

Universal CDI Code Set by Type (as of 12/22/2009)

Administrative Codes

300 No Show
 302 No Show Walk-In
 304 Rescheduled
 305 Clinic Canceled
 306 Patient Canceled Walk-In
 307 Appt Rescheduling
 309 Patient Canceled
 403 Leave and Holiday
 404 Training Given
 405 Training Received
 406 Dept Travel Time
 407 Local Meeting
 408 Departmental Meeting
 409 Interagency Meeting
 410 Other Meeting
 418 Approved Special Assignment
 419 Administrative Duties NOS
 457 Clinical Supervision Provided
 458 Clinical Supervision Received
 459 Admin Supervision Provided
 460 Admin Supervision Received

Assessment Codes

331 Assessment
 332 Assessment AB2726
 333 Assessment Walk-In
 334 Assessment Hosp Aftercare
 337 Assessment Telmed
 684 Assessment Healthy Homes

CalWORKs Codes

310 Collateral
 320 Psych Testing
 330 Assessment
 340 Family Therapy
 340 Individual Therapy
 350 Group Therapy
 360 Medications
 370 Crisis Intervention
 520 MHS Plan Development
 550 Rehab/ADL

Case Management Codes

541 Placement Service
 542 Placement Services AB2726
 544 Placement Hospital Aftercare
 561 Linkage & Consultation
 562 Linkage & Consultation AB2726
 564 Case Mgmt Walk-In
 566 Link/Cons Hospital Aftercare
 567 Linkage Telmed
 571 Plan Development Case Mgmt
 572 Plan Development AB2726
 574 Plan Devel CM Hosp Aftercare
 579 Plan Devel CM AB2726
 693 Healthy Homes Placement
 696 Link/Consultation Healthy Homes
 697 Plan Devel CM Healthy Homes

Conservatorship Invest

621 Conservatorship Invest
 631 Conservatorship Admin

Collateral Codes

311 Collateral
 312 Collateral AB2726
 313 Family Collateral
 314 Collateral HAS
 315 Collateral
 316 Collateral Walk-In
 317 Collateral Telmed
 681 Collateral Healthy Homes
 683 Family Coll Healthy Homes

Crisis Intervention Codes

371 Crisis Intervention
 372 Crisis Intervention AB2726
 373 Crisis Walk-In
 377 Crisis Telmed
 688 Crisis Healthy Homes

Day Treatment Codes

286 Half Day Intens Day Tx AB
 291 Day Tx Habil Half Day
 292 Day Care Habil AB2726
 295 Day Tx Habil Full Day
 296 AB Day Tx Habil Full

Group Billing Codes

351 Group
 351 Family Group
 352 Group AB2726
 686 Group Healthy Homes

Individual Therapy Codes

341 Individual
 341 Family/Individual
 342 Individual AB2726
 347 Individual Telmed
 685 Individual Healthy Homes

Indirect (non-billed) Services

411 Mental Health Promotion Adult
 412 MH Promotion AB2627
 417 Mental Health Promotion Child
 420 AB2627 Mediation/Due Process
 421 Community Client Contact Adult
 422 CC Contact AB2726
 423 Interpretation Services
 427 Community Client Contact Child
 433 DT Tx Support Adult
 434 DT Tx Support AB2726
 437 DT Tx Support Child
 442 Classroom Observation
 452 I.E.P.
 461 Placement Evaluation
 462 Hospital Liaison
 463 Court Appearances
 661 Case Mgmt Support
 662 Case Mgmt Support AB2726

TBS Service

581 Therapeutic Behavioral Service
 582 TBS Assessment
 583 TBS Treatment Plan
 584 TBS Collateral
 585 TBS Coaching

Medication Support Codes

361 Medication
 362 Medication AB2726
 363 Medication Walk-In
 365 Brief Medication Follow-up
 367 Meds via Telmed
 687 Meds Healthy Homes

MHS Plan Development Codes

521 Plan Development
 522 Plan Development AB2726
 524 Plan Dev Hospital Aftercare
 691 Plan Dev Healthy Homes

Psych Testing Codes

321 Psych Testing
 322 Psych Testing AB2726

Quality Assurance Codes

395 QA Case Review/Direct
 451 Non Medi Cal QA Chart Audit
 454 MediCal QA Chart Audit
 455 QA Committee Meeting/Indirect
 456 QA Administration/Indirect

