

Private Hospital Directed Payment (PHDP) Check-In Call



L.A. Care
HEALTH PLAN®

For All of L.A.

Thursday, February 7th, 2019

Agenda

1. Contract Flagging *James Alvarez, Program Manager, Enterprise Quality Management*
2. Encounter Submission Identifiers *Greg White, Director, Healthcare Analytics*
3. Error File Origination *Greg White, Director, Healthcare Analytics*
4. Submission Deadlines *Greg White, Director, Healthcare Analytics*
5. Important Dates *James Alvarez, Program Manager, Enterprise Quality Management*
6. Q&A forum



Contract Flagging

James Alvarez, Program Manager, Enterprise Quality Management



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Contract Services Flagging – Recap

- February submission to DHCS was completed on Thursday, 01/31/19.
- Issues with the process that will need to be improved for the March (final) submission:
 - Couldn't distribute files to 50+ hospitals due to file size and no sFTP setup.
 - No workaround for this. L.A. Care will not be able to distribute our flagged services file to you.
 - Confusion regarding the file review process. L.A. Care Health Plan (L.A. Care) didn't want Hospitals to send us a data file. We wanted you to review our file, and if you disagree, contact us so that we can discuss what the differences are.
 - We are trying to avoid having to upload 80+ files into our master file and will only do this if necessary. Exception: If you have marked "H"--if you have, we will need your data file, but please let us know in advance so that we can coordinate receiving it. (This will be a problem if you don't have an sFTP site setup.)
 - Some Hospitals did not flag the services correctly, and changed the December Volume Chart format (removed columns, added columns.)
 - Confusion regarding the process. Other plans may be doing it differently.
 - Hospitals may be missing NPIs



Contract Services Flagging – Next Steps

- L.A. Care will need to attest to the accuracy of the contract services that were flagged for the March (final) submission.
- Attestation template will be available on Friday, 03/01/19.
- We will be sending out another round of files which will include Plan Partner data.
- Schedule:
 - Contract Services Flagged files will be placed on our sFTP outbound file location on Friday, 02/08/19.
 - **Hospitals will have until 03/01/19 to complete their review.**
 - This includes time for you to communicate with us if you have issues and/or need to send us a file. **Please ensure that you include: the upload, receipt, and L.A. Care review time.**
 - We will be creating our master file immediately after Friday, 03/01/19. This is a firm deadline.



Encounter Submission Identifiers

Greg White, Director, Healthcare Analytics



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**IDs Assigned Throughout the
Encounter Submission Process**

