

Attachment II**SFY11 REPORTING REQUIREMENTS**

The Board reserves the right to pass on additional reporting requirements that may be imposed by the Ohio Department of Mental Health and/or Ohio Department of Alcohol & Drug Abuse.

The Board intends to cooperate with the ODADAS and ODMH in the implementation and operation of MACSIS and HIPAA. By submitting a proposal, the Proposer consents to complying with the evolving reporting requirements of MACSIS and HIPAA (including, but not limited to Enrollments, Claims, Outcomes, Behavioral Healthcare Module and Privacy Regulations) as a condition of continued contracting.

<u>REPORT NAME</u>	<u>FORMAT</u>	<u>HOW MANY</u>	<u>DUE DATE</u>
MACSIS Enrollment Form	faxed	1 per member	daily
MACSIS Claims	Electronic		at least monthly
MACSIS AoD BH Mod reports	Electronic		at least monthly
Purchase of Service Billing/Statistical Form	Paper	1 for each service	10th of each month
Quarterly Financial Report	Paper	1 set	10/30, 1/30, 4/30 & 7/30
Quality Improvement Report	paper	1	7/30
Grievance Report	Paper	1 copy	10th of each month
Major Unusual Incident Report	Paper	1 copy	within 24 hours of incident
ADAS SAPT Block Grant Report	Paper	1 copy	monthly, within 45 days of receipt of funds

Providers participating in Title XX, Medicaid (Title XIX), Indigent Drivers, TANF and/or 484 reimbursements will have additional reporting requirements for these programs.

The Board reserves the right to withhold payments due a Provider if the Provider is not in compliance with the above reporting requirements.

Forms, policies and instructions are available upon request from the Board office.