
NOTICE OF ENROLLMENT

Multi-agency Community Services Information System (MACSIS)

To receive alcohol, drug addiction and/or mental health services paid for by the public funds, you must provide information so that the Cuyahoga County Community Mental Health Board (CCMHB) can:

- Enroll you in the County Behavioral Healthcare Plan.
- Determine if you are eligible for Publicly Funded Services, and
- Pay the provider for your services through the MACSIS computer system, which connects the Board to the Ohio Department of Mental Health, the Ohio Department of Alcohol and Drug Addiction Services and the Ohio Department of Human Services.

All information will be kept confidential, consistent with state and federal law. Name identifying information will be used only to pay for services provided to you. Demographic information will be kept without your name attached and reported to the state departments and the Ohio Health Care Data Center. This information will only be kept for up to seven (7) years after you have received services, and only demographic information will be kept after that time.

Consent for treatment or authorization for billing forms which you sign will allow the Psychiatric Emergency Department (PED) to bill the Cuyahoga County Community Mental Health Board for services which are funded through the Board. The Board and relevant state agencies have access to identifying information necessary to pay claims.

For questions or additional information, please contact your caregiver, the physician caring for you or the Client Rights Officer.

(The following attestation can be recorded on this form, with a copy of the form retained for agency records or the attestation may be noted in the file).

Name of Client: _____

I have read and explained this information to the above named individual.

Agency Staff

Date

This form is to be completed and signed by the nursing staff. A form must be completed for every client whose services will be billed to the Cuyahoga County Community mental Health Board. This form must go in the patients chart.



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A Ministry of the Sisters of Charity Health System

PATIENT LABEL