Encounter Submission Identifiers

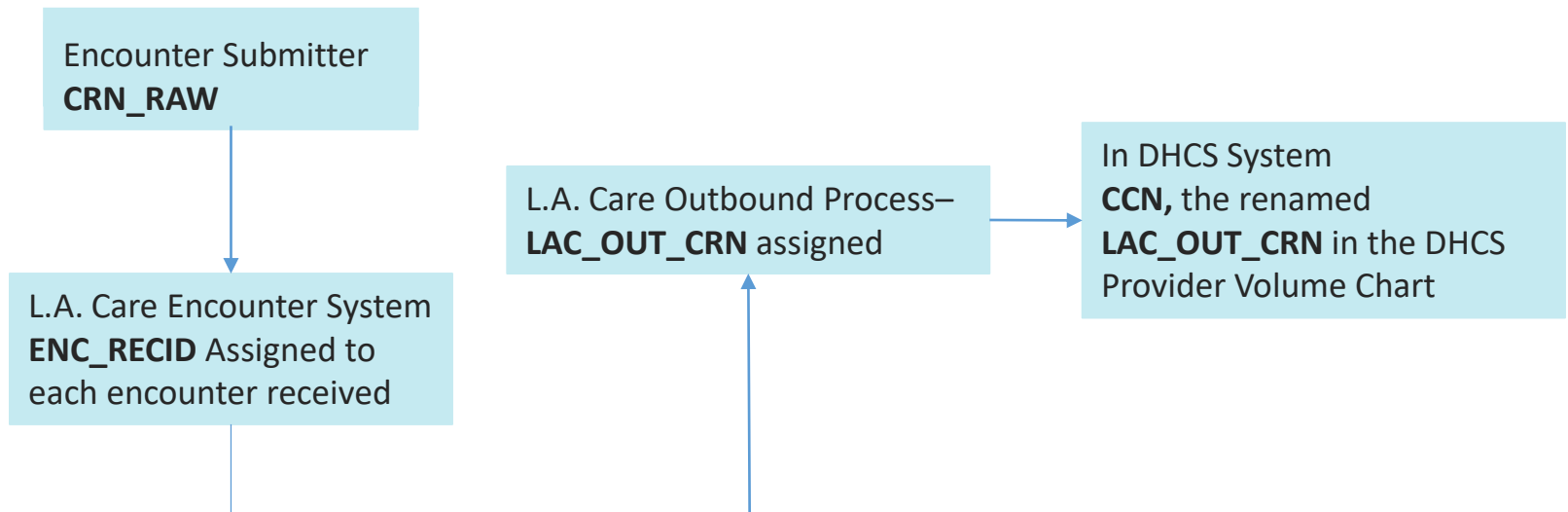
CRN_RAW – Submitters assigned claim ID

ENC_RECID – L.A. Care's identifier given to each received encounter

LAC_OUT_CRN* – Identifier sent out to DHCS.

One **LAC_OUT_CRN** can tie back to **MANY CRN_RAW**

