

Los Angeles County

START-ODS

System Transformation
To Advance Recovery
and Treatment



Updating Financial Eligibility for Patients Who Obtain Benefits During Treatment

Sage Patient Management System:
Services, Data, and Claims

August 2022 | Version 2.0

Patients Who Obtain Benefits During Treatment

Updated August 2022

SAPC currently allows up to 30 days of reimbursable treatment at admission only per patient per year while providers assist patients in applying for benefits. This policy does not apply to patients who lose their benefits during treatment and are working to be reinstated or to patients who have an active Medi-Cal case in another county.

POLICY: Inter County Transfers: Patients whose current Medi-Cal is assigned to a county other than LA County and who have, 1) initiated an InterCounty Transfer (ICT) by contacting the DPSS eligibility worker from the originating county about the transfer request and 2) requested the change of address online through www.benefitscal.com or at a local LA County DPSS office, will be considered as having active Medi-Cal coverage in LA County. These ICT patients should be entered on the Financial Eligibility with a DMC guarantor and evidence of the transfer must be uploaded to the chart before requesting a DMC authorization.

Patients who are “Applying for Medi-Cal” need to have this indicated on their Financial Eligibility with a primary guarantor of “Applying for Medi-Cal” and a secondary guarantor of LA County-Non DMC as seen in Figure 1 below. SAPC has noted a large number of state denials related to providers entering DMC as the primary guarantor for patients with out of county Medi-Cal. To avoid unnecessary denials, it is very important to utilize “Applying for Medi-Cal” for all patients whose Medi-Cal is assigned to another county.

Guarantor Selection	
Change Order	Guarantor Name
↓ ↑	Applying for Medi-Cal
↓ ↑	LA County - Non DMC
<div style="display: flex; justify-content: space-between; align-items: center;"> -- Guarantors -- Add Guarantor </div>	

Figure 1: Applying for Medi-Cal

During the course of treatment, providers must assist the patient in applying for Medi-Cal, either in person at a local DPSS office, through the Customer Service Center 899-613-3777, or via the <https://benefitscal.com/> portal.

When providers become aware that the Medi-Cal benefits were approved with an official effective date, providers should:

1. Bill all remaining services covered under Applying for Medi-Cal as soon as possible, before adding the DMC guarantor.
2. Wait for all claims to be appropriately adjudicated under Applying for Medi-Cal and Verify claims were appropriately denied or approved using Provider Connect, EOBs, KPI or 835s.
3. When the provider has received all expected approvals, the DMC guarantor can be entered with the correct Coverage Effective Date
 - a. Providers must DELETE the “Applying for Medi-Cal” guarantor once the DMC guarantor has been added to prevent billing errors.
 - b. In the Coverage Comments section of the Financial Eligibility, providers should enter the dates the patient qualified under the SAPC Applying for Medi-Cal policy (See Figure 3 below)
4. Billing will only be approved for dates of service that fall within the DMC coverage effective dates once the DMC guarantor is entered.
 - a. If providers need to bill for any previous Applying for Medi-Cal claims, the DMC guarantor would have to be deleted and Applying for Medi-cal re-entered to claim for dates of service prior to the Medi-Cal effective date.

The “DMC Medi-Cal” guarantor must be added and set as the primary guarantor using the “Change Order” arrows to move “California Department of Alcohol and Drugs” to the top of the list order (Figure 3). Providers must ensure the “**Coverage Effective Date**” (Figure 4) within the guarantor details corresponds to the same date the Medi-Cal benefits became effective. This information is available on the benefits card or the notification sent to the patient. It is recommended that the patient apply online through the BenefitsCal portal so that any needed information can be accessed online easily.

