San Bernardino County Department of Behavioral Health Universal Charge Data Invoice (CDI) – Mental Health Program Outpatient Services

Clinic Name				Reporting Unit	Service Primary Date Staff No.							
Client Number	Client Name / Activity	Proc Code	Grp Cnt	Primary Staff Time	Co-Staff Number	Co-Staff Time	Svc Loc	EBP/SS	Preg "Y"	Emg "Y"	Dup Svc	Cik OK

Regarding the Medi-Cal eligible (including EPSDT Medi-Cal) clients above, I hereby certify, under penalty of perjury, that I provided the above services to the listed clients and that the above claim information is the same as that documented in client charts.

Staff Sign and Print Name

Data Entry Done

By CLP006 (5/22)

Date Entered

Administrative

- 201 No Show Intensive Day TX
- 300 No Show
- 307 Appt Rescheduling
- 308 Clinic Canceled
- 309 Patient Canceled
- 400 No Show Intake
- 403 Leave and Holiday
- 404 Training Given
- 405 Training Received
- 406 Dept Travel Time
- 408 Departmental Meeting
- 418 Approved Special Assignment
- 457 Supervision Provided 458
- Supervision Received

Adult Residential

- Adult Crisis Residential 141
- 166 Adult Residential

Assessment

- 331 Assessment
- 364 Diagnostic Int Eval w/Med Svcs

CaLWORKs

- Collateral 310
- 320 Psychological Testing
- 330 Assessment
- 340 Individual Therapy 350
- Group Therapy 360 Medication
- 370
- Crisis Intervention 520 Plan Development
- 550 Rehab/ADL NB
- 550G Rehab/ADL NB Group

Case Management

- 541 Placement Services
- Case Mgmt L&C 561
- 571 Case Mgmt Plan Dev

Collateral

311 Collateral

Comprehensive Treatment

- 775 Referral Coordination 776 Screening
- 777 Non Mental Health Case Mgmt 778
- Care Coordination
- 779 OT Assessment/Evaluation
- 780 OT Treatment Session
- 781 OT Consultation
- 782 SLT Assessment/Evaluation
- 783 SLT Treatment Session 784 SLT Consultation
- 785 Audiology Screening
- 786 Pediatric Assessment/Evaluation
- 787 Pediatric Follow-up
- 788 Psychological Testing
- 789 Psychological Testing Feedback 790 Parent/Family Partner Link/Sppt Ind

CLP006 (5/22)

Conservatorship Invest

621 Conservatorship Investigation

- **Crisis Intervention** 371 Crisis Intervention Crisis Intervention after first 74 mins 378
- Crisis Stablilization-Emergency Room 151
- Crisis Stabilization ER
- **Crisis Stabilization-Urgent Care**
 - 153 Crisis Stabilization (Urgent Care)

Day Treatment Intensive; Full Day 285 Day Tx Intensive Full Day

- Day Treatment Intensive; Half Day 283 Day Tx Intensive Half Day
- Day Treatment Rehabilitation; Full Day 295 Day Rehabilitation, Full Day

Day Treatment Rehabilitation; Half Day

Day Rehabilitation, Half Day

351 Group Therapy

Group Billing

Indirect (non-billable) Services

- Mental Health Promotion 411
- Community Client Contact Adult 421
- 423 Interpretation Services
- 474 Non English Service
- 427 Community Client Contact Child
- 433 Day Treatment TX Support
- Vocational Program 453
- 461 Placement Evaluation
- 462 Hosp. Liasion
- 463 Court Appearances
- 464 Medication Management
- 770 Referral Coord - Non Open Case
- 771 Screening - Non Open Case
- 772 Case Management - Non Open Case
- Follow-up Care Non Open Case 773 774
- Other Nursing Care

Individual Therapy

341 Individual Therapy

Intensive Care Coordination

576 Intensive Care Coordination

Intensive Home Based MHS

578 Intensive Home Based Svcs

Medication (E/M)

- E/M Moderate Complexity, New CLT 361
- E/M High Complexity, New CLT 363
- 366 E/M Low Complexity, EST CLT
- E/M Moderate Complexity, EST CLT 368 E/M High Complexity, EST CLT
- 369
 - Rehab/ ADL NB 550
 - 550G Rehab/ ADL NB Group

TBS NB

Clinical Practice

- Linkage & Consultation NB 560
- 570 Case Mgmt Plan Dev NB
- Intensive Care Coordination NB 575 577 Intensive Home-Based Svcs NB

Conservatorship Inv NB

Service Location 02 Telehealth

DBH Site

Urgent Care

Emergency Room Field/OOC

Non Face-to-Face

Innatient

Satellite Other

Duplicate Service

Age Specific Community Center

Mobile Service Non-traditional Service Location

Homeless Faith based-Church, Template, etc.

