

BHS DMC ORGANIZATIONAL PROVIDERS BILLING MANUAL SUMMARY OF CHANGES AS OF 10/2020

SECTION	REVISION	DESCRIPTION
IV. MEDICAID AND MEDI-CAL	Updated/added information	<p>Added contacts to assist on Medi-Cal access or PIN issue</p> <p>Added link to the SUD Aid Code Master Chart posted on Optum website</p> <p>Added hyperlink to Medi-Cal eligibility samples</p>
IV-3. MEDI-CAL ELIGIBILITY VERIFICATION	Updated/added information	<p>Updated the medi-cal.ca.gov link and screenshots</p> <p>Added hyperlink to Medi-Cal eligibility samples</p>
IV-5. MEDI-CAL SOC (SHARE OF COST)	Updated/added information	<p>Added hyperlink to Medi-Cal eligibility samples</p> <p>Added detailed instructions on SOC processes (program and BU's responsibilities)</p> <p>Added link to Optum – Communications tab regarding SOC Info Notice, processes, and SOC form requirements</p>
IV-6. MEDI-MEDI COVERAGE (CLIENTS WITH MEDI-CAL AND MEDICARE)	Added information	<p>Added Medi-Medi information</p> <p>Added hyperlink to Medi-Cal eligibility samples</p>
IV-7. LTC (LONG TERM CARE)	Added information	<p>Added LTC information</p> <p>Added hyperlink to Medi-Cal eligibility samples</p>
IV-8. YOUNG ADULT EXPANSION ELIGIBILITY	Added information	<p>Added information</p> <p>Added hyperlink to Medi-Cal eligibility samples</p>
IV-9. COUNTY OF RESPONSIBILITY (OUT OF COUNTY)	Updated/added information	<p>Added information on OOC rules</p> <p>Added link to Optum website- Communications tab on OOC Amended Process.</p>
IV-10. SAMPLES OF MEDI-CAL ELIGIBILITY	Added information	<p>Added screenshots of various Medi-Cal eligibility responses, descriptions, and identified what can be billed to DMC or not.</p>

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V. OTHER HEALTH COVERAGE (OHC)	Updated/Added information	<p>Added link to Optum-Communications tab on OHC</p> <p>Added more details on OHC:</p> <ul style="list-style-type: none"> • EOC or EOB requirements • Medicare-OTP • AOB • EOB not received after 90 days of billing • OHC process for residential programs
VIII. DMC BILLING IN SANWITS	Updated/Added information	<p>Added detailed instructions on how to avoid or solve common billing errors</p> <p>Detailed the steps on how to bill outpatient, OTP, and Residential Case Management claims and added SanWITS screenshots.</p> <p>Detailed the steps on how to bill Residential Bed Day claims and added SanWITS screenshots.</p> <p>Modified the steps on how to run the Claim Items Report in SanWITS.</p>
IX. PGE IN SANWITS FOR CLIENTS WITH DUAL COVERAGE (OHC & DMC)	Added information	Added instructions and screenshots on how to create PGE in SanWITS for clients with dual coverage (OHC and Medi-Cal).
X. PRINTING THE CMS-1500 FORM	Added information	Added instructions and screenshots on how to print the OHC claim forms using SanWITS data.
XI. SANWITS BILLING ENHANCEMENTS	Added information	Added the details and screenshots of billing enhancements. Enhancements to be deployed to SanWITS Production sometime this September (2020).
XII. CLAIM DENIALS	Added/Updated information	Added more details on 835 and claim denials from the State.
XIII. SERVICE REPLACEMENT PROCESS	Added/Updated information	<p>Added more details on what BU does once program determines the claims are denied due to data entry error.</p> <p>Added hyperlink to Common Billing Errors and How to Avoid or Fix these errors.</p>

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XIV. VOID OR DISALLOWANCE PROCESS	Added/Updated information	Added more information and hyperlink. Revised the Payment Recovery Form/added the Adjustment Reason (AR) 11-Other.
XV. LATE OR RETRO BILLING	Updated information	Reformatted and added hyperlinks.
XVI. TROUBLESHOOTING SANWITS CLAIM PROCESSING ERRORS	Updated information	Reformatted
XVIII. SUD ACRONYM LOOKUP	Added information	Added acronyms