

**CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS)
CLINICAL ASSURANCE & ADMINISTRATIVE SUPPORT DIVISION (CAASD)
PUBLIC HOSPITAL PROJECT**

**Technical Workgroup Teleconference
March 2, 2020 Teleconference Minutes**

Teleconference Attendees on Behalf of the Department:

<u>Name</u>	<u>Organization</u>
1. Rosemary Lamb	DHCS CAASD
2. Paul Miller	DHCS CAASD
3. Becky See	DHCS CAASD
4. Jillian Hart	DHCS CAASD
5. Cynthia Hicks	DHCS CAASD
6. Richard Luu	DHCS CAASD
7. Janelle Jones	DHCS CAASD
8. Cherease Baker	DHCS CAASD
9. Lauren Palmer	DHCS CAASD
10. Laura Watkins	DHCS CAASD
11. Monique Doduc	DHCS CAASD
12. Angela Carlos	DHCS CAASD
13. Stephan Fukasawa	DHCS A&I-FAB
14. Delia Valencia	DHCS A&I-FAB

Handouts

Each participant was e-mailed an agenda. In addition, a link to the DPH website for minutes from previous meetings was also provided.

Agenda Item I: Introductions

Agenda Item II: Unmet InterQual and Secondary Reviews

Discussion: DHCS requires that when a stay does not meet acute criteria, and is referred for a secondary review, the unmet InterQual tree should be submitted alongside the secondary review for each day.

As a reminder, the secondary review determination must be performed by a doctor of medicine or osteopathy with a current active medical license in the State of California. The physician may be a member of the UR committee, but may not be one of the attending physicians for the case under review.

The secondary review must include the following:

- Physician review date
- Written or electronic signature
- Contact information (i.e. phone number)
- A summary outlining the medical rationale for authorization of each day of the stay through secondary review (reason for decision/outcome).

Lastly, hospital days approved through the secondary review process must be individually justified by the physician. Grouping approval of a range of days is not permitted and variances will be cited on the proceeding days for lack of secondary review.

Agenda Item III: 2018 Paid Claim Review Report Cards

Discussion: The 2018 Paid Claims Review Report Cards will be released by March 15, 2020. These will be sent to the Participation Agreement signee. Please compare your facility's 2018 report to the previous 2017 report for possible improvements. If any questions arise or you would like to have a conference call, please contact DHCS at PublicHospitalProject@dhcs.ca.gov.

Agenda Item IV: Participation Agreements Outstanding

Discussion: DHCS requests that the two facilities with outstanding Participation Agreements submit them as soon as possible. DHCS will send an additional reminder to these facilities.

Agenda Item V: Quarterly Denied Medi-Cal Days

Discussion: The Fall Denied Medi-Cal Days data for dates of admission October 1, 2019 – December 31, 2019 is due on or before March 31st. DHCS will send an email reminder with the 2019 Quarterly Denied Medi-Cal Days Template attached.

Please keep in mind that your facility should be actively CIFing stays when a "Y" is noted in the last column of the template asking if the stay was billed. These are determined to be self-denied stays by the facility but were erroneously billed to Medi-Cal.

Agenda Item VI: Miscellaneous

Discussion: Regarding administrative days, in order to fulfill the required 10 call lists per day for SNF placement, DHCS also requires that 10 responses from the SNF must be documented. DHCS will not accept a "no response" as a complete

call. Additionally, DHCS will provide a complete list of State Holidays for providers to utilize when calls are not necessary.

As a reminder, observation is not identified as a level of care for reimbursement. InterQual must meet acute criteria for the day to bill Medi-Cal.

Copies of eligibility sheets are no longer required to be submitted to DHCS unless it is for administrative days with retro-eligibility and no call list is available.

Agenda Item VII: Next Meeting Date – Monday, June 1, 2020 at 11:00 am