



JEAN M. SHEPARD
DIRECTOR

County of San Diego
HEALTH AND HUMAN SERVICES AGENCY

ALFREDO AGUIRRE, LCSW
MENTAL HEALTH SERVICES DIRECTOR
(619) 563-2750/2700 • FAX (619) 563-2775/2705

JENNIFER SCHAFFER, Ph.D.
BEHAVIORAL HEALTH DIRECTOR

BEHAVIORAL HEALTH DIVISION
3255 CAMINO DEL RIO SOUTH, SAN DIEGO, CALIFORNIA 92108

SUSAN BOWER, MSW, MPH
ALCOHOL AND DRUG SERVICES DIRECTOR
(619) 584-5007 • FAX (619) 584-5080

May 6, 2008

TO: All County of San Diego Mental Health Service Providers

FROM: Patricia Honeycutt, Chief
Contract, Finance and Admin Support, Behavioral Health Services

MONTHLY COST REPORT SUBMITTAL INSTRUCTIONS

Due to a recent audit, we are now enforcing previously published requirements for submitting Monthly Cost Reports to the County. Please note below:

- All pages of the Monthly Cost Report should be submitted. Currently, there are five pages in the template, and all five pages, even if they are blank (have no services/costs) should be submitted to the County for payment processing. **Note, on pages with no information being submitted, please write "blank page" and attach your signature.**
- An invoice number and contract number must be printed on all pages. No handwritten invoice numbers are accepted and handwritten corrections of a printed invoice number are not acceptable. Please contact your fiscal analyst if you do not know your contract number.
- Duplicate invoice numbers are not allowed.
- Follow previously provided guidelines (attached) for the invoice number format. Invoice numbers should be 4-8 digits long and can be a combination of alpha (uppercase only) or numeric characters. No special characters should be used (I.E. # - &).
- If you need to submit a revision of a previously submitted monthly cost report, please print the word "revision" before the signature date and use the same invoice number, but add "R" at the end.

Mental Health Service Providers
May 6, 2008
Page 2

Any submitted monthly cost report not in compliance with the above guidelines will be returned and may cause delays in the County's payment processing.

Thank you for your cooperation. If you have any questions about this request, please contact Junida Bersabe at (619) 584-5060 or email at junida.bersabe@sdcounty.ca.gov.



PATRICIA HONEYCUTT, Chief
Contract, Finance and Admin Support
Behavioral Health Services

PH:JB

cc: Liza Cabigas, BHS ADD
Henry Tarke, MHS ADD
Adult Mental Health Services (AMHS) COTRS
Children's Mental Health Services (CMHS) COTRS
Junida Bersabe, PAA