* The **LAC_OUT_CRN** in the **DHCS Provider Volume Chart** is identified as **'CCN'**



Error File Origination

Greg White, Director, Healthcare Analytics



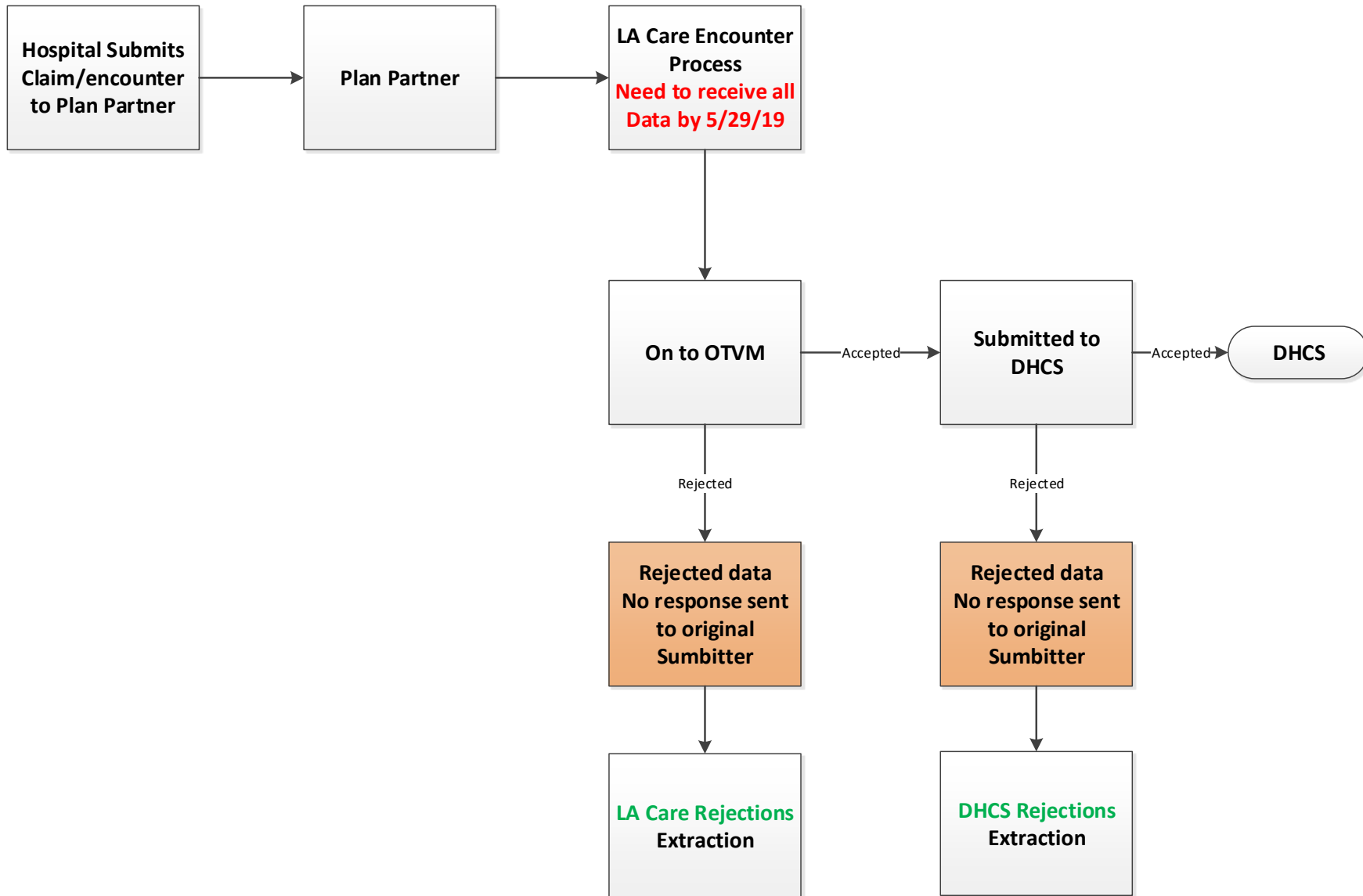
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By Submitter Type

