

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

**Clinic  
Name** \_\_\_\_\_

## Reporting Unit

**Service  
Date** \_\_\_\_\_

**Primary  
Staff No.**

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 \_\_\_\_\_ Date Entered \_\_\_\_\_

## Administrative

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

## Adult Residential

H0018 MH Adult Crisis Residential  
H0019 MH Adult Residential Trmnt Svc

## Assessment

90791 Psychiatric Diagnostic Eval  
90792 Psych Diag Eval w/Med Serv  
H0031 MH Assessment by Non-Physician  
90885 Psychiatric Eval of Hospital Record

## CalWORKS

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

## Case Management

T1017 Targeted Case Management  
H0032 MH Srvc Plan Dev By Non-Md

## Child and Family Team Meetings

H2000 MH Comprehensive Multidiscip  
Eval

## Comprehensive Treatment

775 Referral Coordination  
776 Screening  
777 Non Mental Health Case Mgmt  
778 Care Coordination  
779 OT Assessment/Evaluation  
780 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/Supt Ind

## Crisis Intervention

H2011 Crisis Intervention Service  
90839 MH Psychotherapy for Crisis  
(First 30-74 mins)  
90840 MH Psychotherapy for Crisis  
(Add'l 30 mins)

## Crisis Stabilization-Emergency Room

S9484 Crisis Stabilization - ER

## Day Treatment Intensive - Full Day

H2012 MH Day Treatment Intensive/Rehab

## Day Treatment Intensive - Half Day

H2012 Day Tx Intensive Half Day

## Day Treatment Rehabilitation - Full Day

H2012 Day Tx Rehabilitation Full Day

## Group Billing

90849 Multi-Fam Group Psychotherapy  
90853 Group Psychotherapy

## Indirect (non-billable) Services

411 Mental Health Promotion Adult  
421 Community Client Contact Adult  
423 Interpretation Services  
424 Non-English Service  
427 Community Client Contact Child  
433 DT Tx Support Adult  
437 DT Tx Support Child  
442 Classroom Observation  
446 Assigned Hours by Date  
452 I.E.P.  
453 Vocational Program  
461 Placement Evaluation  
462 Hosp. Liaison  
463 Court Appearances  
464 Medication Management  
770 Referral Coord - Non-Open Case  
771 Screening - Non-Open Case  
772 Case Management - Non-Open Case  
773 Follow-up Care - Non-Open Case  
774 Other Nursing Care  
1009 Court Report Activity Hearing  
1012 Notice Activity Indirect  
1013 Data Reporting Activity

## Individual Therapy

90832 Psychotherapy 30 mins with Patient  
90834 Psychotherapy 45 mins with Patient  
90837 Psychotherapy 60 mins with Patient

## Intensive Care Coordination

T1017 Intensive Care Coordination

## Intensive Home Based MHS

H2017 Psychosocial Rehab (15 MIN)

## Medication (E/M)

99202 Offc or Othr Outpt Vst of New Pt 15-29min  
99203 Offc or Othr Outpt Vst of New Pt 30-44min  
99204 Offc or Othr Outpt Vst New pt 45-59 min  
99205 Offc or Othr Outpt Vst New pt 60-74 min  
99212 Offc or Othr Outpt Vst Est pt 10-19 min  
99213 Offc or Othr Outpt Vst Est pt 20-29 min  
99214 Offc or Othr Outpt Vst Est pt 30-39 min  
99215 Offc or Othr Outpt Vst Est pt 40-54 min

## Medication Education Group

H0034 Med Trng Suprt (15 min)

## Medication Visit

H0033 Oral Med Admin Direct Obsrv  
96372 MH Injection Subcutaneous or Intramuscul

## MHS Plan Development

H0032 MH Srvc Plan Dev by Non-MD

## Crisis Stabilization-Urgent Care

S9484 MH Crisis Stabilization Urgent Care

## Psych Testing Codes

96130 MH Psychological Testing Eval (First Hour)  
96131 MH Psychological Testing Eval (Add'l 60min)  
96110 Developmental Screening

96112 Developmental Testing First Hour

96113 Developmental Testing Each Additional Hour

96116 Neurobehavioral Status Exam First Hour

96121 Neurobehavioral Status Exam Add'l Hour

96132 Neuropsychological Test Eval First Hour

96133 Neuropsychological Test Eval Add'l Hour

## Quality Assurance

450 Administrative Chart Audit  
451 Non-Medi-Cal QA Chart Audit  
454 Medi-Cal QA Chart Audit  
455 QA Committee Meeting/Indirect  
456 QA Administration/Indirect

