

# Private Hospital Directed Payment (PHDP) Joint Plan Partner & Hospital Meeting

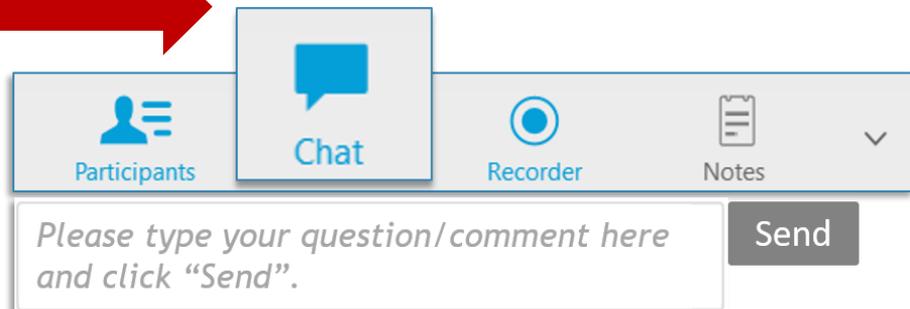


L.A. Care  
HEALTH PLAN®

For All of L.A.

Thursday, February 27<sup>th</sup>, 2020

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



Participants Chat Recorder Notes

Please type your question/comment here and click "Send".

Send

# Agenda

- Introduction

*Eddie Calles, Senior Director, L.A. Care Health Plan*

- Department of Health Care Services Update

*Tim Reilly, Financial Consultant, L.A. Care Health Plan*

- Contract Flagging

*Christopher Legaspi, Business Analyst III, L.A. Care Health Plan*

- Kaiser Permanente

*Helen Serimian, Director, Kaiser Permanente*

- Anthem Blue Cross

*Jamie Louwerens, Finance Director, Anthem Blue Cross*

- Blue Shield of California Promise Health Plan

*Ida Kwok, Director, Medi-Cal Encounter Analytics & Jerry Wang, Project Manager, Blue Shield of California Promise Health Plan*

- L.A. Care Health Plan (L.A. Care) Timeline and Reminders

*James Alvarez, Program Manager II, L.A. Care Health Plan*

- Encounter Discussion

*Greg White, Director, L.A. Care Health Plan*

- Questions & Answers



# Introduction and Meeting Purpose

*Eddie Calles, Senior Director of Network Development, Provider Network Management*



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# Department of Health Care Services (DHCS) Update

*Tim Reilly, Financial Consultant, L.A. Care Health Plan*



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# DHCS Update

- The PHDP Program is into its 2nd year and payments for the SFY 17-18, P1 have been distributed.
- Continued focus on the remediation of Encounter data and qualifying services.
- Future plans and direction of the program.

# Contract Status Flagging: Fiscal Year (FY) 18-19, Phase 1, Final Pass

*Christopher Legaspi, Business Analyst III, Provider Network Management*



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# Contract Status Flagging: Process

- The tentative release date is March 13, 2020.
- Once the Final Pass is available, L.A. Care will retrieve and create a file for each Plan Partner containing subset of records assigned to Plan Partner.
- The Plans will populate the Plan Contract Status column.
- The Plan Partners will return files to L.A. Care.
- L.A. Care will compile subsets of data from L.A. Care and Plan Partners.
- L.A. Care will generate a file for each hospital and transmit via sFTP.
- L.A. Care will notify Hospitals of the availability of their files within their L.A. Care sFTP. This communication will include the process discussed today, along with a timeline for each of these steps and the due dates.



# Contract Status Flagging: Process

- Hospitals will obtain and review file(s).
- Hospitals will submit Hospital Contract Status values to the applicable health plan.
  - If a record is identified as being assigned to a Plan Partner, L.A. Care will not accept files or edits from Hospitals nor forward files or edits to the applicable Plan Partner. Hospitals must work with the appropriate Plan Partner.
- Hospitals and Plan Partners should work to remediate any contract status discrepancies which are identified.
- Plan Partners will submit the 2nd iteration of the subset of records to L.A. Care, which will contain values in the Plan, Hospital, and Final Contract Status fields.
- L.A. Care will compile all subsets of records for each Plan Partner along with L.A. Care's data, and submit to DHCS.



# Contract Status Flagging: Items to Note

- Hospitals should reference the data provided by L.A. Care. These data sets identify the applicable Plan Partner in the “PLAN\_PARTNER” column.
- The dataset provided by DHCS does not identify the Plan Partner.
  - L.A. Care’s Plan Code, found within DHCS’ Volume Chart as “PLAN\_CD,” is 345.
  - However, records assigned to our Plan Partners will also have the Plan Code 345.
  - Refer to the “PLAN\_PARTNER” field in the data set provided by L.A. Care.