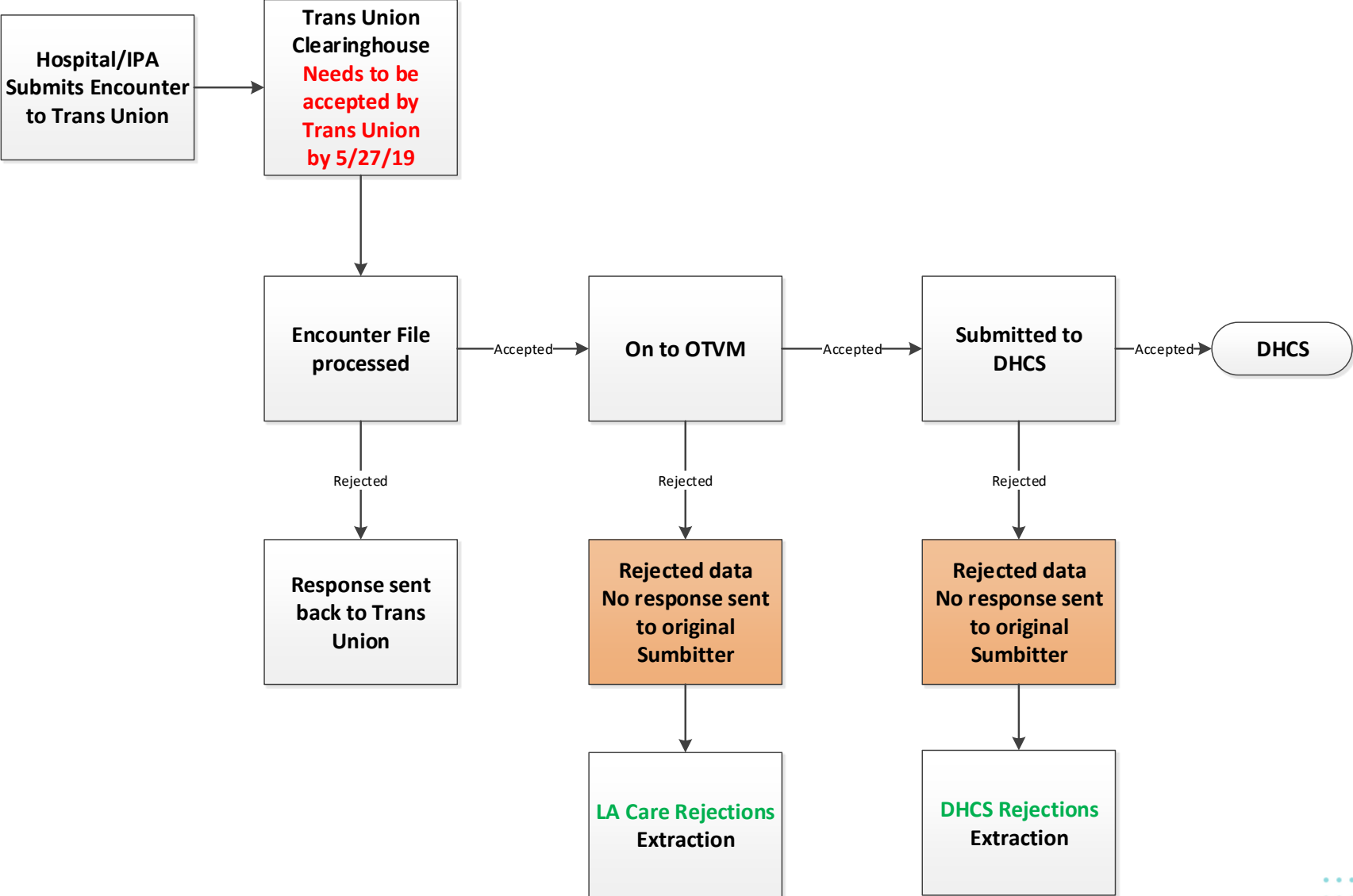
PHDP Error File Origin

Encounter Submissions by Plan Partners (Anthem, Kaiser, Promise)



