


San Francisco Department of Public Health

CBHS Policies and Procedures

	City and County of San Francisco Department of Public Health COMMUNITY BEHAVIORAL HEALTH SERVICES	1380 Howard Street, 5th Floor San Francisco, CA 94103 415.255-3400 FAX 415.255-3567
	POLICY/PROCEDURE REGARDING: Mental Health Provider Data Form (CBHS 100)	
Issued By: Bob Cabaj, M.D. Director of Behavioral Health Date: June 28, 2006	Manual Number: 2.01-05 Reference:	

Substantive Revision. Replaces memo 2.01-05 of 3/25/99

It is CBHS policy that provider data shall be kept current in order to assure that provider communication, client information, billing and reimbursement occur without interruption. The Mental Health Provider Data form (CBHS100, Attached) is the form used within CBHS Administration to assure that all technical staff obtain the information they need regarding organizational providers and group providers. It is the responsibility of program managers to complete this form in a timely manner, obtain the appropriate approvals, and distribute copies for all new providers and to provide timely updates for current providers.

Required Additional Actions Before Change is Made

Some changes require additional actions before this form can be completed. These are listed below:

- 1. Change of Address:** In order for programs certified to bill for Short-Doyle MediCal, address changes require certification review as well as the provision of a new fire clearance for the provider site. See Policy 2.01-02 on Short-Doyle MediCal certification. Medicare certified programs require recertification for Medicare billing after a move. We require that this change be submitted at least *70 days* before the effective date, to reduce the risk of delayed or disallowed billings.
- 2. Change of Legal Entity/Owner**
When this change involves a new legal entity it is required that this change be submitted at least 3 months before the effective date.

a. CBHS Contractors

A change in legal entity requires a **new contract**. Contact Jacquie Hale, CBHS Contract Manager, 255-3720, for information on procedures.

b. CBHS Certified Medi-Cal organizational providers

For programs certified to bill Short-Doyle Medi-Cal, a change in legal entity requires a re-certification. See Policy 2.01-02 regarding re-certification.

c. Change in Service Mode or Functions

In order to add, modify, or delete a Mode of Service or Service Function Code, program managers are required to modify their contracts to reflect the changes. Changes should be anticipated well before the effective date, and CBHS 100 forms for those changes should be distributed at least 2 months before the effective date of implementation in order to prevent interruption of billings.

Forms:

Copies of the Behavioral Health Provider Data Form (CBHS100) can be obtained from the forms control manager, 255-3408.

Contact Person: Maria J. Barteaux, Billing Director, (415) 255-3536

Attachment: 1

CBHS Policies and Procedures are distributed by Quality Management, Lucy Arellano, (415) 255-3687

Distribution:

Administrative Manual Holders at 1380 Howard

CBHS Program Managers

Jacquie Hale, Office of Contract Management and Compliance

Jim Gilday, Compliance Manager, SD/MC Medi-Cal Certification

Pat Reynolds, BHBIS

Lucy Arellano, Quality Management

Forms Control Manager