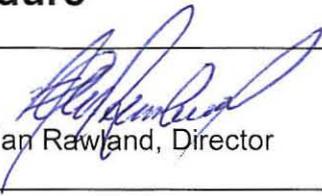


**County of San Bernardino
Department of Behavioral Health**

Charge Data Invoice (CDI) Process Procedure

Effective Date 10/28/09
Approval Date 10/28/09


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Purpose The County of San Bernardino Department of Behavioral Health is committed to a consistently applied process to complete Charge Data Invoices (CDI). CDI input is to occur on a rolling seven (7) business day cycle, to ensure access to current revenue information and service productivity.

Overview The following major steps will be used to process CDIs with consistent accuracy and timeliness. The following process and procedure descriptions are based on the presumption of full staffing for all clinics.

Process /Time	Action
Phase 1 Each business day	CDIs and charts are prepared and issued.
Phase 2 Daily, but no later than three (3) business days from date of service	CDIs are completed and submitted.
Phase 3 Daily, but no later than seven (7) business days from date of service	CDIs are reviewed for accuracy and input.
Phase 4 Two (2) business days from date of return, and no later than seven (7) business days from date of service	Inaccurate CDIs are corrected and input.
Phase 5 Within one (1) business day of input	902 reports are issued and compared to confirm CDI accuracy.

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Charge Data Invoice (CDI) Process Procedure, Continued

Phase 1: CDIs and Charts Prepared and Issued

Client charts will be prepared and schedules/CDIs will be issued no later than the afternoon prior to client appointments each business day as follows:

Step	Action
1	No later than the afternoon prior to client appointments, an assigned Office Assistant (OA) prints the clinicians' and Physicians' Staff Appointment Roster and Resource Appointment Schedule for the next day.
2	The assigned OA pulls clinician charts and places them in a designated area.
3	The assigned OA pulls the Physicians' charts and reviews them for: <ul style="list-style-type: none"> • Current Abnormal Involuntary Movement Scale (AIMS) if indicated • Current Physical Assessment if indicated • Psychiatric Evaluation (Adult)(Child) if indicated • Current signed Client Plan that includes Medication Support Services • Signed consents <ul style="list-style-type: none"> ○ Medication Consent ○ Outpatient Treatment Consent • Diagnosis sheet signed by person authorized to diagnose • Clean Medication Visit Note with label
4	As needed, the assigned OA requests corrections/missing or expired chart documents from the Physician with the use of a Physician Request Form . Note: A "Do Not Bill" notice will be attached to the reviewed chart, if necessary
5	The assigned OA distributes Resource Appointment Schedules and Staff Appointment Rosters. Note: Treatment staff are to use the Universal CDI to record unscheduled services.
6	The assigned OA distributes charts to the Physicians.

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Phase 2: CDIs Completed and Submitted

CDIs and Staff Appointment Roster (SAR) will be completed and submitted daily, but no later than three (3) business days after the date of service, as follows:

Note: Written Program Manager approval must be obtained for any exceptions to the above time requirements.

Step	Action
1	Treatment staff complete CDIs/SAR and pink notes as services are provided. Note: The pink note is also referred to as Progress note, Chart note, Interdisciplinary Note , and ID note. (OCM: 2-5-6)
2	Treatment Staff ensure CDIs/SARs and notes have: <ul style="list-style-type: none"> • Date of service • Duration of service • Location Code • Service Mode and Type (notes only) • Procedure Code • Documentation of service (notes only) • Signature • Printed or stamped name • If group service, client count must be noted in duration column of note. On CDI/SAR, group count goes in appropriate column.
3	Physicians submit completed CDIs/SAR per clinic protocol as identified by Supervising Office Specialist (SOS).
4	Non-medical Treatment staff submit completed CDIs/SARs with original pink note to designated CDI in-baskets.

Phase 3: CDIs Reviewed for Accuracy and Input

CDI input will occur daily, but no later than seven (7) business days from the date of service, as follows:

Step	Action
1	The assigned OA electronically date stamps the CDI/SAR for the date of receipt.

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Charge Data Invoice (CDI) Process Procedure, Continued

Phase 3: CDIs Reviewed for Accuracy and Input
(continued)

Step	Action
2	The assigned OA reviews the CDI/SAR and pink note for: <ul style="list-style-type: none"> • Date of service matches • Time on CDI/SAR matches time on the pink note • Locations match • Procedure Code matches service description • Provider's signature and discipline • Printed or stamped name • Client name, date of birth, SIMON number, program name • Total service hours verified per clinic protocol to ensure the eight (8) or nine (9) hour requirement is met. • If the treatment staff is an intern, a supervisory staff signature and/or a Physician's signature must also be on the pink note.
3	The assigned OA removes the pink note from the CDI/SAR if reviewed information is accurate and sends the pink note to the chart room for filing.
4	The assigned OA enters CDI/SAR information on the CDI/SAR Tracking Log as appropriate.
5	The assigned OA notes any problems with the CDI/SAR on the CDI Correction Log as appropriate.
6	An assigned OA inputs the CDI/SAR.
7	The assigned OA electronically date stamps the CDI/SAR after entry.

Phase 4: Inaccurate CDIs Corrected and Input

Incorrect CDIs/SARs and pink note will be returned to the Treatment staff for correction the same day the CDI/SAR is reviewed. Corrected CDIs/SARs will be returned the same day received, but no later than two (2) business days after receipt, and no later than seven (7) business days following the date of service as follows:

Step	Action
1	The assigned OA writes corrections needed on the CDI/SAR.
2	The designated OA immediately returns the CDI/SAR and pink note to the Treatment staff.
3	The Treatment staff corrects and resubmits the CDI/SAR and pink note the same day, but no later than 2 business days from receipt, and no later than 7 business days from the date of service.
4	The assigned OA electronically date stamps the returned CDI/SAR and pink note and confirms corrections were made.

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Charge Data Invoice (CDI) Process Procedure, Continued

Phase 4:
Inaccurate CDIs
Corrected
Phase 4:
Inaccurate CDIs
Corrected
(continued)

Step	Action
5	The assigned OA removes the CDI/SAR information from the handwritten error log. Or , enters on the shared-drive CDI Correction Log the date the corrected CDI is returned and highlights the entry in yellow.
6	The assigned OA inputs the CDI/SAR.

Phase 5: 902
Report Issued
and Accuracy
Confirmed

The 902 Report is run and reviewed daily to confirm accuracy of CDI/SAR input as follows:

- The assigned OA confirms CDI/SAR procedure codes and billing time match the 902 report, which is automatically issued daily from a batch file
- The assigned OA makes input corrections as appropriate or submits a CDCI to the Business Office

Related Policy
or Procedure

DBH Standard Practice Manual, CLK0703: [Clinic Responsibility for Processing Client Registration and Financial Information \(PFI\) Procedure](#)
DBH Standard Practice Manual, QM6016: [Procedures for Submission of Chart Documentation and Charge Data Invoices \(CDIs\)](#)
DBH Clerical Manual, Section 6