# Kaiser Permanente

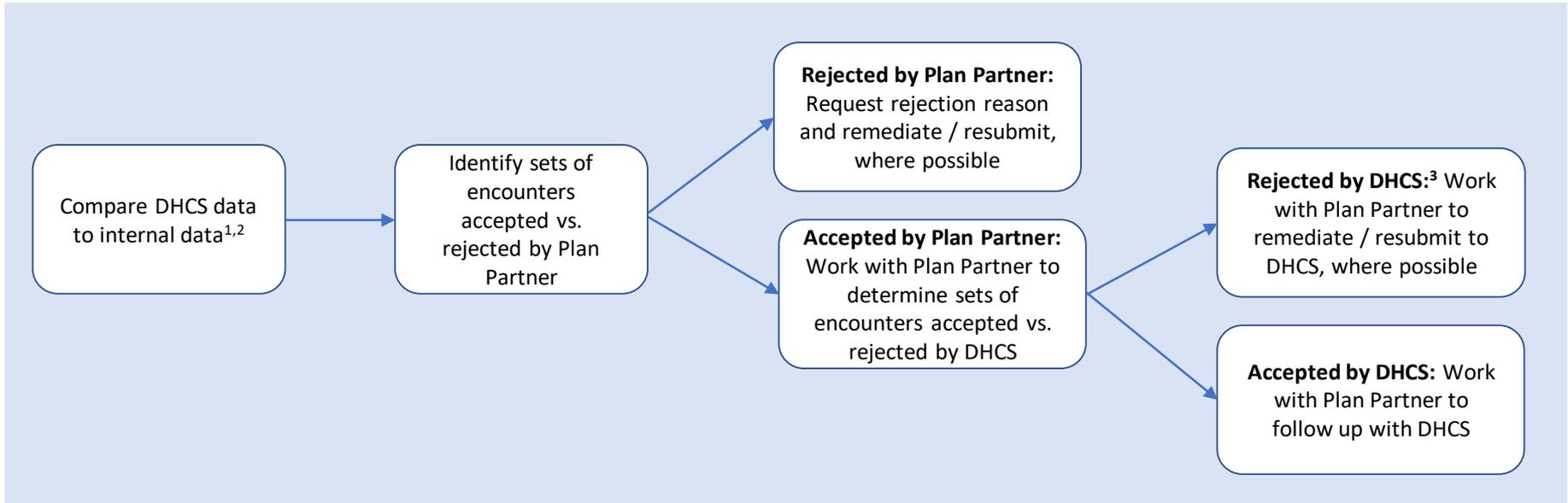
## Private Hospital Directed Payment (PHDP) Program:

## Encounters Remediation and Contract Status Flagging

**L.A. Care Joint Plan Partner / Hospital PHDP Meeting**  
Thursday February 27<sup>th</sup>, 2020

# Encounters Remediation

## Kaiser Foundation Health Plan (KFHP) Process Overview: PHDP Encounters Remediation



### Notes:

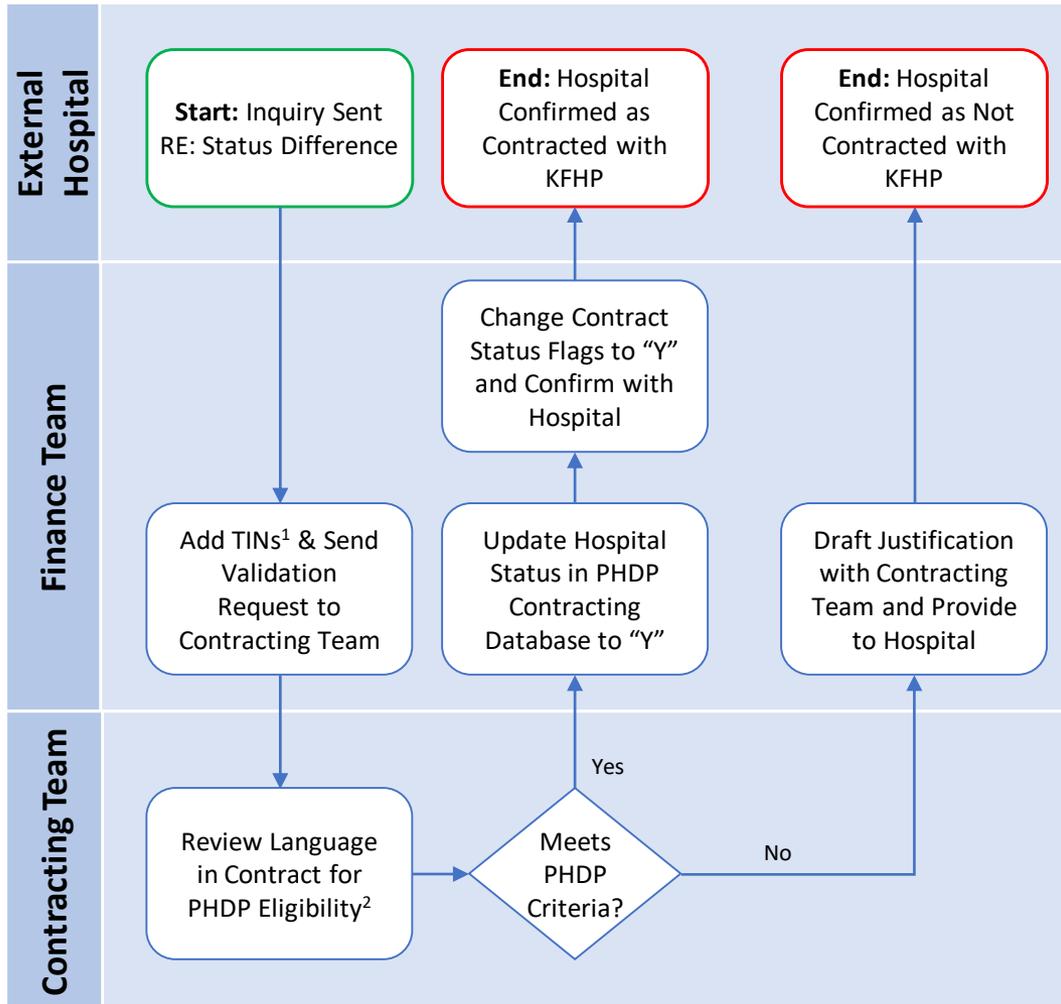
<sup>1</sup>DHCS encounter volumes have been lower than internal KFHP encounter volumes

<sup>2</sup>KFHP's PHDP team remediates member encounters for both internal Kaiser Foundation Hospitals and external hospitals

<sup>3</sup> Some Plan Partners do not have a process in place to provide data back to KFHP regarding which encounters were rejected by DHCS

# Contract Status Flagging

## Kaiser Foundation Health Plan (KFHP) Process Overview: Remediating Contract Status Flagging Discrepancies with External Hospitals



### Notes:

<sup>1</sup>When inquiring with KFHP re: contract status discrepancies, hospitals should provide KP with the TIN along with the NPI in question

<sup>2</sup>KFHP's contracting team validates whether the contract with the external facility covers:

- Medi-Cal Managed Care members;
- Was active during the dates of services; and
- Meets other criteria for PHDP eligibility

# Lessons Learned

- Let's collaborate and address issues earlier in the process.
- Kaiser's cut off time to address *encounter/flagging* issues is earlier than L.A. Care's deadline.
  - FY18/19 Phase 1 Pass 2 **Contract Status Flagging Inquiries**
    - ❖ L.A. Care due date (TBD), but Kaiser would like hospitals to reach out to Kaiser *latest 2 weeks before L.A. Care's due date*, to ensure we have enough time to address inquiries.
  - FY18/19 Phase 2 **Encounter** Issues due to KP by 3/31/20
    - ❖ L.A. Care due date is 5/29/20, but Kaiser would like hospitals to reach out to Kaiser *latest by 3/31*, to ensure we have enough time to address inquiries.
- Scheduling a call to discuss issues is easier than back and forth emails; a call can expedite the process for everyone involved.

