



Finance Services Division

Provider Update

Daniel Deniz, Division Chief





Roll-up Services Billing Reminder

- Under CalAIM, outpatient services are required to be “rolled-up” into one service if the same service was delivered to the same patient on the same day by the same performing provider more than once.
 - For example, a performing provider may render 60 minutes of recovery services in the morning and an additional 30 minutes of recovery services in the evening to the same patient. The agency should submit one claim for 90 minutes of recovery services.*
 - DHCS considers a service a duplicate if the following elements are the same as another service already approved: 1) patient CIN, 2) performing provider NPI, 3) procedure code and modifiers, and 4) date of service.
- The exceptions to this requirement are:
 - Sign language and oral interpretive services (T1013)
 - Interactive complexity (90785)
 - Health behavior interventions for the family without the patient present (96170 and 96171)
 - Group counseling (H0005)
 - Patient education with HQ modifier (H2014:HQ)

**Note the requirements of the midpoint rule, on the next slide.*



Roll-up Services & Midpoint Rule Billing Reminder

- When multiple services are provided to the same patient, on the same day, by the same practitioner, with the same service code, these should be rolled up and billed as one service to SAPC as noted on the previous slide.
- DHCS uses AMA rules, which states that each service must meet the midpoint rule **independently** to qualify to be included in the billing as a roll up. Units billed should not be based on the combined total duration time but on each individual service duration time meeting the midpoint rule.

Example 1	Service 1 = 18 mins (meets midpoint rule) Service 2 = 7 mins (does <u>not</u> meet midpoint rule)	Combined Total Duration: 25 mins <u>Allowable Units Billed: 1 unit</u>
Example 2	Service 1 = 9 mins (meets the midpoint rule) Service 2 = 8 mins (meets the midpoint rule)	Combined Total Duration: 17 mins <u>Allowable Units Billed: 2 units</u>

Finance Services Division Update

Contract Utilization Monitoring – DMC and RBH

- Based on APPROVED PAYMENT amounts.
- Reconcile any disallowances.
- Should not include:
 - Transitional Payments
 - Capacity Building Payments
- Confirm Contract Amount to determine accurate percentage rate.

Finance Services Division Update

Contract Utilization Monitoring – DMC and RBH

- Accurate and Timely Tracking
 - Establish cost centers per Level of Care.
 - Submit claims and paper invoices by the 10th of every month.
 - Timing may impact your numbers & SAPC's numbers.
 - Download your RA from SFTP and use to reconcile numbers.
 - Contact Finance for assistance: SAPC-Finance@ph.lacounty.gov

Finance Services Division Update

Contract Utilization Monitoring – DMC and RBH

- Billing for Allowable services
 - MSO Provider Config Report 2023+
 - Review for Contracted, Configured, and Approved Services

The screenshot shows the 'myDay' system interface. At the top, there are navigation tabs: 'myDay', 'Claims Adjudication', 'Sage Helpdesk', 'Financial + Clinical LPHA', and 'All Docs/Chart'. A search bar contains the text 'MSO Provider|' with a red arrow pointing to it. Below the search bar, there are filters for 'All 2', 'Clients 0', 'Staff 0', and 'Forms 2'. A table titled 'Forms' is displayed with the following data:

Undock	Name	Menu Option
	MSO Provider Configuration Report	/ Avatar PM /
	MSO Provider Config Report FY2023+	/ Avatar MSO

A red arrow points to the 'MSO Provider Config Report FY2023+' row in the table.

Finance Services Division Update

Contract Utilization Monitoring – DMC and RBH

Review the Primary Services

- Is this a service that your agency currently provides?
- Is this an appropriate and needed service?
- Have I billed for this?

Avatar NX Report Viewer 2023.07.00 [Close Report](#)

Print Report Export

Find... 1 of 2199 100%

SAP CRYSTAL REPORTS

Group Tree Main Report

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MSO Provider Config Report FY2023+
Date Parameters: 7/1/2023 to 6/30/2024

Proc Code	Discipline Code	Discipline Value	Eff. Date	Exp. Date	Fee Amt	Age Min	Age Max
3 PRIMARY SERVICES Tier 3							
PRIM 1000 S. Fremont blvd. 4th floor					Perinatal		
PGM.0001							
ASAM .5							
90785:U7	10	Registered SUD Counselor/Other Prov	7/1/2023	6/30/2024	16.50	0	99
90785:U7	11	Certified SUD Counselor	7/1/2023	6/30/2024	16.50	0	99
90785:U7	12	Physician (MD or DO)	7/1/2023	6/30/2024	16.50	0	99
90785:U7	13	Nurse Practitioner (NP)	7/1/2023	6/30/2024	16.50	0	99
90785:U7	14	Physician Assistant (PA)	7/1/2023	6/30/2024	16.50	0	99
90785:U7	15	Registered Nurse (RN)	7/1/2023	6/30/2024	16.50	0	99

Finance Services Division Update

DMC FY19-20 Cost Reports

- First Cost Reports impacted by the COVID-19 Emergency
- One (1) Year = Two (2) Reports
 - NON-COVID Period: July 2019 – February 2020 (was due November 13, 2023)
 - COVID Period: March 2020 – July 2020 (was due February 2, 2024)
- Reminder: COVID Cost Payments
 - Costs < Payments = **Recoupment**

Finance Services Division Update

Capacity Building: Fiscal & Operational Efficiency – Accounting Infrastructure

- 3A-1 Accounting Systems & Capacity (\$10,000 - \$20,000):
 - Purchase or upgrade of software & technology to help monitor and manage expenses and revenue.
 - Accounting or business courses to increase organizational capacity. Formal training(s) or course(s) in non-profit organization management.
 - Enrollment and participation in non-profit organizations (Center for Non-Profit Management, California Association of Non-Profits, etc.).
 - Development of tools and systems that capture info needed for revenue and expenditure tracking.

DEADLINE: MARCH 31, 2024



Finance Services Division Update – Contact

Questions and/or More Information

SAPC-Finance@ph.lacounty.gov

(626) 293-2630