



Program Exception Attestation

Submit this signed attestation form to the attention of your Account Executive by January 1 of each year. Failure to submit this attestation may result in suspension of referrals to the program. Program exception services must comply with Federal rules and requirements for Medicaid. DHS/OMHSAS staff approve service descriptions that comply with those requirements. Providers must assure that service delivery is consistent with the DHS/OMHSAS approved service description. PerformCare Quality Improvement Staff will audit records against the service description. Payment made for services not delivered in accordance with the approved service description is subject to repayment.

I, _____ assure that _____ -
(Program Name) was approved by OMHSAS and deemed compensable using Medical Assistance Identification Number / Service Location Code _____ for _____ County(ies).

I affirm that:

1) I have reviewed the current approved service description against operations and attest that service delivery is occurring in accordance with the DHS/OMHSAS approved service description. _____
Initial Here

2) I understand that any change to the service description requires approval by PerformCare, the County(ies) and DHS/OMHSAS. Approval must be in writing. _____
Initial Here

3) I assure that documentation of services delivered is in accordance with the service description or, in the absence of such detail, in accordance with 1101.51 of the Medical Assistance Manual _____
Initial Here

4) I assure that clinical staff is receiving appropriate supervision. _____
Initial Here

5) I have attached a staff roster reflecting current staff compliment in the program and confirm that ratios remain consistent with that defined in the approved service description. _____
Initial Here

Agency Director Signature **Professional License Number & Type** **Date**

PerformCare Use:

Verified by: _____ Date: _____

Provider Notification Date: _____
via FAX (attach delivery confirmation) or Mail (attach letter)

Copy to: Credentialing File