Figure 3: Benefits Acquired During Treatment

Coverage Comments	Patient was originally entered as Applying for <u>Medi</u> -Cal for dates 6/01/2022- 6/30/2022. <u>Medi</u> -Cal became effective on 7/1/2022.			
Guarantor Selection				
<div style="border: 2px solid red; padding: 5px; display: inline-block;"> Change Order ↓ ↑ ↓ ↑ </div>	<table border="1"> <thead> <tr> <th style="background-color: #005596; color: white;">Guarantor Name</th> </tr> </thead> <tbody> <tr> <td>1 CALIFORNIA DEPARTMENT OF ALCOHOL AND D</td> </tr> <tr> <td>2 LA County - Non DMC</td> </tr> </tbody> </table>	Guarantor Name	1 CALIFORNIA DEPARTMENT OF ALCOHOL AND D	2 LA County - Non DMC
Guarantor Name				
1 CALIFORNIA DEPARTMENT OF ALCOHOL AND D				
2 LA County - Non DMC				
-- Guarantors --	<input type="button" value="Add Guarantor"/>			
<input type="button" value="Submit"/> <input type="button" value="Cancel"/>				

Figure 4: DMC guarantor Coverage Effective Date - Reflects first date of active coverage

Coverage Information	
Eligibility Verified <input checked="" type="radio"/> Yes - Y <input type="radio"/> No - N	Coverage Effective Date <input type="text" value="07/01/2022"/>

Additionally, DMC guarantors must have a policy number AND a Subscriber Client Index Number (CIN) listed on the guarantor details page (figure 5). SAPC recommends using the CIN for both the policy number and CIN fields.

Subscriber Policy Number <input type="text" value="9000000A"/>
Subscriber Medicaid # <input type="text"/>
Subscriber Client Index # <input type="text" value="9000000A"/>

Figure 5: Policy and CIN#- Guarantor Details

Patients may also enter treatment as other County Funding enrolled (AB 109, JJCPA, Drug Court, etc.) or eligible for MHLA benefits and apply at the time of admission similar to Applying for Medi-Cal. However, since there is no Applying for MHLA option as a guarantor, providers should list this as LA County-Non DMC only and enter MHLA (or the other county funding) in the Subscriber Policy Number field.

MHLA applications are typically processed much quicker than DMC applications, sometimes within a few days of application. Providers may decide to wait before entering the Financial Eligibility or submitting an authorization until the application is approved and an MHLA number is assigned. This could avoid having multiple authorizations for the same treatment episode.

Providers must identify and update the Cal-OMS Admission information as needed to include the relevant Funding Program information (see figure 6).

CIN	<input type="text"/> <input type="text"/> <input type="text"/>	Other Funding Programs (Choose all that apply) <input type="checkbox"/> Juvenile In Custody Probation Camp <input checked="" type="checkbox"/> My Health LA <input type="checkbox"/> None <input type="checkbox"/> Perinatal Service <input type="checkbox"/> Private Pay <input type="checkbox"/> Probation / Day Reporting Center <input type="checkbox"/> Probation JUCPA <input type="checkbox"/> Probation Title IV E <input type="checkbox"/> Prop 47 <input type="checkbox"/> Prop 57 <small>Ctrl+click to choose multiple items If Medi-Cal beneficiary is "Yes" or "Pending", My Health LA cannot be selected</small>	
Probation PDJ Number	<input type="text"/>	CalWORKs Case Number	<input type="text"/>
Please select camp: <small>-Please Choose One-</small>	<input type="text"/>	Other Camp (Specify):	<input type="text"/>
General Relief Case Number	<input type="text"/>	DCFS Case Number	<input type="text"/>
Drug Court Case Number	<input type="text"/>	AB 109 Case Number	<input type="text"/>
AB 109 PB Number	<input type="text"/>	CalWORKs Recipient	<input type="text" value="No"/>
Substance Abuse Treatment Under CalWORKs	<input type="text" value="No"/>	What is your My Health LA Participant ID (13 digits)?	<input type="text"/>
Please select MHLA medical home provider/clinic: <small>-Please Choose One-</small>	<input type="text"/>	Is the client in or being admitted to Recovery Bridge Housing?	<input type="text" value="No"/>

Figure 6: Entering Other Funding Programs or MHLA Information on Cal-OMS Admission