

**DEPARTMENT OF BEHAVIORAL HEALTH
OFFICE OF FISCAL & ADMINISTRATIVE SERVICES
PROVIDER RELATIONS DIVISION**



**MHRS BULLETIN LISTING
08/17/2016
ACTIVE BULLETIN LISTING**

Bulletin No.	Effective Dates	Title
10	9/2006	MHRS Providers, Access to Care, System Capacity, Suspended Referral Status and Routine, Urgent and Emergency Care
16	11/2006	Service Request for Additional Units
26	2/2007	DMH 20 Billing Code for Team Meetings
31	11/2007	Claims Roll-Up
33	11/2007	Change In Processing Request For Rehabilitation Day Services
34	11/2007	Payment of Claims Submitted Above the Units Authorized
35	11/2007	Approving Qualified Practitioners for IRP/IPC (Revised 2016)
36	11/2007 Revised 2/2011	A Tip To Avoid The Invalid Provisional Diagnosis Code Denials
47	9/2008	Clarification of MHRS Regarding Progress Notes vs Encounter Notes (Revised 2016)
50	12/2008	Diagnostic Eligibility for MHRS Services
51	3/2009	Monitoring of Consumers' Living Environment
56	10/2009	Notice of Discontinuation of Certain Bulletins
59	4/2010	Provider Responsibility For Level Of Care Utilization (Locus/Calocus) Evaluations
60	4/2010	Residency Verification Directive
64	5/2010	Update: Multi-Systemic Therapy Provider As Clinical Home
65	7/2010	Update-Billing For Medicaid/Managed Care Organization (MCO) Services
69	1/2011	MUI/UI Form Adds A Line In Section A. #17 (DMH Policy 480.1B Exhibit 4)
70	3/2011	MHRS Providers' Submission of Annual Financial Statements
72	6/2011 Updated 1/2013	Department of Mental Health-Extrapolation
75	11/2011 Updated 1/2013	Treatment Plan Signatures
76	12/2011	Services Provided to Youth Consumers In School (Revised 2016)
78	1/2012	Guidance for Billing Services for Free Standing Mental Health Services and Rehabilitation Services for Consumers With Medicaid Coverage
80	3/2012	Non Billable Mental Health Rehabilitation Services
81	3/2012	Certified Addictions Counselors and the Provision of Mental Health Rehabilitation Services
82	7/2012	Community Based Intervention (CBI) Levels II & III Evaluation Protocol (Replaces former Bulletin #24)- Revised

83	3/2012	Supplemental Training requirements for Community Based Intervention (CBI) providers Levels II & III (Replaces former Bulletin #23)- Revised
84	1/2013	CBI Concurrent Review Required Documentation (Replaces former Bulletin #57)- Revised
86	1/2013	Medicaid Realignment Recoupment of Payment (Replaces former Bulletin #71)
87	1/2013	ACT Work Flow (Replaces former Bulletin #13) (Revised 2016)
89	3/2013	Protocol for MHRS Service Provider Closures(Replaces Bulletin #15)
90	8/15/13	Provider Licensure Verification and Exclusion Checks
91	10/18/13	MHRS Certification and Renewal of Certification Requirements
92	11/13/13	MHRS Provider Clinical Leadership
93	11/15/13	Electronic Health Records and Retention of Paper Records
94	12/16/13	Brief Assessment (H0002)
95	12/19/13	Community Support Physicians Team Member (H0036AM)
96	1/8/14	CSA Response to CFSA Initial Referrals
98	5/1/14	Coordination of Care For Residents of MH Community Residence Facilities
99	7/15/14	Guidance For Providers Partially Integrated with iCAMS
100	7/15/14	Group Notes and Rehabilitation Day Services 7 14 14
101		Updated Privacy Policy for iCAMS
102	03/10/2015	Long Acting Injectable Antipsychotic Medications: A Best Practice of Treatment of Psychosis (Replaces former Bulletin #61)
103	03/10/2015	Authorization and Claims Processing (Replaces former Bulletin #79)
104	03/10/2015	LOCUS/CAFAS/PECFAS Requirements (Replaces former Bulletin #85)
105	12/31/2015	Procedures for Self- Reported Overpayments
106	6/7/2016	Eligibility Requirements for Mental Health Rehabilitation Services (MHRS)
107	8/17/2016	Proper Claiming and Service Provision, and Provider Responsibility to Avoid False Claims

