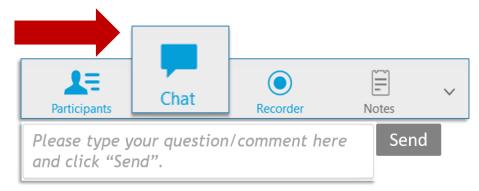
Private Hospital Directed Payment (PHDP) Check-In Call



Thursday, October 17th, 2019

All participants are **muted** upon entry... Please communicate via the **CHAT** feature



Agenda

Introduction & Meeting Purpose

James Alvarez, Program Manager, Enterprise Quality Management

PHDP Timeline

James Alvarez, Program Manager, Enterprise Quality Management

Encounter Rejection Files

James Alvarez, Program Manager, Enterprise Quality Management

4. PHDP Program Payments

James Alvarez, Program Manager, Enterprise Quality Management

Contract Services Flagging

Christopher Legaspi, Oversight and Monitoring Business Analyst III, Provider Network Management

PHDP Claim and Encounter Correction

James Alvarez, Program Manager, Enterprise Quality Management

Questions & Answers (Q&A)

PHDP Timeline



PHDP Reminders

 The Encounter Submission Timeline for 07/01/2018 to 12/31/2018 Service Period is:

Activities	End Date
Deadline to Request Assistance from L.A. Care Health Plan (L.A. Care) on Rejected Claims Data	Thursday, 10/24/2019
Deadline to Submit Fee For Service (FFS) Claims to L.A. Care (where L.A. Care is the payer)	Thursday, 10/31/2019
Deadline for all Encounter Data to have been received at L.A. Care (<i>Please Note: This date falls on the Thanksgiving Holiday so we recommend you consider submitting by Monday, 11/25/2019.</i>)	Friday, 11/29/2019
Department of Health Care Services (DHCS) Deadline to Receive Encounter Data	Tuesday, 12/31/2019

Encounter Rejection Files



Encounter Rejection Files

- On Wednesday, August 14th the Encounter Rejection Files were released to all Hospitals.
- Please ensure that your Hospital has received the Encounter Rejection Files.
- If you did not receive them, please send an email to <u>PNMProjects@lacare.org</u> informing us that you still need to receive the files.

PHDP Program Payments



PHDP Program Payments

- L.A. Care has received the money for Phase 1 and the checks are currently in process of being mailed out.
- The mailing of the checks has been a bit challenging as we have been working to collect and verify Tax IDs, Vendor IDs, addresses, etc. This has caused a bit of a delay for some Hospitals.
- As a reminder the Payment amounts were calculated based upon the criteria established by DHCS and is explained in their "SFY 2017-18 Private Hospital Directed Payment Program Volume Chart Review Toolkit."

Contract Service Flagging

Christopher Legaspi, Oversight and Monitoring Business Analyst III, Provider Network Management



Contract Services Flagging

- Hospitals were sent their files on Wednesday, October 9th.
- Hospitals should be reviewing this files and working with the applicable health plans to remediate any issues. Monday, October 21st is the final day L.A. Care will accept update contract statuses, but only via the Plan Partners, unless the records belong to L.A. Care as identified in the 'PLAN_PARTNER' column of the file.
- The Final Pass file is due to the DHCS on Friday, October 25th.
- The timeline for the Final Pass file is:

Date	Steps
Friday, September 27 th	DHCS releases final pass file. L.A. Care retrieves files and creates a file for each Plan Partner.
Monday, September 30 th	L.A. Care uploads files to Plan Partners' sFTP to populate Plan, Hospital, and Final contract statuses using feedback received during first pass by Monday, September 30 th . L.A. Care will flag the Plan, Hospital, and Final contract statuses for non-Plan Partner records.
Monday, October 7 th	Plan Partners upload files to L.A. Care with Plan, Hospital, and Final Contract statuses filled in by Monday, October 7 th .
Wednesday, October 9 th	L.A. Care compiles contract statuses from L.A. Care and Plan Partners. L.A. Care creates files for each hospital and uploads files to the established sFTP by Wednesday, October 9 th .
Wednesday October 9 th – Monday, October 21 st	Hospitals review files, identify any discrepancies, and contact appropriate Plan to remediate. For Plan Partner discrepancies, L.A. Care will not accept files or edits from Hospitals. Hospitals must work with the appropriate Plan Partner who will, in turn, submit to L.A. Care. Plan Partners submit the final pass files to L.A. Care capturing all hospitals discussions and update by Monday, October 21st.
Friday, October 25 th	L.A. Care completes compilation of all Plan data and submits to DHCS by Friday, October 25 th .