Residential Care/Community Location

XXX59 Distinct Procedural Service (e.g. 33159)

Assertive Community Treatment (ACT)

Integrated Dual Diagnosis Treatment

Peer and/or Family Delivered Services

Delivered in Partnership w Law Enforcement

Delivered in Partnership w Health Care

Integrated Services for MH and Aging

Ethnic-Specific Service Strategy

Evidence-Based Practices (EBP) Non-CSI

Brief Strategic Family Therapy (BSFT)

Families and Schools Together (FAST)

Positive Parenting Program (Triple P)

200 Attachment-Based Family Therapy (ABFT)

203 Dialectical Behavioral Therapy (DBT)- Child

206 Parent Child Interaction Therapy (PCIT)

209 Treatment Foster Care Oregon (TCFO)

300 Assertive Community Treatment (ACT)

301 Assisted Outpatient Treatment (AOT)

303 Cognitive Behavioral Therapy (CBT)

304 Cognitive Processing Therapy (CPT)

305 Cognitive-Behavioral Therapy for PTSD

308 Prolonged Exposure Therapy for PTSD

311 Cognitive Enhancement Therapy (CET)

502 Medication-Assisted Treatment (MAT)

620 Family Urgent Response System (FURS)

401 Functional Family Therapy (FFT) 500 Brief Marijuana Dependence Counseling

306 Dialectical Behavioral Therapy (DBT)- Adult

302 Cognitive Behavioral Social Skills Training

102 Transition to Independence Process Model (TIP)

202 Cognitive Behavioral Therapy (CBT) for Adolescent Depression

208 Trauma Focused Cognitive Behavioral Therapy (TF-CBT) Child

307 Eye Movement Desensitization and Reprocessing (EMDR)

400 Community Reinforcement and Family Training (CRAFT)

309 Trauma Recovery and Empowerment Model (TREM/M-TREM) 310 Trauma Focused Cognitive Behavioral Therapy (TF-CBT) Adult

501 Broad Spectrum Treatment (BST) Naltrexone for Alcohol Dep.

600 Adolescent Community Reinforcement Approach (A-CRA)

Page 2 of 3

High Fidelity Wraparound

101 Mental Health First Aid

201 Child Parent Therapy (CPP)

205 Multisystemic Therapy (MST)

204 Homebuilders

100 Alternatives For Families (AF-CBT)

Age-Specific Service Strategy

Delivered in Partnership w Social Services

Delivered in Partnership w Sub Abuse Svc

Integrated Services for MH & Develp Disabilities

Unknown Evidence-Based Pratice/Svc Strategy

Illness Management and Recovery

Supportive Employment

Family Psycho-education

Medication Management

Therapeutic Foster Care

Multi-systematic Therapy

Functional Family Therapy

Psycho-education

Supportive Education

Family Support

New Generation Medications

Supportive Housing

Repeat Proced by same person (e.g. 33176)

Repeat Proced by Different person (e.g. 33177)

Evidence-Based Practices (EBP)/Service Strategies (CSI)

