

To:	BHS Contracted Service Providers
From:	Behavioral Health Services
Date:	October 6, 2026
Title	Full Service Partnership Housing Ledger Guide

The Full Service Partnership (FSP) Housing Ledger documents member housing stays, residence details, FSP billing components, and required Transitional Rent (TR) eligibility elements. Providers must complete all required fields each month using accurate, verifiable information. The ledger is designed with built-in validations: any required cell left blank will automatically flag in red, indicating that provider action is needed before submission. Some fields auto-calculate based on dates and rates entered, while all other columns require direct entry by the provider. The instructions below identify each column or row by letter, describe the purpose of each field, and specify whether it is provider-entered or formula-calculated.

Instructions

Row 1 – Header

- **Column A – Contract Number**
 - This field captures the County contract identifier associated with the program submitting the RR ledger. Providers must enter the correct contract number to ensure the invoice aligns with the correct funding source and program authorization.
- **Column C – Program Name**
 - This field identifies the name of the contracted program responsible for the member's housing services. Enter the exact program name as listed in the contract or as used in County billing records.
- **Column E – Invoice Month/Year**
 - This field sets the billing period for the ledger (e.g., "August 2026"). Providers must enter the applicable month and year so the County can verify that the services and TR-related documentation fall within the correct reporting period.

Row 3 – Ledger Details

- **Column A – SmartCare Client ID**
 - The unique identifier assigned to the member in SmartCare. Used to match housing billing entries with clinical records.
- **Column B – Program Type**
 - Identifies the type of FSP program supporting the member (ACT, CARE, SBCM, SUD-OP).
- **Column C – Residence Type**
 - Specifies the category of housing (ILF, SRO, Recovery Residence, Apartment, Hotel, etc.).
- **Column D – Name of Facility or Residence**
 - The name of the facility where the member is residing for the invoice month.
- **Column E – Month of Service**
 - The month during which the housing service was provided.
- **Column F – Whole or Partial Month**
 - Indicates whether the member lived in the residence for a full month, a partial month, or had multiple partial placements within the same month.
- **Column G – Start Date**
 - The first date the member occupied the residence for the service month.

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- **Column H – End Date**
 - The final date the member occupied the residence for the service month.
- **Column I – Total Days of Residence (Columns H-I must be completed)**
 - Auto-calculates the total number of days the member occupied the residence based on Columns H and I.
- **Column J – Actual Dollar Cost Per Day (For move-in or move-out)**
 - Daily cost associated specifically with move-in or move-out billing events
- **Column K – Units Per Day (For move-in or move-out)**
 - Auto-calculates number of billable units per day associated with move-in/move-out charges.
- **Column L – Total Units in Month (For move-in or move-out)**
 - Auto-calculates total units billed in the service month for move-in/move-out.
- **Column M – Rate Invoiced: (\$1500 for whole month or \$40/unit for partial month)**
 - Auto-calculates rate structure used for monthly billing.
- **Column N – Rate Invoiced: Move-In/Move Out Admin Costs (\$300 per client per month)**
 - Auto-calculates rate structure used for monthly billing.
- **Column O – Invoice Amount (Subtotal)**
 - Auto-calculates subtotal before reductions.
- **Column P – Final Invoice Amount (Includes Reductions)**
 - Auto-calculates final billed amount after reductions.
- **Column Q – Member Rent Contribution**
 - Amount the member personally paid toward housing costs.
- **Column R – Rent Amount Paid by FSP**
 - Record of rent paid using FSP funds.
- **Column S – Other Subsidies Amount**
 - Any other subsidy source contributing to the housing cost (e.g., vouchers).
- **Column T – Adjustment/Note**
 - Notes or explanations tied to manual adjustments or billing clarifications.
- **Column U – Reduction Amount (Enter as positive, do not include move in/move out admin amount)**
 - Amount reduced from the invoice, entered as a positive value.
- **Column V – Number of Units to Reduce By**
 - Auto-calculates number of units to subtract from the billed total due to corrections.
- **Column W – Move In/Move Out Admin Reduction Amount (If reducing by the admin amount enter "1")**
 - Enter 1 when removing or reducing the \$300 administrative move-in/move-out cost.
- **Column X – Will the member's stay extend beyond the current month?**
 - Indicates whether the member is expected to remain housed after the billing month.
- **Column Y – Was the member referred to Housing Navigation Services? If yes, indicate MCP.**
 - Documents whether the provider referred the member to HTNS, and if yes, which MCP.

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Required for TR compliance.

- **Column Z – Does the member have a Housing Support Plan?**
 - Indicates whether the member has an active Housing Support Plan.
- **Column AA – Has the member been screened for TR?**
 - Shows whether the TR eligibility screening has been completed.
- **Column AB – If yes and does not qualify, why?**
 - Records the specific reason the member was determined ineligible for TR when applicable.
- **Column AC – If housing setting not TR allowable, identify housing type**
 - Indicates the housing setting that does not meet DHCS Transitional Rent eligibility requirements or MCP reimbursable rate caps (e.g., Board & Care, motel not serving as primary residence, congregate setting >4 people per room, non-renewable-lease units).
- **Column AD – If yes and eligibility determined, date of TR approval**
 - The date the member was approved for TR.
- **Column AE – If applicable, is program providing funding attestation post-TR?**
 - Indicates whether the program is attesting to funding after the TR benefit ends.
- **Column AF – Notes**
 - Free text field for any key information needed for invoice review or clarification.

Rows 188-191 – Roll-Up Info

- Select a dropdown in cell E188 and the corresponding data will auto-calculate. This information can be used for invoicing purposes.

Questions?

For housing ledger related questions, please contact your COR.

For Transitional Rent related questions, please contact: TransitionalRent.BHS@sdcounty.ca.gov

Thank you for your continued collaboration.

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