

# Private Hospital Directed Payment (PHDP) Check-In Call



L.A. Care  
HEALTH PLAN®

For All of L.A.

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

A screenshot of a meeting control bar. It features four main buttons: 'Participants' (with a person icon), 'Chat' (with a speech bubble icon), 'Recorder' (with a microphone icon), and 'Notes' (with a document icon). A red arrow points from the left towards the 'Chat' button. Below the buttons is a text input field with the placeholder text 'Please type your question/comment here and click "Send".' and a 'Send' button to its right.

Participants Chat Recorder Notes

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

Send

# Agenda

## 1. Introduction & Meeting Purpose

*Duc Nguyen, Program Manager, Enterprise Quality Management*

## 2. PHDP Reminders

*Duc Nguyen, Program Manager, Enterprise Quality Management*

## 3. Encounter Remediation Updates

*Greg White, Director, Healthcare Analytics*

## 4. Closing

*Duc Nguyen, Program Manager, Enterprise Quality Management*

# PHDP Reminders

*Duc Nguyen, Program Manager, 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 Health Plan (L.A. Care) ( <i>where L.A. Care is the payer</i> )	Thursday, 04/30/2020
Deadline for all Encounter Data to have been received at L.A. Care	Friday, 05/29/2020
Department of Health Care Services (DHCS) Deadline to Receive Encounter Data	Tuesday, 06/30/2020

# Process for Submitting 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.
- **Please Note: The deadline to submit corrected claims to L.A. Care is Thursday, April 30, 2020.**

# Prevalent Error in Recent PHDP Phase

One of the top errors across all submitters is a DHCS rejection: 0x002C6

**HCPCS 'xxxxx' requires an National Drug Code (NDC) code in LIN03, but none was provided.**

- HCPCS code which requires an NDC code did not have an NDC code associated with it
- All are related to Physician Administered Drug (PAD) drugs
- DHCS began enforcing this edit Monday, July 01, 2019
- Enforcement based on SUBMISSION DATE not Service date
- Edit has been in place requiring these codes for years but was not enforced until Monday, July 01, 2019
- Code sets and coders need to stay updated with these requirements

# Encounter Remediation Updates

*Greg White, Director, Healthcare Analytics*



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# Top DHCS Errors

Error Code	L.A. Care Error Description	Possible Solution
0x001C7	Diagnosis code data value 'xxxx' is not valid as Diagnosis Related Group (DRG) (229)	<p><b>If it is MS-DRG:</b></p> <ul style="list-style-type: none"> <li>• Populate 3 digits.</li> <li>• Make sure it's a valid MS-DRG code.</li> <li>• Resubmit as per provided processes.</li> </ul> <p><b>If it is APR-DRG:</b></p> <ul style="list-style-type: none"> <li>• Populate 4 digits (do not send hyphen).</li> <li>• Make sure it's a valid APR-DRG code.</li> <li>• Resubmit as per provided processes.</li> </ul> <p><b>* See timeline and explanation of issue in later slide</b></p>
0x002C6	HCPCS (not limited to) C9399, J0131, J1170, J1885, J2405, J2704, J3490, J7297 requires an NDC code.	<p>Must resubmit with an NDC code. Submitter should reference Code Sets for any changes in requirements.</p> <p><b><i>If correct NDC code WAS submitted, then issue will be addressed in later slide.</i></b></p>
0x000CC	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.



# Top DHCS Errors

Error Code	L.A. Care Error Description	Possible Solution
0x0012F	Replacement and referenced encounters have mismatched claim identifier and/or Health Plan code.	This is DHCS processing issue, L.A. Care is working with DHCS to resolve the error.
0x00068	The beneficiary shows no Medi-Cal eligibility	DHCS shows Member not eligible.
0x3939639	Value of sub-element SV202-02 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.



# Top L.A. Care Error

Error Code	L.A. Care Error Description	Possible Solution
CAI016	Duplicate at ServiceLine level. DupKeyID:0 is a duplicate of DupKeyID:0 from EncounterID:xxxxxxxxxxxx.	Working with DHCS to determine next steps. <b><i>Further explanation in later slide</i></b>



# Update to DRG HIPPS Code Rejections from DHCS

**11/30/2018**

- DHCS accepts APR-DRG in HI loops only, not in HCP06 segment

**11/13/2019**

- DHCS claimed that they accept APR-DRG in HCP06 as well  
(There is still a bug.)

**01/16/2020**

- DHCS finally fixed the APR-DRG in HCP06 issue

**03/04/2020**

- DHCS fixed the issue to accept DRG based on end Date of Service (DOS) rather than transaction date (BHT04)

# Duplicate Line Error

- Claims with claim lines that were considered duplicate by DHCS are payable in the claims system
- DHCS instructed us that the edit is for lines per encounter and not a previous line from a previous encounter

*“Duplicate service lines will be denied as duplicates....Previously can mean a previous service line within the same encounter. The process checks line by line.”*

- L.A. Care’s encounter process incorporated this instruction into the edit process
- L.A. Care is working with DHCS to determine if the edit can be relaxed and we can resubmit them

Please submit all your questions regarding this presentation to [PHDP@lacare.org](mailto:PHDP@lacare.org).



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**THANK  
YOU!**