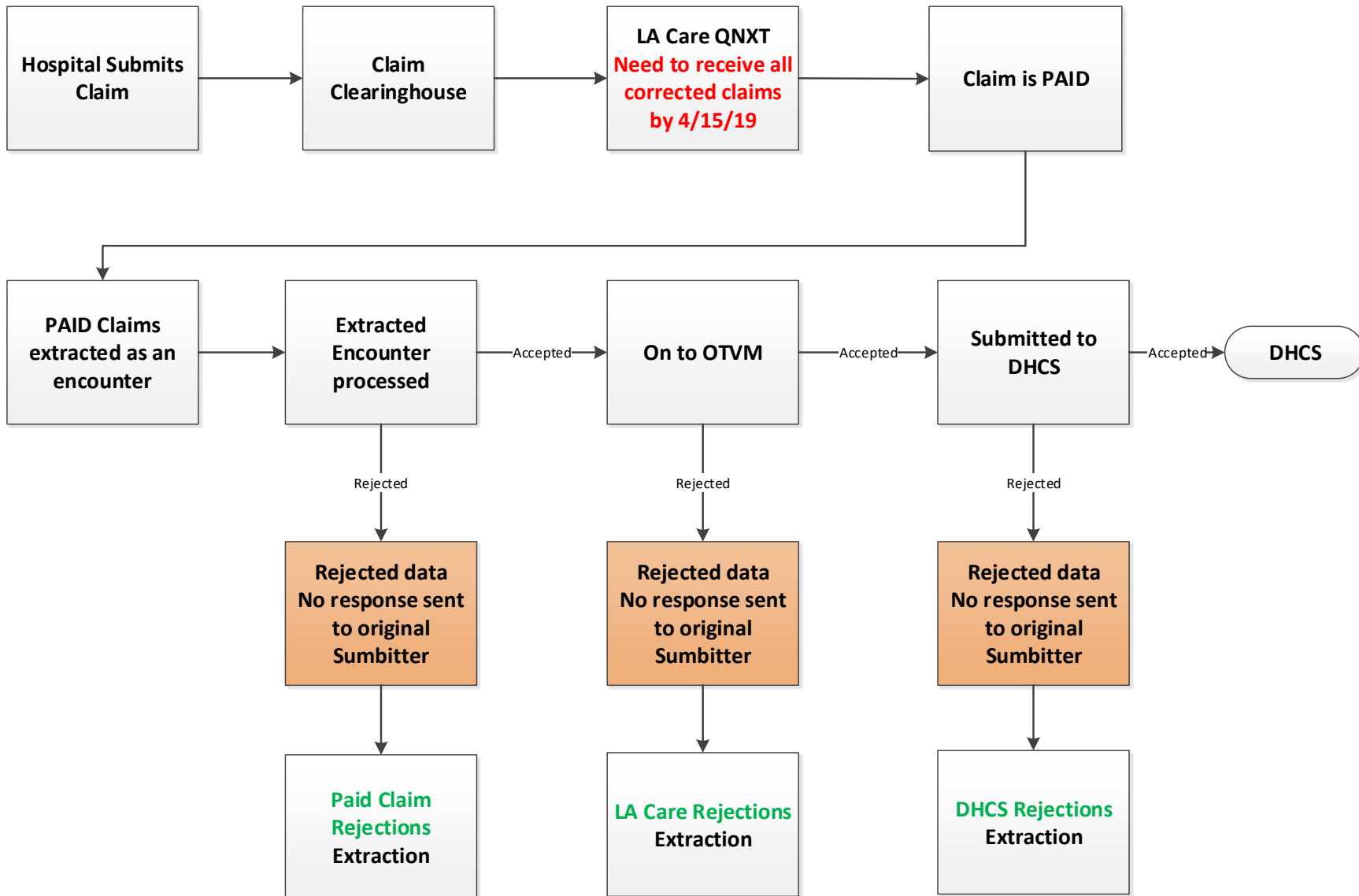
PHDP Error File Origin

Submitted Encounters Through Trans Union



PHDP Error File Origin

Submitted Claims



Error File Descriptions

- **L.A. Care Rejections**

- These are records which:
 - Were accepted on intake
 - Failed L.A. Care's encounter edits

- **DHCS Rejections**

- These are records which:
 - Were accepted on intake
 - Passed L.A. Care's encounter edits
 - Failed DHCS edits when submitted

- **Paid Claim Rejections**

- These are records which:
 - Were paid through L.A. Care's claims system (QNXT).
 - Had adequate data to pay the claim
 - Failed L.A. Care's encounter edits



Submission Deadlines

Greg White, Director, Healthcare Analytics



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By Submitter Type

Submission Deadlines*

*Dates will vary depending on your submission type

Plan Partners (Anthem, Kaiser, Promise)

In order for L.A. Care to be able to process the encounters and submit to DHCS on time, L.A. Care requires that we receive data from Plan Partners no later than Wednesday, **05/29/19**.

This is a hard deadline and cannot be extended.

This means if you submit through a Plan Partner, you will need to send data to them in time for them to process and submit to L.A. Care by this date.



Submission Deadlines*

*Dates will vary depending on your submission type

Capitated Hospitals through Trans Union

In order for L.A. Care to be able to process the encounters and submit to DHCS on time, L.A. Care requires that we receive data from Trans Union no later than Monday, **05/27/19**.

This is a hard deadline and cannot be extended.

This means if you submit through Trans Union, you will need to send data to them in time for them to process and submit to L.A. Care by this date.



Submission Deadlines*

*Dates will vary depending on your submission type

Hospitals Submitting Claims to L.A. Care

In order for L.A. Care to be able to process the encounters and submit to DHCS on time, L.A. Care requires that we receive data from Hospitals no later than Monday, **04/15/19**.

This is a hard deadline and cannot be extended.

This means if you submit through a clearinghouse or another path prior to L.A. Care receiving data, you will need to send data to them in time for them to process and submit to L.A. Care by this date.



PHDP Claim and Encounter Correction

Greg White, Director, Healthcare Analytics



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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 Code	Error Description	Responsible 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 by providing appropriate procedure codes for the dates of service. If it's a local code, please 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.

