

**CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS)
CLINICAL ASSURANCE DIVISION (CAD)
PUBLIC HOSPITAL PROJECT**

**Technical Workgroup Teleconference
September 14, 2020 Teleconference Minutes**

Teleconference Attendees on Behalf of the Department:

<u>Name</u>	<u>Organization</u>
1. Dr. Van Natta	DHCS CAD
2. Rosemary Lamb	DHCS CAD
3. Paul Miller	DHCS CAD
4. Becky See	DHCS CAD
5. Jillian Hart	DHCS CAD
6. Richard Luu	DHCS CAD
7. Janelle Jones	DHCS CAD
8. Kelli Mendenhall	DHCS CAD
9. Monique Doduc	DHCS CAD
10. Laura Watkins	DHCS CAD
11. Angela Carlos	DHCS CAD
12. Kiana Wilgus	DHCS CAD
13. Kee Xiong	DHCS CAD

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: Introduction of new Division Chief, Dr. Tim Van Natta

Discussion: Dr. Tim Van Natta has a background in cardiothoracic surgery and has worked with public hospitals since medical school. He has worked with DHCS for the past two years and now is the new Division Chief for the Clinical Assurance Division (CAD).

Agenda Item III: Delay of Reviews for April – June 2020

Discussion: As requested by the California Association of Public Hospitals and Health Systems (CAPH), DHCS has delayed the April – June 2020 paid claims review for all hospitals. These reviews will be scheduled in the future and may contain a smaller size sample.

Agenda Item IV: Claiming Discussion

Discussion: In order for hospitals and the state to track and identify COVID-19 cases eligible for inpatient services that may have been reimbursed by DHCS, the diagnosis code U07 should be used as the primary diagnosis on the claim when a beneficiary has tested positive for COVID-19. In addition, when using the Aid Code V2, the diagnosis code must be U07. For further information on Aid Code V2, please see the Medi-Cal Provider Manual on our Medi-Cal webpage.

For flexibility, TB Admin days will be permitted (excluding beneficiaries with a restricted aid code except V2) for beneficiaries that have tested positive for COVID-19 and have had a delay in placement. Detailed documentation must be provided in the medical record of what is occurring with the COVID-19 case, along with documentation concerning the challenges with placement or retreating the beneficiary. In some circumstances there may be a denial by the Medical Consultant.

A call log is not required when the TB Admin code is used for a COVID-19 case; however, the primary diagnosis code U07 must be used in order to identify it as a COVID-19 case. In addition, there does not need to be a skilled nursing need.

DHCS will coordinate with the California Department of Public Health (CDPH) to ensure uniformity and will let everyone know if this new process will be retroactive.

The Medi-Cal Provider Manual can be referenced for further detail at www.dhcs.ca.gov

The Medi-Cal website can be referenced for more specific information as well at www.Medi-Cal.ca.gov

Agenda Item V: Denied Claims for TAR Requirement

Discussion: We have seen an increase in claim denials due to a TAR requirement. For certain restricted aid codes, you must indicate in the "comments" field of the claim form one of the following statements:

"Hospital certifies providing emer svcs to unverified citizen" OR

"Hospital certifies providing emer or pregnancy related svcs to unverified citizen".

If the comment(s) are not included on the claim then it will be denied for lack of TAR. Here is a list of aide codes that require this statement: C1-C9, D1-D9, E1, 0L, 0V, 0U, 0X, 0Y, 1U, 3T, 3V, 44, 48, 5F, 5J, 5R, 5T, 5W, 55, 58, 6U, 69, 7C, 7K, 74, 76, 8N, 8T, E4, M2, M4, M6, M8, M9, M0, P6, P8, P0, T6, T7, T8, E4, M2, M4, M6, M8, M9, M0, P6, P8, P0, T6, T7, T8

Agenda Item VI: InterQual Version Reminder

Discussion: InterQual 2020 Content Version was released by Change Healthcare in April and all facilities should be currently utilizing the new version.

Additionally, for all days within a stay – the same version of IQ should be utilized. If facilities are having any delays in updating to the most recent version of IQ, please notify DHCS via the Public Hospital Project inbox at PublicHospitalProject@dhcs.ca.gov

Agenda Item VII: Quarterly Denied Medi-Cal Days

Discussion: The Spring Denied Medi-Cal Days data for dates of admission April 1, 2020 – June 30, 2020 is due on or before September 30, 2020. We will send out a reminder in the next week or so to everyone if your facility has not already submitted the data.

Please keep in mind that your facility should be actively “CIF-ing” 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 VIII: Open for Questions

2020 Participation Agreement renewals will be sent out for signatures soon. No changes have been made from the previous 2019 Participation Agreement.

Agenda Item IX: Next Meeting Date – Monday, December 7, 2020 at 11:00 am