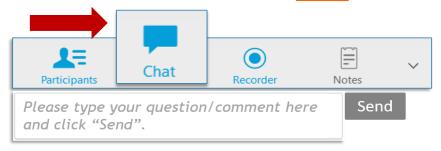
## Private Hospital Directed Payment (PHDP) Information Exchange Forum



Thursday, January 17th, 2019

Everyone is automatically **muted**... Please communicate via the **CHAT** feature



#### **Agenda**

#### 1. Introduction

Eddie Calles, Senior Director, Network Development Tim Reilly, Financial Consultant

#### 2. PHDP Claim and Encounter Correction

Greg White, Director, Healthcare Analytics

#### 3. L.A. Care Timeline

James Alvarez, Program Manager, Enterprise Quality Management

#### PHDP Claim and Encounter Correction

Greg White, Director, Healthcare Analytics

#### 5. Q&A forum

### Introduction

Eddie Calles, Senior Director, Network Development



#### **PHDP Background**

- Phase II:
  - Service period: January 01, 2018 June 30, 2018
  - Encounters due to DHCS: June 30, 2019
  - Estimated payment to Plans: March 2020

### Recap - PHDP Phase I

Greg White, Director of Healthcare Analytics



#### **Lessons Learned – Phase I**

- Communication path should be streamlined.
  - Please send your questions/concerns to: <a href="mailto:PNMProjects@lacare.org">PNMProjects@lacare.org</a>
- Findings of one provider should be shared with all providers.
- Create comprehensive FAQs

### sFTP Access

James Alvarez, Program Manager, Enterprise Quality Management



#### L.A. Care sFTP Access

- A <u>Unique</u> (Different than what you currently use) secure connection using an sFTP protocol must be established with L.A. Care to send and receive encounter data. To do this, L.A. Care will need a static IP address that we will use to grant permissions to the site. If you do not currently have one, your Internet provider should be able to set one up for you.
- In order to set up an sFTP account with L.A. Care, contact your L.A. Care Account Manager with the following information:
  - 1. Provide the static IP address
  - 2. Provide the contact information for the POC who will be responsible for sending and receiving the encounter data on the sFTP site
- Once received, credentials to access the sFTP site will be granted to your POC and we will verify that: 1) your ability to send data on the sFTP site and 2) it can be accessed by L.A. Care.

#### Status: Hospitals without sFTP setup

| Hospital   | Hospital System                               |  |
|--|---|--|
| Garfield Medical Center  | AHMC  |  |
| Foothill Presbyterian Hospital - Johnston Memorial California Hospital and Medical Center - Los Angeles Glendale Memorial Hospital and Health Center St. Mary Medical Center | Citrus Valley Health Partners  Dignity Health |  |
| Centinela Hospital Medical Center  |   |  |
| Encino Hospital Medical Center<br>La Palma Intercommunity Hospital<br>San Dimas Community Hospital   | Prime Healthcare Services                     |  |
| Sherman Oaks Hospital  |   |  |
| Providence Holy Cross Medical Center   |   |  |
| Providence Little Company of Mary - San Pedro  |   |  |
| Providence Little Company of Mary - Torrance   |   |  |
| Providence Saint John's Health Center  | Providence Health Systems                     |  |
| Providence Saint Joseph Medical Center   |   |  |
| Providence Tarzana Medical Center  |   |  |
| Lakewood Regional Medical Center Antelope Valley Hospital  | Tenet Healthcare/Conifer                      |  |
| Casa Colina Hospital and Centers for Healthcare Children's Hospital of Los Angeles   |   |  |
| Martin Luther King Jr. Community Hospital  |   |  |
| Silver Lake Medical Center   |   |  |
| Torrance Memorial Medical Center   |   |  |
| West Covina Medical Center   |   |  |
| Methodist Hospital of Southern California  |   |  |

### **Edifecs Implementation**

Greg White, Director, Healthcare Analytics



#### **New Encounter Application Impact on Data Submissions**

- L.A. Care is implementing an advanced new encounter processing tool in March 2019; however, we will not use it for processing data until June 2019 in order to allow for providers to submit corrected data as much as possible.
- A schedule for data to be submitted to L.A. Care, in order to make it to DHCS by June 30th, 2019, will be distributed in the next week. We can discuss the tentative dates for planning purposes today, but deadline requirements are still being finalized.