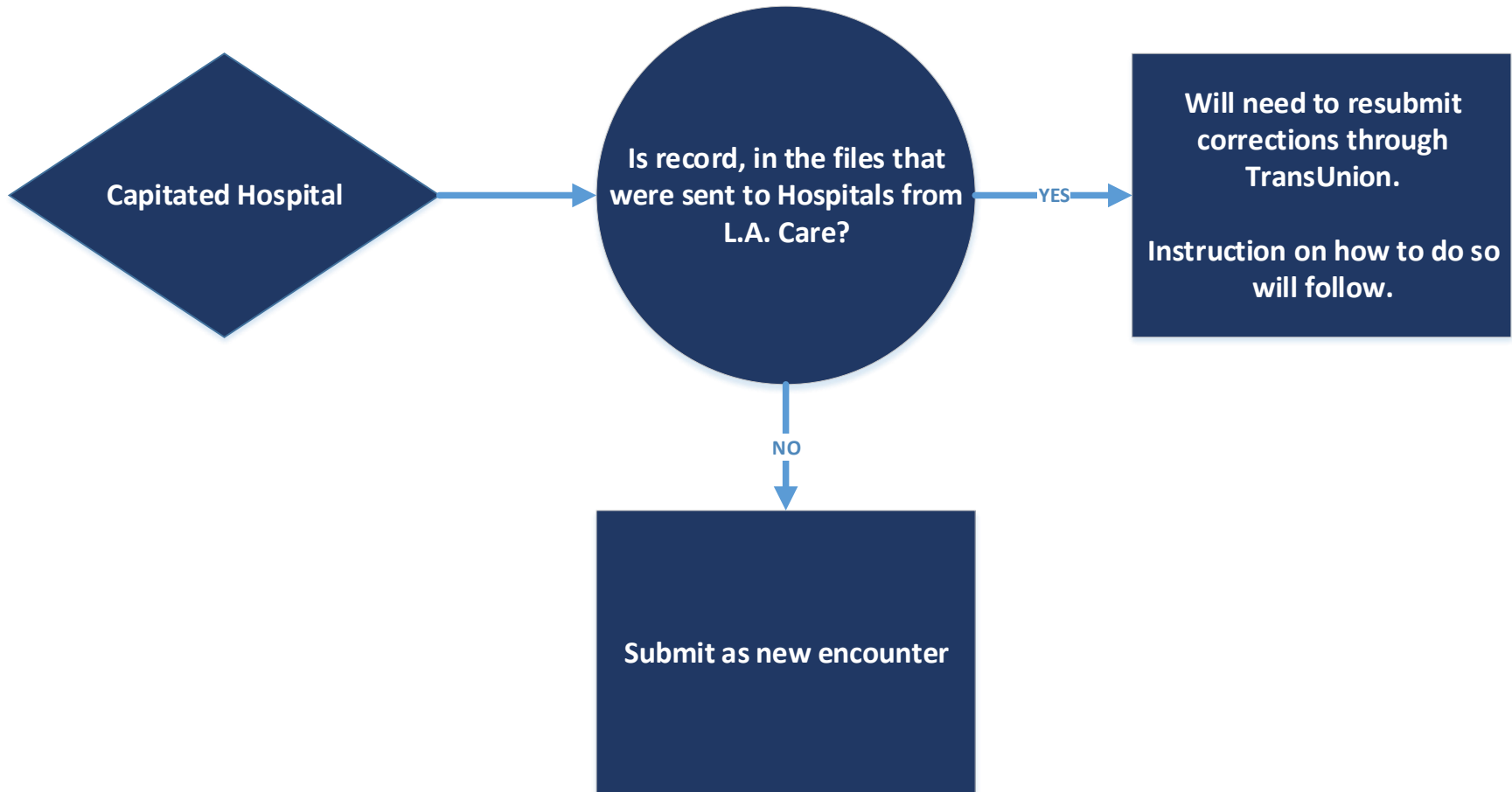


Top Errors and Recommendations (cont.)

