. Postpartum women and their children.
5. Women with substance exposed infants.

V. Procedures

- A. Members who have been assessed and found appropriate for perinatal services will receive the following:
1. Referrals for medical treatment, including pediatric care and immunizations for their children.
 2. Assistance in obtaining childcare services when necessary.
 3. Education to reduce the harmful effects of alcohol and drugs on parent and fetus, or the parent and infant. Additional education may include such topics as: presentation of infant CPR and car seat safety, local rape crisis resources, domestic violence, home safety, HIV/AIDS education, employment opportunities, parenting groups for recovering women, and refer participants to community providers for services related to sexual assault, domestic violence, mental health, marriage and family counseling, and parenting support for themselves and their children.
 4. Coordination of referrals for women and children to Mental Health Services to address developmental, sexual and physical abuse of children. These issues may also be incorporated into groups which address parenting, co-dependency, communication, and self-esteem.

5. Service access (i.e., provision of, or arrangement for transportation to and from medically necessary treatment).

B. Interim services for individuals awaiting admission into a SUD treatment program. The priority populations who will receive priority admission into treatment are:

1. Pregnant women and women with dependent children who inject drugs;
2. Pregnant women and women with dependent children who use substances;
3. People who inject drugs;
4. All others.

VI. Forms

None

VII. Attachments

None