Error Code	Number	LA Care Error Description	Possible Solution
0x3939612	38,588	02 is incorrect. Expected HCPCS Code (130)	Can be due to many HCPCS related issues (i.e. local code, invalid or expired codes etc) Ensure HCPCS code is valid National code and resubmit.
0x8220001	<u> </u>	rejected in the transaction	Ignore this error- Simply a code identifying that there is an error- no action necessary by submitter
0x810050	29 216	Sub-Element HI12-01 (Code List Qualifier Code) is missing. OR Sub-Element SV202-01 (Product/Service ID Qualifier)	L.A. Care identified issue and will correct internally. No action required by FFS Claims submitter. If submitting to Plan Partner or through TransUnion, you must ensure you submit an appropriate qualifier for the Dx/HCPCS/HIPPS Code.

Error Code	Number	LA Care Error Description	Possible Solution
0x3938AF8	25 311	Segment DTP (Admission Date/Hour) is missing. It is required on all inpatient claims and some outpatient claims as defined by NUBC.	L.A. Care identified issue and corrected internally. No action required by FFS Claims submitter. If submitting to Plan Partner or through TransUnion, you must include the admission date as outlined by error description.
LACDOS	5,786	Entity not eligible for benefits for submitted dates of service	Member is not eligible for Date Of Service
0x3939339	5,300	Value of element SVD04 is incorrect. Expected value is from external code list - NUBC Revenue Code (132).	Most errors related to this code are from the use of rev code 0184. Resubmit corrected claim using rev code 0185 in place of 0184.
0x20000b1		An inpatient encounter must have qualifier DA with a Board revenue code	L.A. Care identified issue and will correct internally. No action required by FFS Claims submitter. If submitting to Plan Partner or through TransUnion, records will need to be resubmitted through existing processes AFTER November 1, 2019.

Error Code	Number	LA Care Error Description	Possible Solution
0x393933d	3,176	•	Invalid patient status code. Hospitals need to use a valid patient status code
0x3938c77	2,085	Loop 2310A is missing.	No current solution for FFS Claims submitter. If submitting to Plan Partner or through TransUnion attending provider is required
0x200001	1,301	An inpatient encounter must have at least one service line with Room and Board revenue	L.A. Care identified issue and will correct internally. No action required by FFS Claims submitter. If submitting to Plan Partner or through TransUnion, records will need to be resubmitted through existing processes AFTER Friday, November 1, 2019.
0x000CC	5,944	This encounter is a duplicate of an existing encounter	Nothing can be done from a submitter or L.A. Care perspective. DHCS shows as a duplicate

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Error Code	Number	LA Care Error Description	Possible Solution
0x001C7		Diagnosis code data value is not valid as Diagnosis Related Group (229)	If it is MS-DRG: • Populate 3 digits. • Make sure it's a valid MS-DRG code. • Resubmit as per provided processes. If it is APR-DRG: • Populate 4 digits (do not send hyphen). • Make sure it's a valid APR-DRG code. • Resubmit as per provided processes. * DHCS has updated the APR-DRG list in their system on 11/30/2018, they no longer deny the most current (SFY 2018-19) and prior 4-digit DRGs.
0x002C6		HCPCS C9399, J0131, J1170, J1885, J2405, J2704, J3490, J7297 requires an NDC code	Must resubmit with an NDC code
0x00068	132	The beneficiary shows no Medi- Cal eligibility	DHCS shows Member not eligible.

Process for submitting Fee For Service (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 Thursday, October 31st!

Questions and Answers (Q&A)



As a reminder, please send any PHDP-related inquiries to PNMProjects@lacare.org

THANK