*Let's continue to work together to make the PHDP process smoother for everyone 😊*

# Kaiser's PHDP Contact Info

- [PHDP@kp.org](mailto:PHDP@kp.org)
- Helen Serimian, Director
  - [Helen.H.Serimian@kp.org](mailto:Helen.H.Serimian@kp.org)
  - 626.405.5695
- Ashley Cohen Little, Sr. Manager
  - [Ashley.M.CohenLittle@kp.org](mailto:Ashley.M.CohenLittle@kp.org)
  - 626.429.4120
- Melinda Yanonis, Project Manager
  - [Melinda.A.Yanonis@kp.org](mailto:Melinda.A.Yanonis@kp.org)
  - 626.390.8115
- Sylvia Girgis, Project Manger
  - [Sylvia.Girgis@kp.org](mailto:Sylvia.Girgis@kp.org)
  - 626.405.6356

*THANK YOU ALL FOR YOUR CONTINUED PARTNERSHIP!!!*

# Anthem.<sup>®</sup>

# L.A. County Encounters & Volume Chart Data

Anthem does not submit encounters for L.A. County members directly to DHCS. We submit to L.A. Care who may accept, reject, pend from us and then they submit to DHCS which may accept or reject from L.A. Care.



 **So many opportunities for fall-out + poor feedback loops**

In Los Angeles county the hospital providers will receive a Volume Chart from DHCS and L.A. Care will receive a Volume Chart but, the Plan Partners of L.A. Care do not receive their own Volume Charts from DHCS and often need feedback to determine where remediation should occur (with L.A. Care, with Anthem or with Hospital).



# Anthem Process - L.A. County

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1. We recommend that providers set-up a secure SFTP site with Anthem if they have not done so.
2. We recommend hospitals reconcile the DHCS published volume chart with their hospital records and only provide Anthem with data that is not on the Volume Charts (we will communicate preferred fields and format).
3. Once we receive variances we try to identify what step in the process something fell-out:

## *Common Scenarios:*

- + Evidence of DHCS Acceptance (most likely timing but, encourage hospitals to reach out to DHCS for potential Volume Chart logic issues or not having correct NPIs).
- + Errors that can be corrected by L.A. Care or Anthem (L.A. Care provides a list of which things they will correct versus which things Plan Partners need to correct and also provides us with a list of rejections/errors).
- + Issues that need to be corrected at the Provider-level and re-submitted to Anthem.
- + We cannot find record of the claim/encounter (hospitals sometimes are not clear on whether Anthem or a delegated entity paid them).

# Observations & Lessons Learned

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- + Early partnering and collaboration is key!! Both plans and partners benefit from improving the encounters process; let's work together.
- + With > 120 contracted hospitals in California, we expected more hospitals to come to us to reconcile but noted that beyond large hospital systems, the number of individual hospitals that reconciled with us or provided contract flagging status was small.
- + Contract Status Flagging- sometimes, it is difficult for us to see which hospitals we have contracts with that have sub-contracts with other hospitals. We are happy to update our contract-status flagging when provided with evidence of a contract in place (helps support audit selections as well).
- + Everyone has resource / technical constraints (both Hospitals and Plans).
- + We had more than a few hospitals come to us late in the process. Remember that in L.A. County, the Plan Partners deadlines will be much earlier than L.A. Care's deadlines because they need time to consolidate data, accept feeds, etc.
- + If you have an issue that is not being resolved quickly escalate by scheduling a call.

# Anthem PHDP Contacts

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- Jamie Louwerens (Finance Director, CA Medicaid Health Plan)
  - [Jamie.Louwerens@anthem.com](mailto:Jamie.Louwerens@anthem.com)
- David Mosher (Operations Director, CA Medicaid Health Plan)
  - [David.Mosher@anthem.com](mailto:David.Mosher@anthem.com)
- Hope Thomas (Encounters Director, West Region Medicaid Plans)
  - [Hope.Thomas@anthem.com](mailto:Hope.Thomas@anthem.com)

## Contract Status Flagging

- Leander Boado
  - [Leander.Boado@anthem.com](mailto:Leander.Boado@anthem.com)