# PHDP Claim and Encounter Correction

Greg White, Director, Healthcare Analytics



#### **Top Errors and Recommendations**

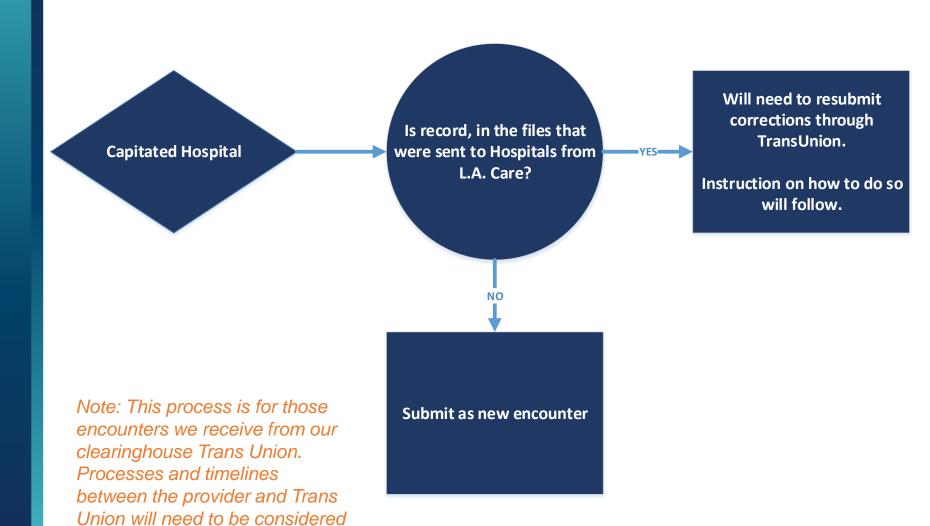
- Many of the top errors in Phase II are similar to those in Phase I.
- Providers should follow the same process to correct them.

| Error<br>Code | Error Description   | Responsible<br>Party | Trading Partner Recommendations   |
|---------------|---|----------------------|---|
| H51082        | ICD-10 code must be coded to the highest specificity.                         | Submitters           | Submitters are advised to resubmit encounters with this edit by providing the ICD-10 codes coded to the highest specificity.  |
| H51000        | The Procedure Code is not a valid CPT or HCPCS Code for this Date of Service. | Submitters           | Submitters must resubmit the failed encounters<br>by providing appropriate procedure codes for<br>the dates of service. If it's a local code, please<br>resubmit by cross walking to the national code. |
| H51102        | Invalid NUBC Revenue Code   | Submitters           | Encounters must be re-submitted with valid NUBC revenue codes (4 bytes).  |
| H51106        | Invalid NUBC Condition Code.  | Submitters           | Encounters must be re-submitted with valid condition codes.   |
| H54271        | ICD-10 Codes can not be duplicated.   | Submitters           | The encounters must be resubmitted without duplication of ICD codes.  |

