

# State of California—Health and Human Services Agency

## Department of Health Care Services



DATE: July 25, 2022

Behavioral Health Information Notice No: 22-039

TO: California Alliance of Child and Family Services

California Association for Alcohol/Drug Educators

California Association of Alcohol & Drug Program Executives, Inc.

California Association of DUI Treatment Programs California Association of Social Rehabilitation Agencies

California Consortium of Addiction Programs and Professionals California Council of Community Behavioral Health Agencies

California Hospital Association

California Opioid Maintenance Providers California State Association of Counties Coalition of Alcohol and Drug Associations

County Behavioral Health Directors

County Behavioral Health Directors Association of California

County Drug & Alcohol Administrators

SUBJECT: Electronic Signatures after the COVID-19 Public Health Emergency

(PHE)

PURPOSE: The purpose of this Behavioral Health Information Notice (BHIN) is to

> inform Mental Health Plans (MHPs), Drug Medi-Cal Organized Delivery System (DMC-ODS) Counties, and DMC State Plan Counties that they may continue to submit certifications of interim claims and cost reports

with an electronic signature after the COVID-19 PHE has ended.

REFERENCE: BHIN 20-035

#### **BACKGROUND:**

On June 19, 2020, DHCS issued BHIN 20-035 regarding acceptance of electronic signatures during the COVID-19 PHE due to the challenge of obtaining original signatures from MHPs, DMC-ODS, and DMC State Plan counties for certifications with interim claims for reimbursement and annual cost reports.

Before COVID 19 PHE, DHCS required wet signatures for the following forms from the counties:

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#### MHP:

- 1. Form MC 1982 A, B, C with each interim claim
- 2. Form MC 1940 with its annual cost report package

#### **DMC-ODS and DMC State Plan:**

1. Form DHCS 100224A (Revised 7/2014) with each interim claim

### **DMC** direct providers:

1. Form DHCS 100185 (Revised 6/2014) with the annual cost report

#### DMC-ODS:

1. Form MC 5311 with each interim claim

#### DMC:

1. Form MC 5312 with each interim claim

#### POLICY:

The Behavioral Health Financing Branch will continue to accept electronic signatures using Docusign or Adobe Acrobat in addition to original signatures of these forms after the PHE ends from the counties for certifications of interim claims for reimbursement and annual cost reports.

Please e-mail any questions regarding this Information Notice to MedCCC@dhcs.ca.gov.

Sincerely,

Original signed by

Brian Fitzgerald, Chief Local Governmental Financing Division