Licensed Care Residential Adult

Other Community Location

Healthcare/Primary Care Clients Job Site

Home

03 School

09 Jail

11 12

13

15 16

17 18

20 21

23

27

28

29

30

33

53

55

72 99

XXX76

XXX77

01

02

03

04

05

06

07

08

09

10

11

50

51

52

53

54

55

56

57

58

59

60

61

99

1

2

3

4

Medication Education Group

MSS Service, Non-MD

MHS Plan Development

Psych Testing Codes

321 Psych Testing

Quality Assurance

Rehab/ADL Codes

551G Rehab/ADL Group

TBS Assessment

TBS Collateral

Treatment Support

Non-billable Direct Service

140 Adult Crisis Residential NB

Adult Residential NB

Day Intensive NB

Psych Testing NB

Individual Therapy NB

Crisis Intervention NB

MSS Service, Non-MD NB

Plan Development NB

Placement Services NB

Medication Edu NB

Assessment NB

Medication NB

Group NB

Dav Rehab NB

Collateral NB

431 OP Tx Support

TBS Treatment Plan

551 Rehab/ADL

TBS Services

581 TBS

582

583

584

165

280

290

310

320

330

340

350

360

370

380

384

520

540

580

620

Plan Development

Developmental Screening

Neurobehavioral Status Exam

Neuropsychological Testing

Developmental Testing

450 Administrative Chart Audit

Medi-Cal QA Chart Audit

QA Administration/Indirect

382

383

385

521

324

325

326

327

454

456

Medication Visit

381 Med Educ & Training one (1) client

Med Educ & Training 2-4 clients

Med Educ & Training 5-8 clients

GENERAL INSTRUCTIONS Universal Charge Data Invoice (CDI) - Mental Health Services

Revised 10/12/2016

The Charge Data Invoice (CDI) provides data relevant to services that have been provided so that billing or other cost allocation may be done. All services and CDI categories are now combined on a single page.

The CDI is completed for each workday and is submitted no later than the next day.

Information provided on the CDI must be accurate. It is unethical to distort information provided on the CDI. Inaccuracies may be viewed by the Department's Compliance Unit and by the Federal government as fraud.

See Outpatient Chart Manual Section 11 for detailed billing information. For exact service definitions, see DBH Service Function/Scope of Practice Summary.

Please note Day Treatment billing is done using a printout from DBH's billing system and is not included on this Universal CDI.

ENTRIES

- 1. Clinic Name
- 2. <u>Reporting Unit</u> in DBH's billing system used as tracking number for site or service type
- 3. <u>Service Date</u> is the date the billed service occurred
- 4. Primary Staff Number is the DBH billing system staff number of the primary service staff.
- 5. Client Number is the DBH billing system registration number of client.
- 6. <u>Client Name</u> as it appears in medical record.
- 7. <u>Procedure Code</u> enter the procedure code for the service provided as identified in the chart note heading. Service type abbreviations on the CDI are the chart note headings that are to be used in chart notes.
- 8. Group Count is the number of clients in a group.
- 9. <u>Primary Staff Time</u> is the time spent on the service, related Plan Development, and charting for that service by the primary staff person, to the minute as near as possible i.e., 126, 014 etc.; same as time entered on interdisciplinary note in chart for that person for that service.
- 10. <u>Co-Staff Number</u> is the DBH billing system number of co-staff if there was a co-staff for the service.
- 11. <u>Co-Staff Time</u> was time spent on the service, related Plan Development, and charting for that service by the co-staff person, to the minute as near as possible i.e., 126, 014, etc.; same as time entered on interdisciplinary note in chart for that person for that service.
- 12. <u>Service Location</u> Please see service location codes on back of CDI or on chart forms. Must be same service location as entered on interdisciplinary note in chart for that service. Can only enter one code.
- 13. <u>EBP/SS</u> Please see Evidence-Based Practices/Service Strategies codes on back of CDI. Can enter up to 3 codes.
- 14. <u>Pregnancy Indicator</u> This indicator needs to be marked "Y" when the approved aid code is "Pregnancy Services Only".
- 15. <u>Emergency Indicator</u> This indicator needs to be marked "Y" if any of the following applies: when the approved aid code is "Emergency Services Only". Eligible services are crisis stabilization, crisis intervention and medication support (when emergency). 9 CCR 1810.216

NOTE: When the approved aid code is "Emergency Services or Pregnancy Only" one or the other indicator must be selected.

- 16. <u>Duplicate Code</u> This indicator is needed when there is more than one service provided on the same day. All services entered after the initial service will need to have a Duplicate Code entered.
- 17. <u>Clk. OK</u> is a check box used by clerical staff to keep track of data entry lines and/or for checking data entry.
- 18. <u>Staff signature</u> affirms that all entries meet the requirements of the certification statement.
- 19. Data Entry Done By and Date Entered for use by clerk entering CDI data into SIMON.