#### **Top Errors and Recommendations (cont.)**

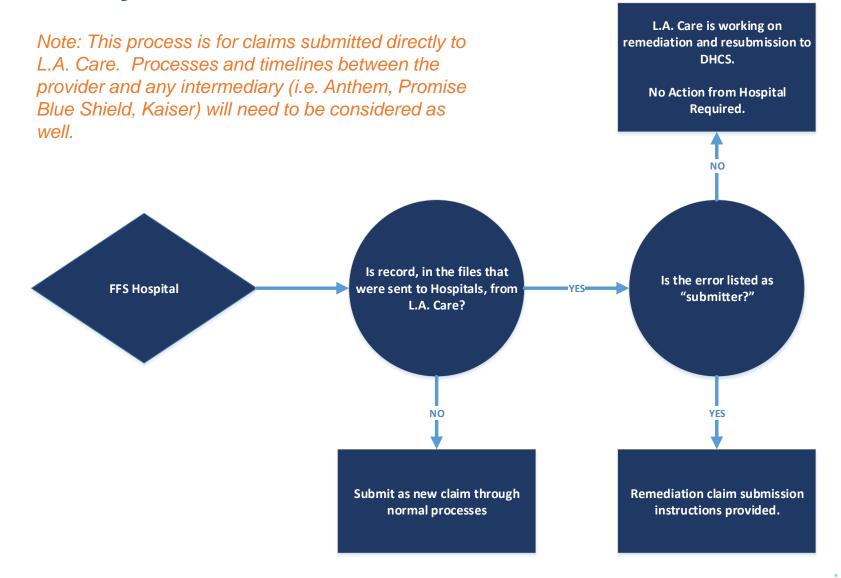
| Error<br>Code | Error Description   | Responsible<br>Party | Trading Partner Recommendations   |
|---------------|---|----------------------|---|
| H20759        | NDC Code value is too long. Must be a 5-4-2 formatted code. Spaces and hyphens are not allowed.   | Submitters           | Encounters must be resubmitted with valid NDC codes. These encounters failed as NDC codes were too long. NDC code must be a 5-4-2 formatted code without the hyphens (11 digits only).    |
| H20760        | NDC Code value is too short. Must be a 5-4-2 formatted code without the hyphens (11 digits only). | Submitters           | Encounters must be resubmitted with valid NDC codes. These encounters failed as NDC codes were too short NDC code must be in a 5-4-2 formatted code without the hyphens (11 digits only). |
| H51061        | Procedure Modifier is not a valid CPT or HCPCS<br>Modifier Code                                   | Submitters           | Encounters must be resubmitted with valid modifier codes  |
| H20205        | Incomplete X12 loop (Example: Billing TAX ID missing, missing diagnosis codes)                    | Submitters           | Encounters must be resubmitted with missing information such as Billing Provider Tax information, principal Diagnosis codes, or Other insurance coverage details                          |

### Decision Tree for Capitated Encounters Resubmission to TransUnion



as well.

#### **Decision Tree for FFS Claim Resubmission Directly to L.A. Care**



### Process for submitting corrected FFS Claims directly to L.A. Care

- Submit all corrected claims in one batch
- Use the appropriate bill type ending with '7' in Loop 2300 / Segment CLM5-3
- Authorization field [Loop 2300 REF G1] must state 'PHDP'
- If complete information is not provided, the replacement claim will be denied with the following information: Missing/ Incomplete / Invalid replacement claim information.
- Deadline to submit corrected claims to L.A. Care is to be determined.

### **Contract Flagging**

James Alvarez, Program Manager, Enterprise Quality Management



#### **Contract Services Flagging**

- DHCS has asked Plans / Hospitals to report the contract status for each line in their December 2018 volume chart for Phase I.
- Plans must identify whether the contract status was:
  - Contracted
  - Non-Contracted
  - Hospital to Hospital

#### **Contract Services Flagging Process**

- L.A. Care is in process of flagging the services and will be distributing files to the Hospitals starting on January 18<sup>th</sup>, 2019.
- Hospitals have until January 25<sup>th</sup>, 2019 to review and let L.A. Care know if there are any issues.
- Your feedback is only required if:
  - You have questions and/or concerns about contract status
  - You are adding an "H" value (Hospital to Hospital), as opposed to either a "C" (Contracted) or an "N" (Non-Contracted)
- L.A. Care will submit one (1) consolidated file of all flagged services to DHCS by February 1<sup>st</sup>, 2019.
- This process will be repeated again in March 2019.

### Phase II Webinar Schedule

James Alvarez, Program Manager, Enterprise Quality Management



#### Phase II Webinar Schedule

- L.A. Care will host bi-weekly conference calls beginning February 6<sup>th</sup>, 2019 through the end of May 2019, as concerns arise.
- Please email <a href="mailto:PNMProjects@lacare.org">PNMProjects@lacare.org</a> should there be additional contacts you'd like added to our PHDP-related distribution list.

### **Q&A Forum**



#### **Questions?**

Everyone is automatically muted... Please communicate via the <a href="#">CHAT</a> feature



- At this time, we will begin taking questions beginning with those in the room. For those joining via WebEx, please use the chat function to submit your questions. Please provide your full name and hospital's name when posing a question.
- We will read the question aloud and answer accordingly.

#### **Questions**



- If there are any questions we are not able to address during this forum, we will prepare and distribute a "Frequently Asked Questions" (FAQ) sheet as items are submitted and compiled.
- Complex questions will be addressed by the appropriate subject matter expert.
- As a reminder, all questions related to PHDP should be sent to PNMProjects@lacare.org.