## Rehab/ADL Codes

H2017 Psychosocial Rehab

## TBS Services

H2019 MH Therapeutic Behavioral Servs

## Therapeutic Foster Care

195 Therapeutic Foster Care NB  
55145 Therapeutic Foster Care

## Treatment Support

431 OP Tx Support Adult

## Direct (non-billable) Services

140 Adult Crisis Residential NB  
165 Adult Residential NB  
280 Day Intensive NB  
290 Day Rehab NB  
310 Collateral NB  
320 Psych Testing NB  
330 Assessment NB  
340 Individual Therapy NB  
350 Group NB  
360 Medication NB  
370 Crisis Intervention NB  
380 Medication Edu NB  
384 MSS Service, Non-MD NB  
520 Plan Development NB  
540 Placement Services NB  
550 Rehab/ADL NB  
550G Rehab/ADL NB Group  
560 Linkage & Consultation NB  
570 Case Mgmt Plan Dev NB  
575 Intensive Care Coordination NB  
577 Intensive Home-Based Svcs NB  
580 TBS NB  
620 Conservators Inv NB  
1008 Court Hearing Activity  
1010 Outreach and Engagement Activity  
(Non CM)  
1011 Hearing Notice Activity Direct  
111E Inpatient Ineligible

## Place of Service

02 Telehealth Not In Client's Home  
03 School  
04 Homeless Shelter  
09 Jail  
10 Telehealth In Client's Home  
11 DBH/Contractor Site - Office  
12 Home  
14 Group Home  
15 Mobile Unit  
16 Temporary Lodging  
20 Urgent Care Facility  
23 Emergency Room – Hospital  
27 Outreach Site/Street  
31 Skilled Nursing Facility  
33 Custodial Care Facility  
51 Inpatient Psychiatric Facility  
52 Psych Facility-Partial Hospitalization  
55 Residential Care/Comm Treatment Fac  
56 Psych Res Tx Center  
57 Non-Res SA Tx Facility  
58 Non-Res Opioid Tx Facility  
99 Other Place of Service

## Duplicate Service

XXXXX59 Distinct Procedural Service  
XXXXX76 Repeat Proced by same person  
XXXXX77 Repeat Proced by Different person

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

01 Assertive Community Treatment (ACT)  
02 Supportive Employment  
03 Supportive Housing  
04 Family Psycho-education  
05 Integrated Dual Diagnosis Treatment  
06 Illness Management and Recovery  
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 w Health Care  
56 Delivered in Partnership w Social Services  
57 Delivered in Partnership w Sub Abuse Svc  
58 Integrated Services for MH and Aging  
59 Integrated Services for MH & Develp Disabilities  
60 Ethnic-Specific Service Strategy  
61 Age-Specific Service Strategy  
99 Unknown Evidence-Based Practice/Svc Strategy

## Evidence-Based Practices (EBP) Non-CSI

1 Brief Strategic Family Therapy (BSFT)  
2 Families and Schools Together (FAST)  
3 High Fidelity Wraparound  
4 Positive Parenting Program (Triple P)  
100 Alternatives For Families (AF-CBT)  
101 Mental Health First Aid  
102 Transition to Independence Process Model (TIP)  
200 Attachment-Based Family Therapy (ABFT)  
201 Child Parent Therapy (CPP)  
202 Cognitive Behavioral Therapy (CBT) for Adolescent Depression  
203 Dialectical Behavioral Therapy (DBT)- Child  
204 Homebuilders  
205 Multisystemic Therapy (MST)  
206 Parent Child Interaction Therapy (PCIT)  
208 Trauma Focused Cognitive Behavioral Therapy (TF-CBT) Child  
209 Treatment Foster Care Oregon (TCFO)  
300 Assertive Community Treatment (ACT)  
301 Assisted Outpatient Treatment (AOT)  
302 Cognitive Behavioral Social Skills Training  
303 Cognitive Behavioral Therapy (CBT)  
304 Cognitive Processing Therapy (CPT)  
305 Cognitive-Behavioral Therapy for PTSD  
306 Dialectical Behavioral Therapy (DBT)- Adult  
307 Eye Movement Desensitization and Reprocessing (EMDR)  
308 Prolonged Exposure Therapy for PTSD  
309 Trauma Recovery and Empowerment Model (TREM/M-TREM)  
310 Trauma Focused Cognitive Behavioral Therapy (TF-CBT) Adult  
311 Cognitive Enhancement Therapy (CET)  
400 Community Reinforcement and Family Training (CRAFT)  
401 Functional Family Therapy (FFT)  
500 Brief Marijuana Dependence Counseling  
501 Broad Spectrum Treatment (BST) Naltrexone for Alcohol Dep.  
502 Medication-Assisted Treatment (MAT)  
600 Adolescent Community Reinforcement Approach (A-CRA)  
620 Family Urgent Response System (FURS)