

Example 6

**Region 3 Behavioral Health Services
 Provider Enrollment Checklist
 The Bridge**

Complete yellow highlighted boxes prior to upcoming audit

Service to be provided:

Type	Therapeutic Community
Frequency	30 hrs per week of tx & recovery focused srvs
Timeframes for recording completion of:	
Client assessments	Upon admission, incl mental health screening
Initial service plans	within 14 days
Progress notes	within 2 working days
Service plan reviews	every 30 days
Discharge summaries	within 90 days
Progress notes	within 2 working days
Service plan reviews	every 30 days
Discharge summaries	within 90 days
Staffing Ratio:	1:10 DC (day) 1:10 DC (night) 1:12 Group
Supervision of non-credentialed staff:	1 hour weekly