



Provider Members Present:

- Michael Cunningham, Director/Chemical Dependency Professional (CDP)/Quality Manager, Ideal Balance
- Michael White, PEMBHI, LLC, MSWhite
- Jessica Kincaid, Operations Manager, Catholic Community Services (CCS)
- Lesa Gilbert, Staff Accountant, CCS
- Jana Jeffs, CCS

North Sound Behavioral Health Organization (North Sound BHO) Staff Present:

- Jennifer Whitson, Data Integrity Specialist
- Eddie Wai, Database Administrator

Members via telephone:

- Andreas Macke, G-42 Systems, LLC
- Erika Hanson, Compass Health
- Jace Angelly, Clinical Director/Quality Manager, Acadia
- Jason Wuori, Technology Support Specialist, Snohomish County
- Jay Miller, Information Technology (IT) Program Director, Compass Health
- Joy Collins, Pioneer Human Services (PHS)
- Kai Wu, Therapeutic Health Services (THS)
- Karryn Dean, Information Systems (IS) Manager, Sunrise Services
- Martyna Madej, Volunteers of America (VOA)
- Meredith Guich, Accounts Receivable Manager, Center for Human Services (CHS)
- Robert Sullivan, Director III, Skagit Crisis Center, PHS
- Ron Rispens, Database Analyst-Client Systems, PHS
- Stephanie Zapien, Information Technology/Finance Director, Lake Whatcom Residential Treatment Center
- Clayton Bouldin, Administrative Assistant, Evergreen Recovery Centers
- David Wang, THS

I. This meeting is being recorded to ensure the content of the notes are as accurate as possible.

II. Introductions, Review of Minutes and Additions to the Agenda

Jenn convened the meeting and introductions were made.

Jenn asked for any edits to the previous meeting minutes and nothing was mentioned. The minutes were approved as written.



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III. Crisis Data to be Submitted to North Sound ASO

Jenn stated as of July 1st North Sound's primary focus will be crisis services but if anyone has non-crisis questions, send them to her and she will try to find an answer. A small amount of business will be non-crisis/state-funded so the ASO will need to have the knowledge. She added the new IMC SERI came out and still contains all the outpatient, mental health and substance use disorder and all the other things.

Jenn stated at the last Crisis Services meeting she attended the HW modifier was mentioned. She added the HW modifier is only used when an encounter changes over to involuntary during the investigation process. The HW modifier forces the funding over to the state-funded non-Medicaid. She said some bundling was occurring which was noticed, and some corrective services will be coming forward. She clarified the HW modifier should not be used until you have the face-to-face with the individual and the rights have been given to the individual. She told the group if anyone had specific questions they wanted answered, send them to her and she will get the answers.

Jenn stated these meetings will begin to focus on the Crisis Services data as July approaches. She added she could entertain questions on the SERI, but the focus is on crisis and there will be a small amount of state funds for non-crisis. She added if anyone has questions, submit them to the CIS@northsoundbho.org and she will try to find out the answers.

Eddie stated if you do not normally submit crisis data please send email to him to verify receipt of the transaction. This is starting July 1 after North Sound has become an ASO. Jenn clarified if you do not see your information the next day you need to notify North Sound so we can verify the receipt of and processing.

IV. Bundling like Services on the same Date of Service

Giving an example Jenn stated H2015 comes in multiple times in a day and might appear to be a duplicate. She stated when you have multiple services for one individual that uses H2015, they need to be bundled and submitted all at once (for example: one [1] 15-minute submission on one [1] day and another 90 minute submitted the same day **for the same person**) need to be bundled together otherwise the 90 minute submission will/could be rejected and considered a duplicate. She said when one (1) individual is seen for multiple services with the same CPT code in one (1) day, these need to be bundled and submitted together as one (1) service encounter to receive credit for all those services.

Jana mentioned another code H0032 (regarding family team meetings) might also appear to be a duplicate. Jenn stated from what she has seen a warning would be sent regarding this and stating this is a duplicate. If you receive an ignore message, there would be nothing you could do about it. She added if you receive a rejection, you will have to go back and fix it. She added if the staff/organization NPI is different for the



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other submissions, she has not noticed any problem with the data showing up as a duplicate. Discussion followed.

Jenn stated to her knowledge bundling does not need to be done for items not routed through the MCO; however, Eddie stated he would get back to providers on that because sometimes it is a real error code. He added HCA checks everything very closely. He stated Health Care Authority (HCA) verifies information for duplicates. He mentioned if a submission appears to have been submitted two (2) months ago and it seems your system is submitting it again two (2) months later it can cause problems. He said provider systems need to be more robust to catch these occurrences, so all these records are caught prior to submission. He mentioned in the future the Managed Care Organizations (MCO) will reject these. Jenn clarified what this means is staff needs to hold services for a certain amount of time so they can ensure all are bundled as one (1) submission or void the first service or change the first service to a bundled service so the additional services will not be rejected. Discussion followed.

Eddie said currently MCOs are suggesting the only process we can define

Eddie said watch out for bundling. MCOs would not allow multiple Action Codes for the same CptCode, SvcDate, and StaffNPI within the same batch. If you have multiple action codes like ('A', 'C') or ('A', 'D') in the same batch, the first 'A' transaction would be accepted but the subsequent 'C' or 'D' transaction would be rejected because you need to include the TCN (or ICN) in 'C' or 'D' transaction. But you won't get the TCN (or ICN) until the 'A' transaction is processed.

V. Length of Facility License Number

Jennifer stated the numbers were changed and the full 15-digit number needs to be gotten to her so she can change them prior to May 19th. She added there is a loop in the 837p where this number must be included. She added providers will be given plenty of warnings prior to this time. Eddie said prior to May 19th providers can still submit with their 6-digit number. He added after May 19th providers will have to use their entire 15-digit number. Discussion followed.

VI. Next Meeting

The next meeting is **TBD via GTM** will be sent out via invite.