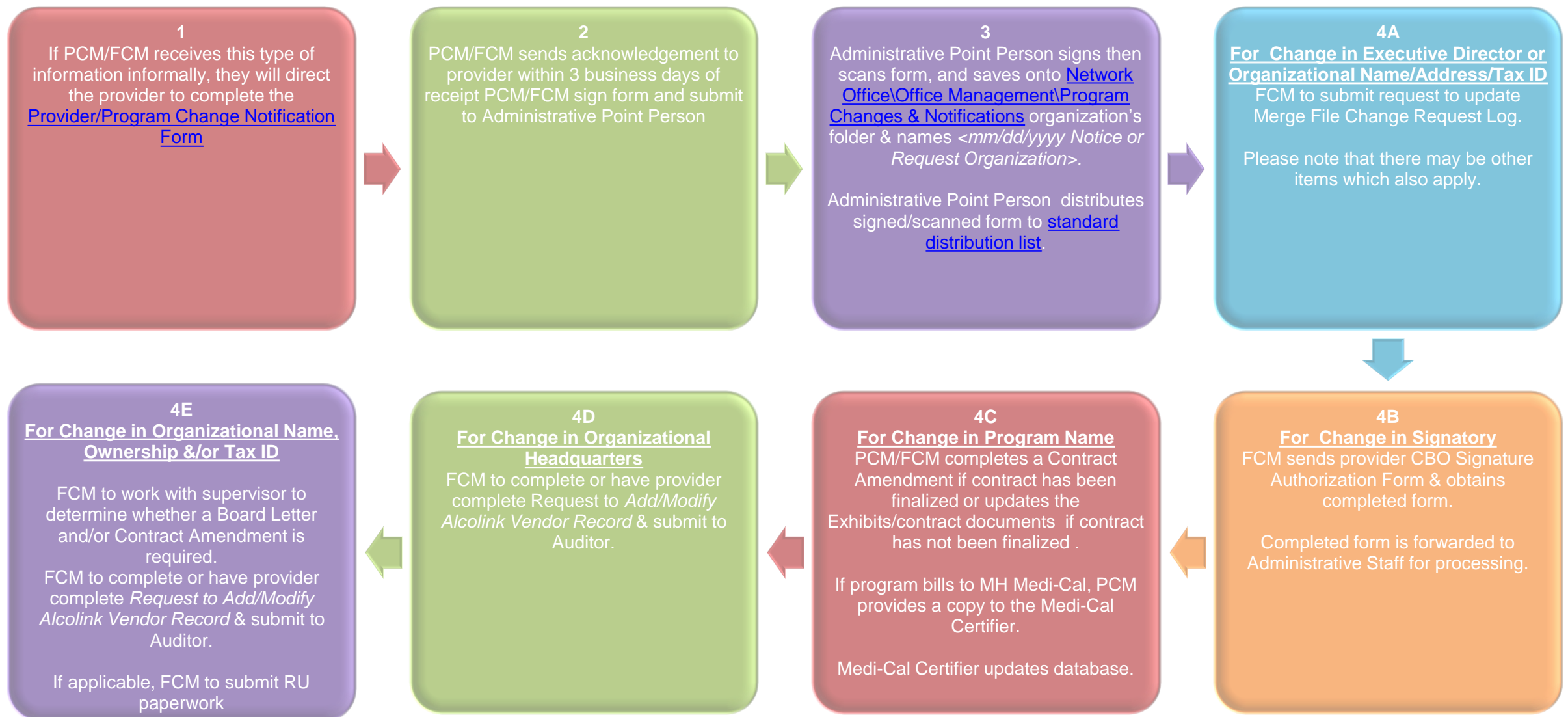
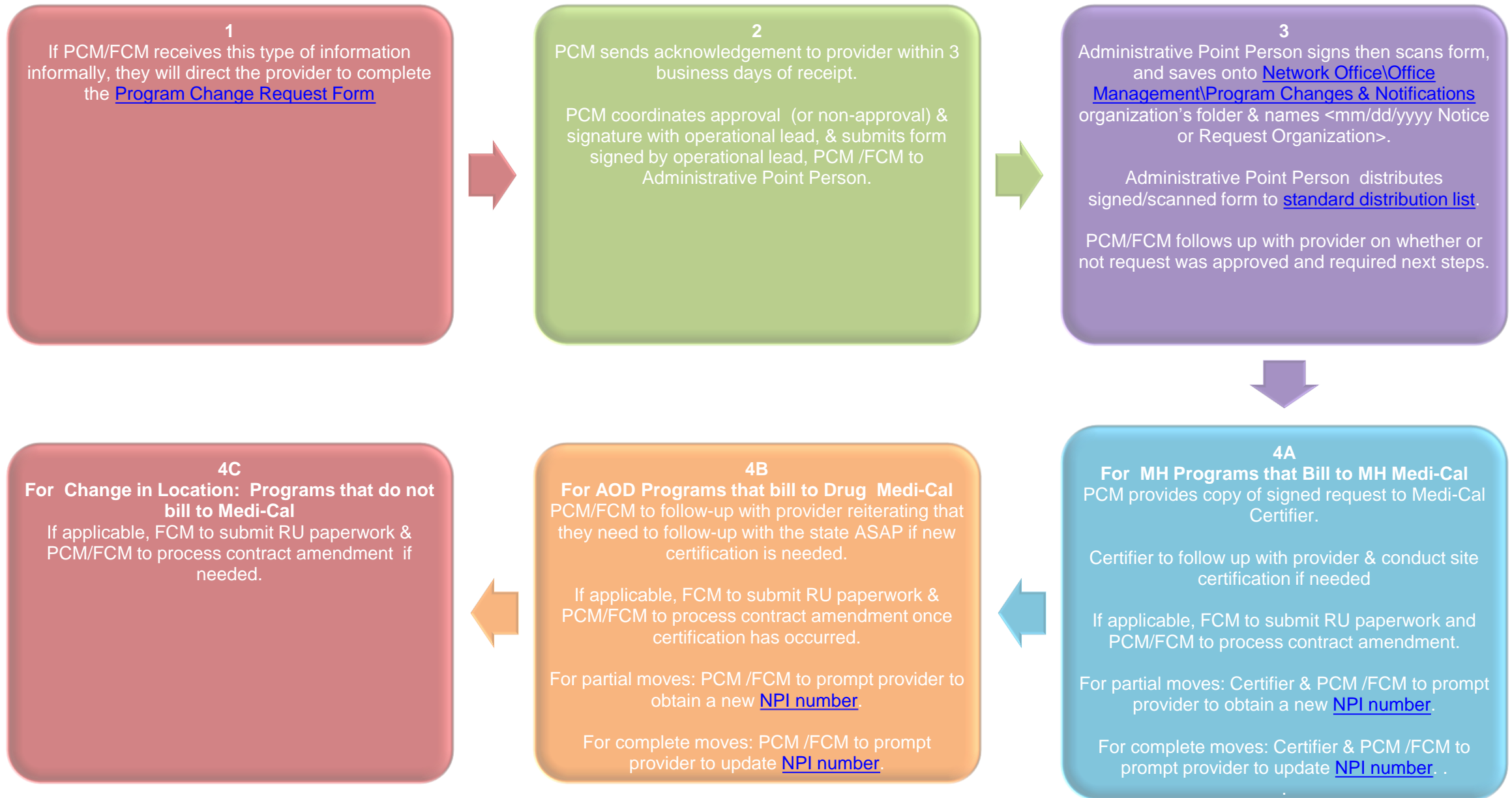


BHCS Process for Three Scenarios of Provider and Program Changes

1st Scenario - Provider notification of routine organizational changes that do not require BHCS approval – The following steps should be used to process changes in Executive Director, Chief Financial Officer, other signatory, billing contact, board member, programmatic contact, program names, organizational name, ownership, tax id, and/or organizational headquarters. Staff: [Provider Program Flow - Notification of Change](#) for more detailed information.



2nd Scenario - Provider requests for straightforward program site and/or program changes that require BHCS approval – The following steps should be used to request and process changes in in program location, hours and/or service modalities. Staff: See [Provider Program Flow - Change Request](#) for more detailed information.



3rd Scenario - Provider request for more complex program changes – The following steps should be used to request and process shifts in eligibility, program design, units of service and/or program mergers.

