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Behavioral Health Voucher Program (BHVP) Quality Service Review Policy

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The state reserves the right to review records for clinical necessity, program eligibility, and appropriate reimbursement. Examples that may initiate a review include but are not limited to:

- Billing or invoicing errors
- Failure to complete required data collection
- Multiple sessions per voucher invoiced in a single day
- Multiple services per voucher invoiced in one week
- Provider requests for additional sessions or extended treatment episode length
- Other reasons at the discretion of the Division of Behavioral Health

BHVP Quality Service Review Process

This represents a general guideline to the process, with reasonable modifications expected on a case by case basis. Any and all charges invoiced to the state will not be submitted for payment until the review process is complete for applicable voucher(s).

1. Program administrators identify voucher for review.
2. Program administrators contact the Provider point of contact and request records, typically via email or phone call, which may include but are not limited to:
 - a. Diagnostic assessment
 - b. Treatment plan
 - c. Progress notes
 - d. Billing records
 - e. Required program data collection instruments for that voucher
3. Provider submits requested records within **3 business days** via secure method (fax or secure email).
4. Program administrators review requested records within **5 business days** of receipt.
5. At any time during record review or at completion of the process, program administrators may request follow-up records or additional information based on findings. Additional follow-up requests may impact the timeline for completion of the review process.
6. Program administrators will contact the Provider with results of the review.

Outcomes of BHVP Quality Service Review

Possible outcomes of the BHVP quality service review may include but are not limited to:

- Verification of appropriateness of eligibility, treatment delivery, and billing for the voucher client
- Verification of completed data outcome tools as appropriate per program guidelines
- Provision of technical assistance and support by the state
- Identification of billing error(s) and development of a correction plan to remedy those errors
- Recoupment of funds by the state for charges inappropriately expensed and paid
- Determination of ineligibility to continue as a Provider in the BHVP



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