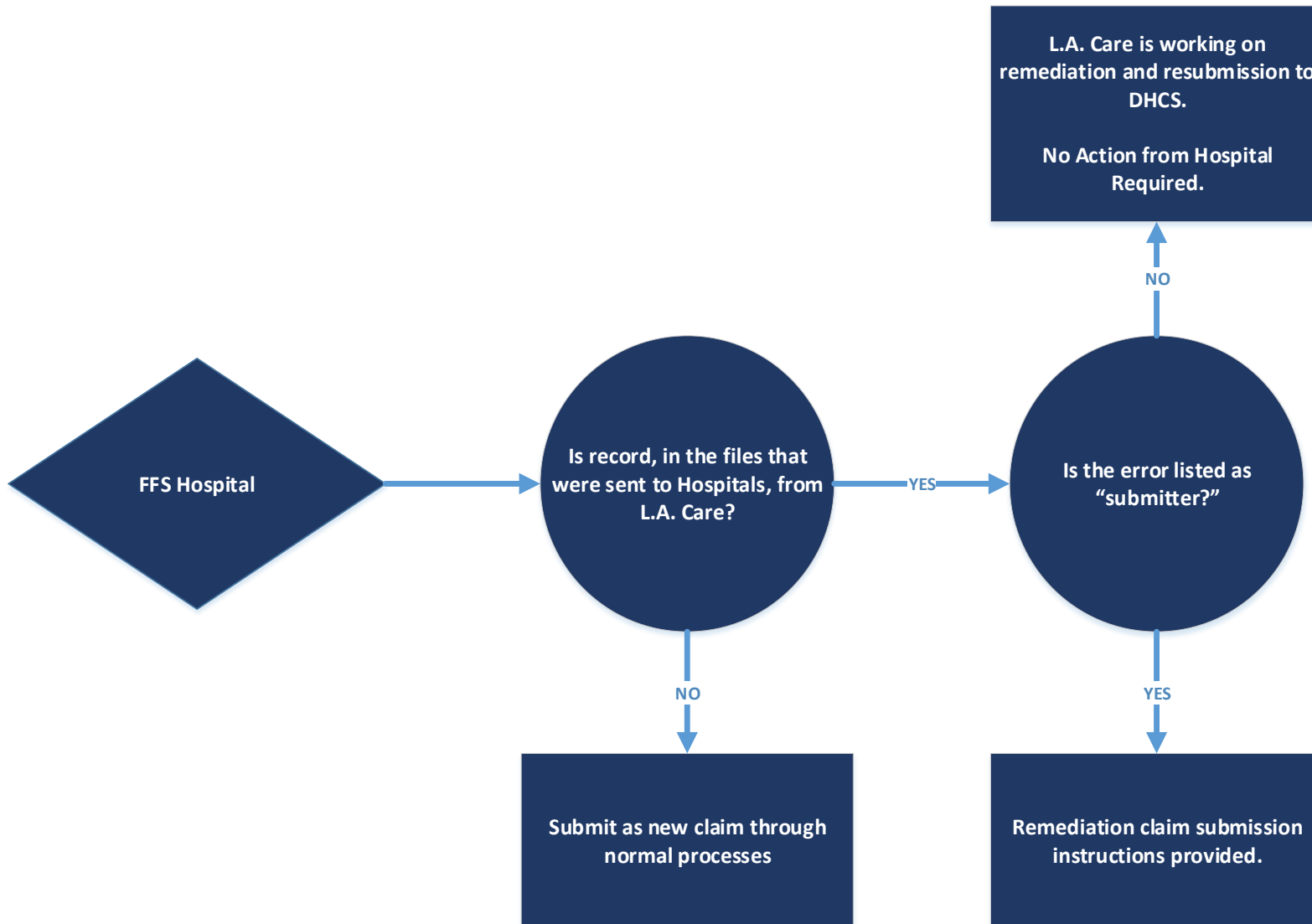
Error Code	Error Description	Responsible Party	Trading Partner Recommendations
H20759	NDC Code value is too long. Must be a 5-4-2 formatted code. Spaces and hyphens are not allowed.	Submitters	Encounters must be resubmitted with valid NDC codes. These encounters failed as NDC codes were too long. NDC 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 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



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
- The original LACARE claim ID that is being corrected MUST be in Loop 2300 / Segment REF*F8*xxxxxxxxxxx
- 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.



Important Dates

James Alvarez, Program Manager, Enterprise Quality Management



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Important Dates

- **Contract Flagging Files**

- Distribution of L.A. Care files with flagged services, including Plan Partner data, will begin on Friday, 02/08/19 (for those hospitals with sFTP sites set-up with L.A. Care.)

- **Phase II Encounter Remediation**

- Phase II file distribution will begin on Tuesday, 02/12/19.

- **Next L.A. Care PHDP Webinar**

- Thursday, 02/21/19 at 1:00 PM
- Please send any questions or agenda topics to PNMProjects@lacare.org.



**THANK
YOU!**