All MHRS Bulletins can be located on the DBH website at
www.dbh.dc.gov

**DEPARTMENT OF BEHAVIORAL HEALTH
OFFICE OF FISCAL & ADMINISTRATIVE SERVICES
PROVIDER RELATIONS DIVISION**



**MHRS BULLETIN LISTING
07/12/2016**

INACTIVE (DISCONTINUED) BULLETIN LIST

1	D/C	Medication /Somatic Service: Request for Additional Units
2	D/C	Prohibition Against Making or Authorizing Expenditures In Excess of Available Appropriations
3	D/C	Schedule for Claims Submission FY-06 Claims
4	D/C	Update-Unit Recovery Initiative (URI) - II
5	D/C	Consent Order To Expedite FY-05 Payments
6	D/C	CBI II And III Training
7	D/C	Crises Beds: Ninety (90) Day Pilot Project
8	8/2006	Configuring eCura to Reflect ACT/CBI as Clinical Home
9	D/C	Cease Providing Reimbursement for Local Code DMH 19
11	D/C	30 Business Day Authorization Request Rule
12	D/C	Denied Claims Work
13	10/2006	ACT Work Flow Replaced by Bulletin #87
14	D/C	Provider Payment Problems
15	D/C	Protocol for Mental Health Rehabilitation Services Provider Closings
17	D/C	Urgent Reminder Notice-FY/06 Claims Cut Off Date
18	D/C	Supplemental Social Security (SSI) Benefits-Federal Rate Increase
19	D/C	Temporary Suspension of the Thirty Business Day Rule
20	D/C	Transition To Medicaid Reimbursement
21	D/C	New Community Based Intervention (CBI) Service Line
22	D/C	The Resolution and Submission of Same Day Claims (aka "Duplicate Claims)
23	D/C	Supplemental Training Requirement for CBI Providers Level II & III
24	D/C	Community Based Intervention (CBI) Evaluation Protocol
25	D/C	Open Application Period for Existing Child Serving Providers to Deliver MHRS CBI Level II & III Services
27	D/C	Providing Mental Health Rehabilitation Services Prior to Completion of A Diagnostic Assessment Replaced by Bulletin #94
28	D/C	Provider Identification (NPI) Status Update
29	D/C	Final claims Submission FY-07
30	D/C	Billing and authorization Accountability Points to Note
32	D/C	2007 Fiscal Claims Cut-Office Notice
37	D/C	Community Based Intervention (CBI) Authorization Event
38	D/C	Blank Insurance Coverage Span
39	D/C	Utility To Read The 835
40	D/C	Contracted Billing Personnel Supporting Multiple MHRS Providers
41	D/C	Adjusting Authorized Denied For Exceeded Local dollar Limits

42	D/C	Payments for TU(telephone contacts) modifier
43	D/C	MCO Covered Services
44	D/C	Rehabilitation Day Services: How to Enter An Authorization Request
45	D/C	Authorization of Local Dollar Services
46	D/C	Major Reportable Incident Definitions (MRI)
48	D/C	Schedule for Submission of FY-08 Claims
49	D/C	Coordination of Multisystemic Therapy Services
52 & 52A	D/C	Authorization For Payment of Consumer Transition Voucher (CTV) CTV Waiver Request
53	D/C	American Recover & Reinvestment Act of 2009 Social Security Payment
54	D/C	Placement of Consumers In Designated Housing
55	D/C	2009 Local Dollar Closeout
57	D/C	CBI Concurrent Review Required Documentation
58	D/C	Reporting Information Systems changes To DMH
61	D/C	Long Acting Injectable Antipsychotic Medications: A Best Practice of Treatment of Psychosis (Replaced by Bulletin #101)
62	D/C	Clubhouse Medicaid Reimbursement
63	D/C	Department of Mental health (DMH) Quarterly Event Screen Update: Supportive Employment reporting
66	D/C	Discounted Sliding Fee Scale for Mental Health Rehabilitation Services (MHRS)
67	D/C	Use of Place of Service Code (POS) 51
68	D/C	Update to Locus/Calocus Requirements
71	D/C	Medicaid Realignment Recoupment of Payment
73	D/C	Submission of Paper Claims To the Department of Health Care Finance
74	D/C	Department of Mental Health Performance Event Screen For supported Employment and Supported Employment Service Code
77	D/C	Supported Employment-Waiting List Protocol
79	D/C	Authorization and Claims Processing
85	D/C	Update to Locus/Calocus Requirements (Replaces former Bulletin # 68)
88	D/C	Supported Employment Waiting List Protocol (Replaces Bulletin #77)
97	D/C	DBH Updated Privacy Manual-This Bulletin is being replaced by the DBH Privacy Policy