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| Project Meeting Name: **Individual/Group Provider Monthly Meeting** | | Date:  **June 7, 2024** |
| Meeting Location: Virtual | Start Time: 8:15 AM | End Time: 9:13 AM |
| Facilitator: Marcy Black | Note Taker: Jennifer Beck | Sponsor: Marcy Black |
| Meeting Attendees: Marcy Black, Francisco Escobedo, Natalie Armistead, Jennifer Beck, Karla Boyd, Meng Moua, Kathy Rexroat, Sarah Thomas, Kathy Lee, Cheng Vang, Sarah Thomas, Laura Echeverria, Blanca Godinez, Sharon Erwin, Raquel Andrade, Duke, Lori Lopez, Justin Jimenez, Melinda, Garcia, Cesar Rodriguez, Alvina Rodriguez, Rohina Fazil, Valerie Curley | | |

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| **Meeting Summary** | | |
| **Topic/Deliverable** | CalMHSA EHR | |
| **I. Announcements** | **Lead Presenter** | **Francisco Escobedo/Marcy Black** |
| **Status/Update** | **Purpose of Meeting:** To communicate to Individual/Group Providers any new and upcoming events/significant system and process changes to our delivery system and address and issues/concerns that impact persons served and/or providers.   1. **Amendment No. III to Agreement – Approved 5-21-2024**     * **Reconciliation process – Meng Moua**       1. **All claims paid by minute will be recalculated using CPT/HCPCS coding**      2. **The recalculation will result in overpayments and underpayments**      3. **Providers who received overpayments will be contacted individually; payment plans can be requested if needed**      4. **Providers who received underpayments: claims have been reconciled and will be processed by Managed Care next week. Supplemental checks will be issued. The process will take approximately 2-3 weeks due to review by DBH Finance and County Auditor Controller’s Office**  * Please note:   + Providers delivering hospital-based professional services, commonly known as "pro fees," should expect a separate contract for those services. The current contract is not a sustainable mechanism for non-Medi-Cal claimable services, which was an unanticipated impact of the conversions of payment reform. Providers of hospital-based services will remain on the Agreement short-term until DBH develops a new contract specifically for providers of inpatient psychiatric services and will be formally removed from the Individual and Group Master agreement at that time.   + New Agreement for Individual and Group Providers and separate contract for Inpatient Professionals fees targeted for July 2024.  1. **DBH Contacts:**  * **Compliance** – questions related to Payment Reform; CalAIM [DBHCompliance@fresnocountyca.gov](mailto:DBHCompliance@fresnocountyca.gov) * **Managed Care** * If you need to reach out to Managed Care, please call (559) 600 – 4645. * Questions can be sent via email at [MCare@fresnocountyca.gov](mailto:MCare@fresnocountyca.gov) |
| **Action Item(s)** | * **DBH to communicate re: reconciliation of over/underpayments** |
| **II. TBS Referral Form** | **Lead Presenter** | **Kathy Rexroat** |
| **Status/Update** | * **Revised referral form with DBH criteria attached** * [fcmhp-tbs-referral-form-rvd-05.2024.docx (live.com)](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.fresnocountyca.gov%2Ffiles%2Fsharedassets%2Fcounty%2Fv%2F1%2Fbehavioral-health%2Fmanaged-care%2Fcontract-providers%2Ffcmhp-tbs-referral-form-rvd-05.2024.docx&wdOrigin=BROWSELINK) * **All information must be complete** * **Assessment must be accurate and reflect conditions on referral** * **If a lack of information is received a request for information will be sent. If information is not received in a timely manner, a NOABD will be sent regarding denial and a new TBS referral can be submitted** |
| **Action Item(s)** | * **Providers to access the TBS referral form from the website as needed** |
| **III. DBH Reorganization (effective July 8, 2024)** | **Lead Presenter** | **Marcy Black** |
