



Client Assignment and Registration System
Texas Department of Mental Health and Mental Retardation

CARE-BCA1

Accounting Code Assignment

(Action Code 635)

Rev. 9/95

Action

Add:

Change:

Delete:

Component Code

Ward/Dorm/
Resid. Prog.

Accounting
Code

Active Date

Inactive Date

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Completed By: _____

Date: _____

Accounting Code Assignment (CARE-BCA1)

Field Name	Type	Contents
ACTION ADD	O/R	You must check this box if data is to be added to CARE.
ACTION CHANGE	O/R	You must check this box if data is a change to data already in CARE.
ACTION DELETE	O/R	You must check this box if data is to be deleted from CARE.
COMPONENT CODE	R	Component code.
WARD/DORM/ RESIDENTIAL PROGRAM	R	Three-digit code of ward, dorm or residential program.
BUDGET CODE	R	Budget code of ward, dorm or residential program.
ACTIVE DATE	R	Date the budget code becomes active. MMDDYY format.
INACTIVE DATE	O	Date the budget code becomes inactive. MMDDYY format.
NEW COMP. CODE	O	Component code of new component when components are combined.
BUDGET CODE EXC.	O	Y (yes) or N (no) to indicate whether the budget code is excluded from workload measures.
COMPLETED BY	R	Signature of person completing form.
DATE	R	Date form is completed.