



|  |  |   |  |
|--|--|---|--|
| Client Name  |  | MR#   |  |
| Agency   |  | Provider  |  |
| Date of Service  |  | Service Time  |  |
| Did client participate in this service?  | <input type="checkbox"/> Yes <input type="checkbox"/> No | Documentation Time  |  |
| Did collateral participate in this service?  | <input type="checkbox"/> Yes <input type="checkbox"/> No | Travel Time   |  |
| Service Charge Code  |  | Non-Billable Time*  |  |
| Add-On Code  |  | Interpreter Name  |  |
| Location Code  |  | Language Provided in  |  |
| If follow up appointment was scheduled, please mark what type of appointment was offered for next appointment? |  | <input type="checkbox"/> In-person <input type="checkbox"/> Phone <input type="checkbox"/> Telehealth |  |
| <b>Groups Only</b>   |  |   |  |
| Number of Clients in Group   |  |   |  |

|  |   |
|--|---|
| Type of Progress Note                        | <input type="checkbox"/> Independent Note <input type="checkbox"/> New Service Note <input type="checkbox"/> Care Plan Progress Note                  |
| Care Plan Progress Note Type (if applicable) | <input type="checkbox"/> Targeted Case Management <input type="checkbox"/> Intensive Care Coordination <input type="checkbox"/> Peer Support Services |
|  |   |

Printed Name/Signature & License or Job Title of Clinician Providing Service/Writing Note.

Date

Printed Name/Co-Signature & License of Supervising Clinician

Date



\* Some contracted agencies do not have a “non-billable time” field. If this is the case for your agencies’ EHR and you want to document time you spent on non-billable activities, you may create a separate non-billable note using a non-billable service code.

**Mental Health Codes**

**SERVICE CODES for MH**

Please refer to the [BHRS Service Code Cheat Sheet](#) for a list of Mental Health Service Codes that are used across the BHRS system.

Individual contract agencies may have additional service codes for specific services that are unique to their program. Those agencies that have additional codes should refer to the codes list provided by MIS for a full list of service codes available to your agency.

**LOCATION CODES for MH**

Please refer to the [BHRS Location Code Index](#) for examples of each location type and information on which location codes are fully blocked (“Lockout”) or partially blocked (“Partial Block”) from billing.

| Code | Description                               |
|------|---|
| V    | 26.5 Youth Out-of-State (Lockout)         |
| I    | Age-Specific Community Center             |
| 5    | AOD Non-Residential                       |
| 4    | AOD Residential                           |
| J    | Client’s Job Site                         |
| B    | Field                                     |
| G    | Health Facility/PCP/SNF (non psych)       |
| H    | Home                                      |
| E    | Homeless Shelter                          |
| 13   | IHBS Home Visit                           |
| W    | IMD/MHRC (Lockout)                        |
| C    | Jail/Yth SVS (Lockout)                    |
| Z    | GPO-Jail/Youth Services Center            |
| Q    | Missed Visit (Lockout)                    |
| M    | Mobile Service                            |
| 10   | Non-residential Opioid Treatment Facility |
| A    | Office                                    |

| Code | Description                                      |
|------|--|
| O    | Other Community Location                         |
| Y    | PES (Lockout)                                    |
| 11   | Phone – Client At Home                           |
| 12   | Phone – Client Not At Home                       |
| 17   | Phone – Non-Client Contact                       |
| 99   | Psychiatric Hospital SMMC 3AB (Partial Block)    |
| D    | Psychiatric Hospital (Partial Block)             |
| 100  | Residential Care – Adults Locked (Partial Block) |
| L    | Residential Care – Adults (Partial Block)        |
| R    | Residential Care – Children                      |
| S    | School   |
| X    | Skilled Nursing Facility – Psychiatric (Lockout) |
| 88   | SMMC ED  |
| 6    | SMMC OFFICE                                      |
| T    | Telehealth                                       |
| 8    | Telehealth Home                                  |
| K    | Voicemail/Fax/Email (Lockout)                    |

**SUD Codes**

**SERVICE CODES for SUD**

SUD Contract Agencies should use the agency-specific list of codes rather than the Service Code Cheat noted above.

**LOCATION CODES for SUD**

Please refer to the [BHRS Location Code Index](#) for examples of each location type and information on which location codes are fully blocked (“Lockout”) or partially blocked (“Partial Block”) from billing.

| Code | Description                |
|------|----------------------------|
| 5    | AOD Non-Residential        |
| 4    | AOD Residential            |
| Q    | Missed Visit (Lockout)     |
| 17   | Phone – Non-Client Contact |

| Code | Description                |
|------|----------------------------|
| 11   | Phone – Client At Home     |
| 12   | Phone – Client Not At Home |
| T    | Telehealth                 |
| 8    | Telehealth Home            |