# Hospital Directed Payment Program

Blue Shield of California Promise Health Plan in collaboration with L.A. Care



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Promise Health Plan

# Introduction

## ➤ Jerry Wang

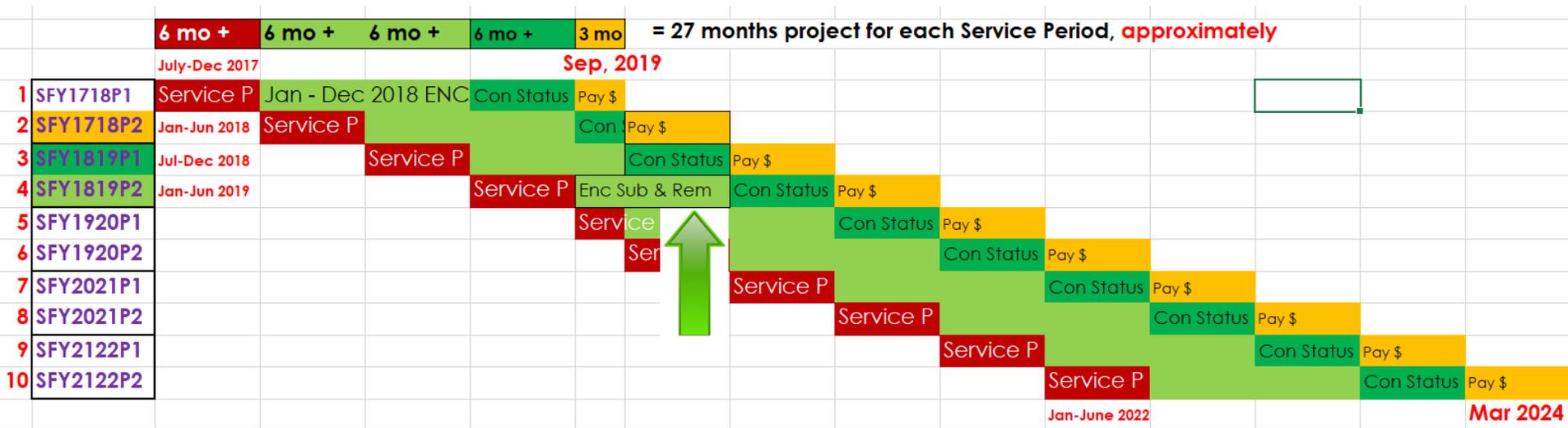
- Project Manager
- Blue Shield of California Promise Health Plan

## ➤ Ida Kwok

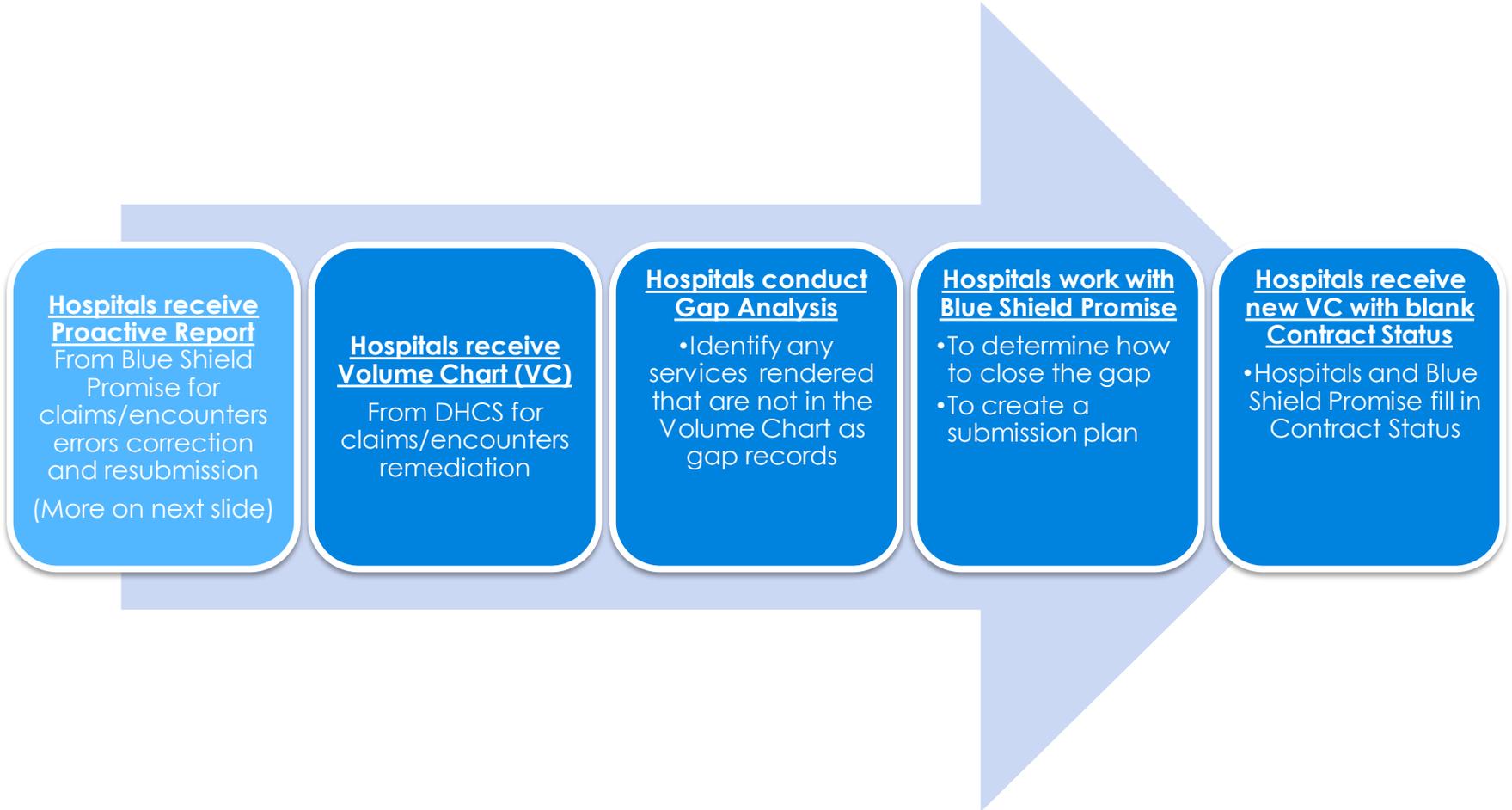
- Director, Medi-Cal Encounter Analytics
- Blue Shield of California Promise Health Plan

# Seven (7) more Encounter Remediations to go!

## Let's improve the processes and automate!



# Overall HDPP Encounter & Contract Flagging Process



**Hospitals receive Proactive Report**  
From Blue Shield Promise for claims/encounters errors correction and resubmission  
(More on next slide)