| **Status/Update** | * **Save the Date: All Behavioral Health Contractors meeting, June 27, 2024, 1:30 – 3:00 PM** * **Brief update:**   + **New Division Manager – Natalie Armitstead, Division Manager**   + **Senior Staff Analysts – Sharon Erwin, Senior Staff Analyst & Cesar Rodriguez, Senior Staff Analyst** |
| **Action Item(s)** | * **DBH will send communication regarding All Behavioral Health Contractors meeting** |
| **III. Q & A** | **Lead Presenter** | **All Participants** |
| **Status/Update** | **Q. For providers who are anticipating reimbursement, can we request expedited payment?**  **A. As noted above, Managed Care has completed the reconciliation process and will be processing payments. The process can take 2-3 weeks.**  **Q. Who can qualify as a waiver psychologist?**  **A. To be approved as a waivered psychologist via the Department for the Fresno County Mental Health Plan, please access the form via the link below. The form that must be signed by DBH Director or designee and submitted to DHCS for approval**  [**https://www.dhcs.ca.gov/services/MH/Pages/MHPLW.aspx**](https://www.dhcs.ca.gov/services/MH/Pages/MHPLW.aspx)  **Please submit the form to the** [**mcare@fresnocountyca.gov**](mailto:mcare@fresnocountyca.gov) **inbox**  **Q. Can you serve Medi-Medi and Medicare as a waivered psychologist?**  **A. Yes, you can serve persons with dual Medicare-Medi-Cal coverage (reference** [Complete Guide to Medicare for Psychologists (apaservices.org)](https://www.apaservices.org/practice/medicare#:~:text=Medicare%20Part%20B%20was%20expanded%20in%201990%20to,all%20settings%20and%20bill%20Medicare%20for%20their%20services.)**). Contracted Providers must bill to Medicare first before DBH can submit a claim to Medi-Cal. Once Contractors bill Medicare and receive a denial, Explanation of Benefits (EOB) or remittance document from Medicare, this documentation can be submitted to DBH for claiming to Medi-Cal. Contractors will be paid the difference between the amount that DBH would normally pay for a covered service and the amount that Medicare already paid the Contractor. There are some services that Medi-Cal covers that Medicare does not cover and, in those instances, DBH pays for the Medi-Cal covered service at the contracted rate. DBH has no authority to pay for services for persons who have only Medicare as the payor.**  **Q. Does the Contract allow waivered psychologists to provide services in a skilled medical facility?**  **A. No, Skilled Nursing Facilities are a lock out. Please review the most current version of the SMHS Billing Manual.**   * **Current version:** [SMHS Billing Manual v1.5 (ca.gov)](https://www.dhcs.ca.gov/Documents/SMHS-Billing-Manual-v1-5.pdf) * **Save this website to access the most recent version (v1.5 is most current, but DHCS will post updated versions here:** [MedCCC - Library (ca.gov)](https://www.dhcs.ca.gov/services/MH/Pages/MedCCC-Library.aspx)   **Q. Can providers provide services by Practicum students?**  **A. Clarification: Defining practicum students as persons enrolled in a master’s level educational program and gaining hours as a student. The Centers for Medicare and Medicaid Services (CMS) recently approved a State Plan Amendment (SPA). Counties are now waiting for the policy issued by the Department of Health Care Services (DHCS). Once DHCS releases the policy (Behavioral Health Information Notice), DBH can begin planning and will disseminate information to the provider network.** |
| **Action Item(s)** | * **Francisco Escobedo, Managed Care Coordinator, will coordinate team member to reach out to Dr. Cheng Vang regarding assistance requested during today’s meeting.** |
| **IV. OTHER Items** | **Lead Presenter** | **Francisco Escobedo** |
| **Status/Update** | 1. **Call for Agenda Items:** 2. **Next Scheduled Meeting:**  * **Friday, July 5, 2024, 8:15 am** |
| **Action Item(s)** |  |