

UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA

PROBATION OFFICE

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October 10, 2012

RE: BILLING INFORMATION

Dear Treatment Provider:

The United States Probation Office for the Northern District of California would like to thank you for your response in agreeing to provide treatment services for our clients.

Attached are copies of our billing format, which includes "Invoice A & B," and information on other documents that are utilized in the process of providing treatment services and the billing for having provided such services.

1. **When are monthly invoices to be submitted to Probation and Pretrial Services?** Invoices for services provided during the previous month are due by the tenth of the month following the month during which services were provided. Only services provided during a given month should appear on that month's invoice. If, for some reason, services provided for a past month were not reported when required, these service charges should be reported via a supplemental invoice.
2. **Program Plan (Prob 45)** - Client services are requested by the Probation Officer by completing a Probation Program Plan which must be signed and authorized by the Referral Agent. Client services should not be provided without a treatment plan from the Probation/Pretrial Services Officer.
3. **Monthly Treatment Reports (MTRs)** - A Monthly Treatment Report (MTR) must be submitted each month, for each client provided treatment services during the month. Each MTR must be signed and dated by the appropriate person. The original copy is submitted with the monthly invoice, in addition to an extra copy (which is distributed to the respective officer) and a copy should be retained in the vendor's client file.
4. **Monthly Invoice (Part "A" and Part "B")** - Enclosed is a sample of each Part "A" and Part "B" of the invoice that is submitted each month, along with the supporting documents. **Please make sure that the Drug Aftercare, Mental Health and Sex Offender monthly treatment services are billed separately.** If you have any questions, please contact me at (510)637-3603 or

Administrative Assistant, Leny Estrella at (415) 436-7568. We have also included "clean" copies, which can be duplicated or you might want to enter them into your computer.

5. **Daily Treatment Sign-In Log** - This form is utilized for each client whenever treatment services are provided to that client during the month. The client must sign the form each time that they are provided treatment and the forms must accompany the monthly invoices as supporting documentation that treatment services were received during that month by the client.

Please see the power point presentation from the Post-Award Conference under the heading "Billing" as we have noted the most common mistakes in billing. If you have additional questions after reviewing all of these documents, please do not hesitate to contact us.

To avoid delay in processing your payment, please be sure to submit your accurate invoice **on or before the 10th of the month** to:

U.S. Probation Office
c/o Lenayda Estrella
450 Golden Gate Avenue, Suite 17-6884
San Francisco, CA 94102

Sincerely,


Nicole Fairchild
U.S. Probation Officer Specialist

Attachments: Monthly Treatment Report
Treatment Services Invoice, Part A and Part B
Daily Treatment Log
Urinalysis Testing Log
Breathalyzer Testing Log
Sweat Patch Testing Log
Discharge Summary (example)
Treatment Plan (example)
No Show Notice (example)