**Hospitals receive Volume Chart (VC)**  
From DHCS for claims/encounters remediation

**Hospitals conduct Gap Analysis**

- Identify any services rendered that are not in the Volume Chart as gap records

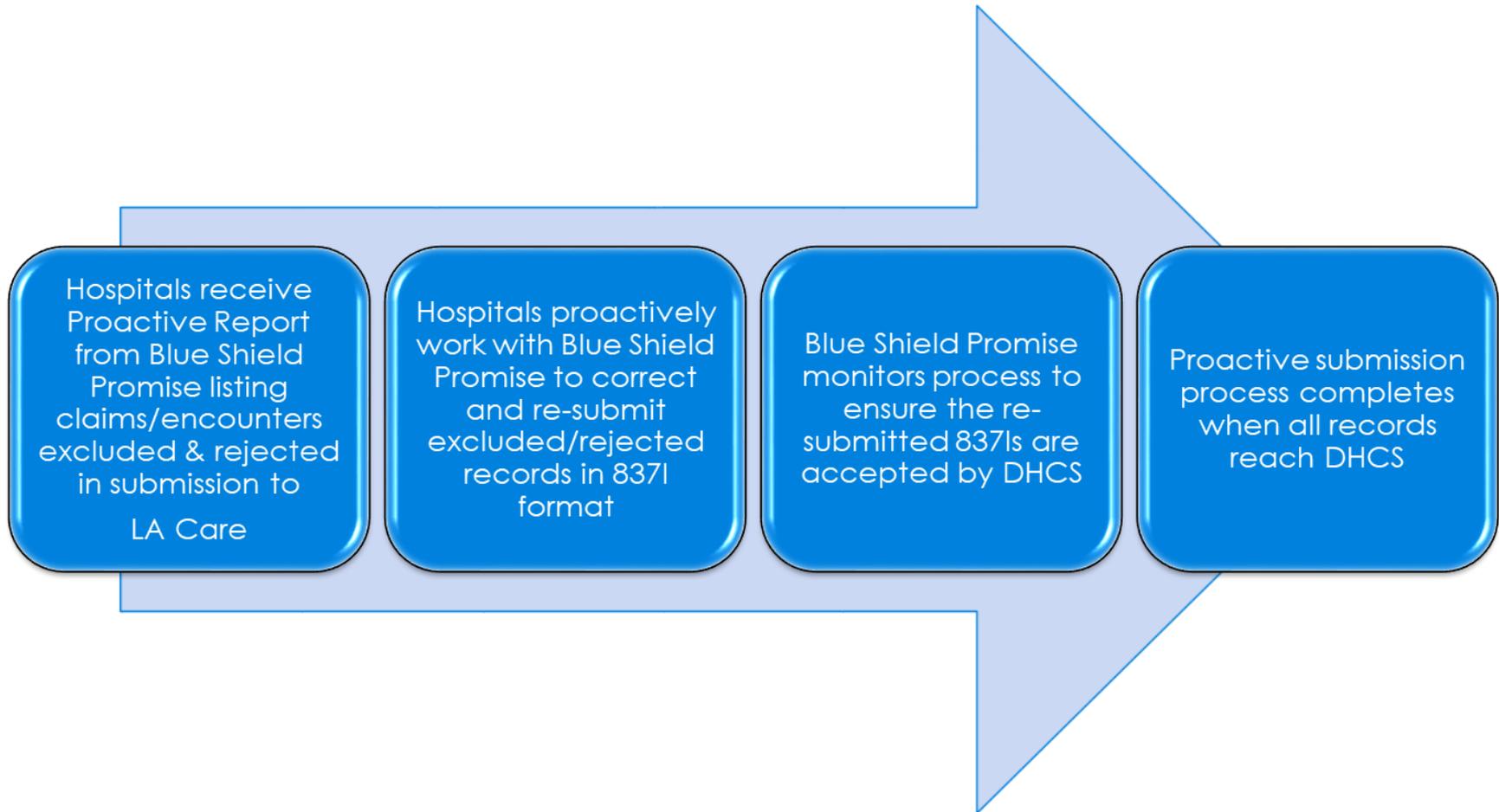
**Hospitals work with Blue Shield Promise**

- To determine how to close the gap
- To create a submission plan

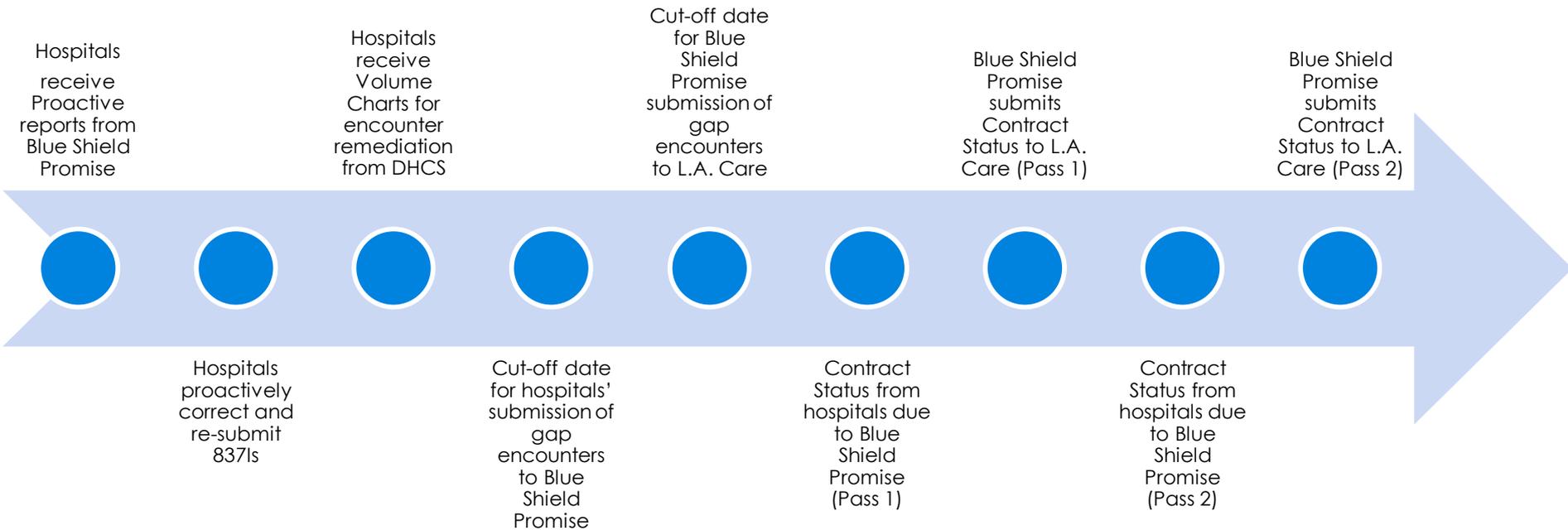
**Hospitals receive new VC with blank Contract Status**