Rehab/ADL Codes

551 Rehab/ADL
 552 Rehab/ADL AB2726
 554 Rehab/ADL Hospital Aftercare
 557 Rehab ADL Telmed
 695 Rehab/ADL Healthy Homes

Unbilled Direct Service Codes

339 Assessment AB2627 NBC
 330 Assessment NBC
 310 Collateral NBC
 319 Collateral AB2627 NBC
 620 Conservatorship Investigation
 379 Crisis Inter AB2627 NBC
 370 Crisis Intervention NBC
 539 Emergency Inter AB2627 NBC
 530 Emergency Intervention NBC
 519 Evaluation AB2726 NBC
 510 Evaluation NBC
 359 Group AB2627 NBC
 350 Group NBC
 349 Individual AB2726 NBC
 340 Individual NBC
 402 Intake No Show AB2726
 289 Intens Day Tx AB2627 NBC
 569 Linkage & Advocacy AB2726 NBC
 560 Linkage & Consultation NBC
 360 Medication NBC
 369 Medication AB2627 NBC
 549 Placement Services AB2726 NBC
 540 Placement Services NBC
 529 Plan Development AB2726 NBC
 570 Plan Development Case Mgmt
 520 Plan Development NBC
 329 Psych Testing AB2627 NBC
 320 Psych Testing NBC
 559 Rehab/ADL AB2627 NBC
 550 Rehab/ADL NBC
 580 Therapeutic Behavioral Service NBC

Evidence-Based Practices/Service Strategies EBP/SS

01 Assertive Community Treatment (ACT)
 02 Supportive Employment
 03 Supportive Housing
 04 Family Psycho-education
 05 Integrated Dual Diagnosis Treatment
 06 Illness Management
 07 Medication Management
 08 New Generation Medications
 09 Therapeutic Foster Care
 10 Multi-systemic Therapy
 11 Functional Family Therapy
 50 Peer and/or Family Delivered Services
 51 Psycho-education
 52 Family Support
 53 Supportive Education
 54 Delivered in Partnership w Law Enforcement
 55 Delivered in Partnership with Health Care
 56 Delivered in Partnership with Social Services
 57 Delivered in Partnership with Substance Abuse Services
 58 Integrated Services for Mental Health
 59 Integrated Services for Mental Health and developmental Disability
 60 Ethnic-Specific Service Strategy
 61 Age-Specific Service Strategy
 99 Unknown Evidence-Based Practice/Service Strategy

Service Location Codes

1 DBH Site
 2 Field/OOC
 3 Non Face-to-Face Service
 4 Home
 5 School
 6 Satellite
 7 [Not Used]
 8 Jail
 9 Inpatient
 10 Homeless
 11 Faith-based (Church,temple,etc)
 12 Health Care/Primary Care
 13 Age Specific Community Center
 14 Client's Job Site
 15 Licensed Care Residential Adult
 16 Mobile Service
 17 Non-traditional service location
 18 Other Community location
 19 Residential Care/Facility/Community Treatment Facility
 20 Tele-health
 21 Unknown

Duplicate Service Codes

59 Distinct Precedural Service
 76 Repeat Procedure by Same Person
 77 Repeat Procedure by Different Person

GENERAL INSTRUCTIONS

Universal Charge Data Invoice (CDI) - Mental Health Services

Revised December 22, 2009

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 and DBH MAA definitions.

A listing of common procedure codes in use as of Nov 2004 is on the second page of the universal CDI and may be printed on the back of the CDI if desired.

Please note Day Treatment billing is done using a printout from SIMON and is not included on this Universal CDI.

ENTRIES

1. Clinic Name
2. Reporting Unit in SIMON used as tracking number for site or service type
3. Service Date is the date the billed service occurred
4. Primary Staff Number is the SIMON staff number of the primary service staff.
5. Client Number is the SIMON registration number of client.
6. Client Name as it appears in medical record.
7. Procedure Code - 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. Please note that the same procedure code number is used in some cases for more than one service — e.g., 551 MHS-Rehab/ADL-Ind. and 551 MHS-Rehab/ADL-Grp.
8. Group Count is the number of clients in a group.
9. Primary Staff Time 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. Co-Staff Number is the SIMON number of co-staff if there was a co-staff for the service.
11. Co-Staff Time 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. Service Location Please see service location codes back of CDI or on chart forms. Must be same service location as entered on interdisciplinary note in chart for that service. For MAA service, please enter one of the two MAA Provider codes (SPMP provider 9, non-SPMP provider 8).
13. **EBP/SS Please see Evidence-Based Practices/Service Strategies codes on back of CDI. Can enter up to 3 codes.**
14. Pregnancy Indicator This indicator needs to be marked "Y" when the approved aid code is "Pregnancy Services Only".
15. Emergency Indicator 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. Clk. OK is a check box used by clerical staff to keep track of data entry lines and/or for checking data entry.
17. Staff signature affirms that all entries meet the requirements of the certification statement.
18. Data Entry Done By and Date Entered for use by clerk entering CDI data into SIMON.