- Hospitals and Blue Shield Promise fill in Contract Status

# Proactive Encounter Remediation Process



# Program Milestones (e.g., SFY1819P2)



# Best Practices

## 1. Encounter Submission

- Submit **all** claims/encounters to Blue Shield Promise
- Submit in a **timely** manner
- Submit **correctly** to avoid rejections
- Correct and re-submit records per error response files received from the clearinghouses
- Refer to the implementation guides and companion guides for proper submission habits in 837I file format

## 2. Gap Analysis

- Correct records identified in proactive reports from Blue Shield Promise
- Conduct your **Gap Analysis** as soon as possible after receiving the volume charts from DHCS
- Look for the following:
  - Service was rendered but claim/encounter was not submitted to Blue Shield Promise
  - Claims/encounters contained errors, but no correction & re-submission were made

## 3. Work closely with Blue Shield Promise

- **Don't wait until the last minute!**
- Understand how to correct and re-submit any previously rejected claims/encounters
- Inform us of your submission plan and dates
- Fill out your contract status on time (100% hospital response rate SFY 1819 P1 Pass1)

# Two Common Errors

## 1. Physician-Administered Drugs (PAD) data requires an accompanying National Drug Code (NDC).

- If procedure code reported in 837I is PAD, the following drug information must be populated:
  - 2410/LIN02, enter "N4"
  - 2410/LIN03, enter 11-digit NDC
  - 2410/CTP04, enter drug quantity
  - 2410/CTP05-01, enter drug measurement code
  - 2410/REF, required if involves the compounding of two or more drugs

## 2. Interim claims/encounters cannot be submitted. Final claims/encounters are required.

- 2300/CLM05-3 (Claim Frequency Code)
  - Accepted Final Status: 1 – New; 7 – Replacement; 8 – Void
  - DHCS doesn't accept interim claims/encounters (except long-term care)

# Contact Us

Blue Shield Promise Encounter Team  
Encounter\_Ops@blueshieldca.com

# Questions?

**Thank you**



Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association.

# L.A. Care Timeline and Reminders

*James Alvarez, Program Manager II, Enterprise Quality Management*



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# PHDP Timeline

- The encounter submission timeline for the 01/01/2019 to 06/30/2019 service period is:

Activities	End Date
Deadline to submit Fee For Service (FFS) claims to L.A. Care ( <i>where L.A. Care is the payer</i> )	04/30/2020
Deadline for all encounter data to have been received at L.A. Care	05/29/2020
Department of Health Care Services (DHCS) Deadline to receive encounter data	06/30/2020



# PHDP Reminders

- New e-mail address for L.A. Care's PHDP Program: [PHDP@lacare.org](mailto:PHDP@lacare.org).
- Please do not send e-mails to specific individuals at L.A. Care for PHDP matters. We may not be available to respond promptly. The [PHDP@lacare.org](mailto:PHDP@lacare.org) e-mail address is a group address that goes to the PHDP support team.
- Next Webinar is 03/26/2020.
- L.A. Care will setup sFTP's for non-contracted Hospitals, if requested. However, you will still need to provide a dedicated IP address in order to complete the setup.



# Encounter Discussion

*Greg White, Director, Healthcare Analytics*



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# Edifecs/Process Updates

## Short Overview of Improvements

- Edifecs Smart Trading (ST) went live June 2018. Submissions after this date will have included improvements and rejections included in a “new” rejection file.
- Edifecs Encounter Management (EM) back-end and submission portion went live July 2019 and provides a rejection file to submitters.
- The new Edifecs tool should minimize “dead end” data issues by performing the edits on the front end; therefore, encounters with errors will be returned to the submitting party rather than suspend at L.A. Care.
  - However, rejections from DHCS will still need to be extracted and sent to submitters.
- Extraction logic from Claims system to Encounter system was updated to lessen the rejections in that process.
- Workgroup in place to synchronize **paid claims criteria** with **encounter submission criteria** to lessen these rejections.



# Examples of Claims to Encounter Improvements

## Examples of items corrected

- Addressing Invalid HCPCS Code G0154
  - G0154 was a termed code which was still being accepted by the Claims system and rejecting by Encounter system
- Addressing Invalid revenue code 0184
  - Submitters using 0184 as a bed day hold code which was invalid but not edited by the Claims system
  - 0185 used as replacement and resubmitted
- Suppression of HIPAA edits
  - Outpatient claim should not have a Room and Board code or DA qualifier
  - Inpatient encounter must have qualifier DA with a Board revenue code
  - An inpatient encounter must have at least one (1) service line with Room and Board revenue
- Defaulting Billing Provider Address City and Zip when Pay-to-provider address is a P.O. BOX
  - Encounters were erroring out for incomplete address



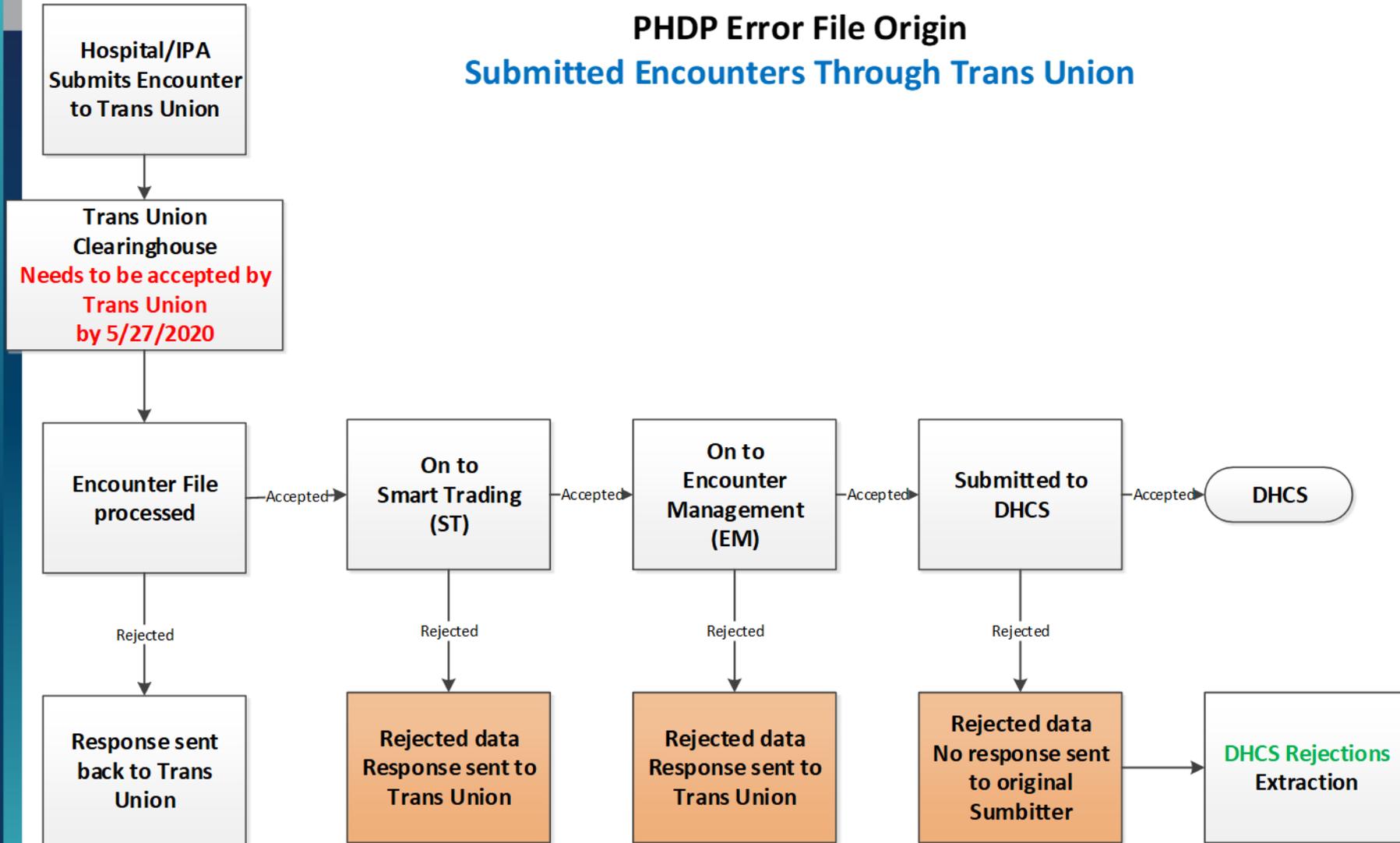
# Recent Encounter Items to Note

- Encounter rejection files were distributed Monday, February 24, 2020.
- Rejection data extraction required two (2) overlapping sources.
- Error descriptions are new and require investigation to determine detail.
- DHCS PACES system erroneously rejecting data (HIPPS and DRGs). Correction to be deployed in April.



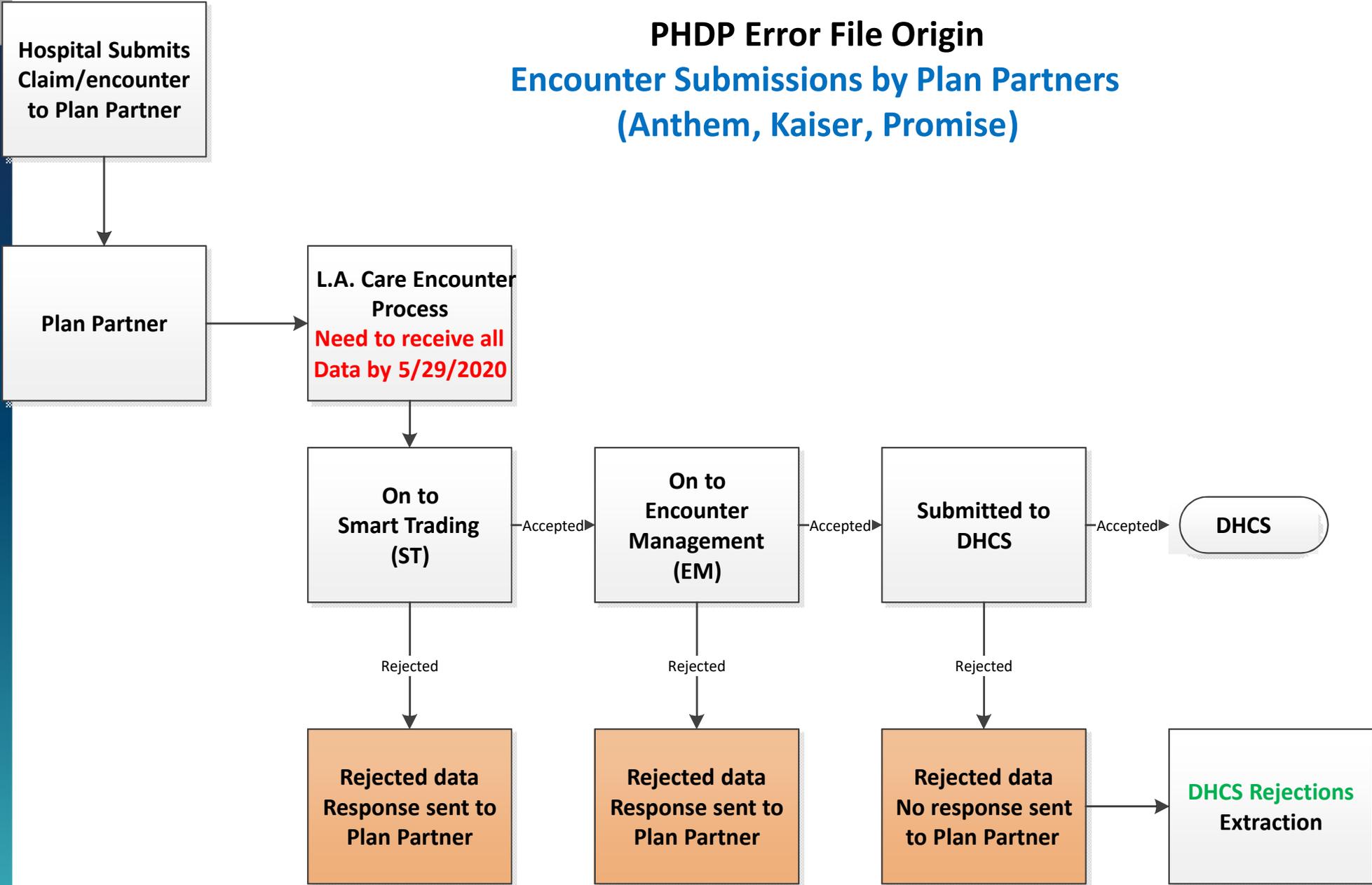
# PHDP Error File Origin

## Submitted Encounters Through Trans Union

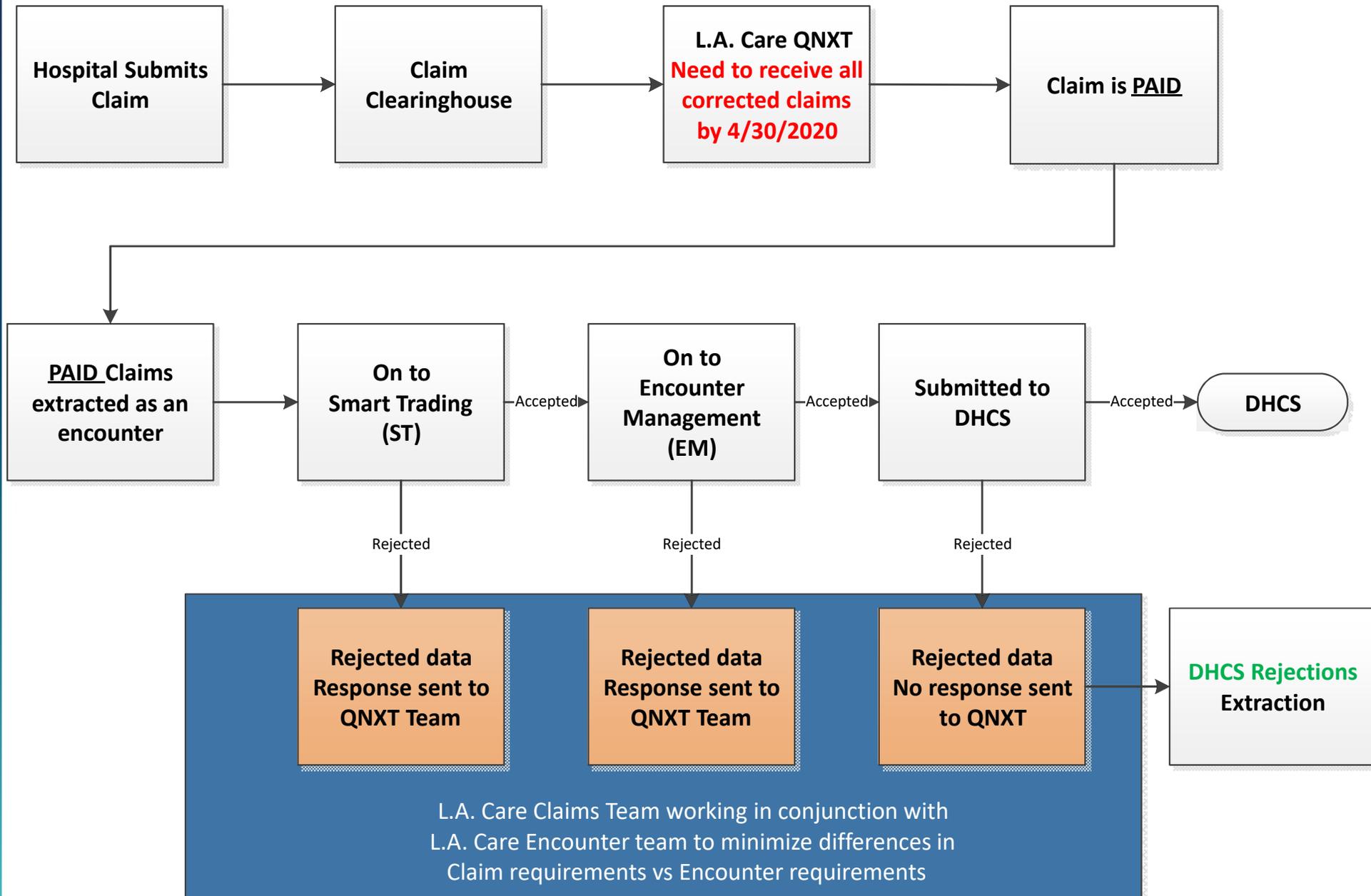


# PHDP Error File Origin

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



# PHDP Error File Origin Submitted FFS Claims



# Questions and Answers (Q&A)



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As a reminder, there is a new e-mail address for  
L.A. Care's PHDP Program: [PHDP@lacare.org](mailto:PHDP@lacare.org)

Thank you!

