



North Sound Behavioral Health – Administrative Services Organization (North Sound BH-ASO) Technical Call

Meeting Date: 2023-12-08

Minutes

1. Supplemental Data

- a. Next State DD due Dec 31. At this time there are only going to be grammar edits and small changes.
- b. Data Completeness reports not yet received from the State, this quarter. Reports are being prepared monthly, from NS to providers, and should show similar missing data and thus the State version won't hold any surprises.
 - i. 2 or more Service Episodes open or end date is NULL and no service received in 90 days. Confirming that there should be not more that 2 open Service Episodes. 1 is the minimum and the second is not necessary for those entities that provide both the MH and SUD services.
 - ii. Program Identification end date is NULL and no service received in 45 days
 - iii. Both the Service Episode and Program identification should be closed when the client is not longer receiving services. A few reports were sent out for review when multiple episodes were found to be open for providers. These were corrected by the providers and the main issued had been Primary Key issues when a change to an episode record caused a new guid to be created and thus a unique Episode was submitted. Reports to show episodes open without a service have been sent a few times and plans to produce them on a recurring basis are in the works.
- c. Supplemental Transaction to change and have the org NPI in the transaction to the state. No change to the structure from the provider, but in how the ASO submits to the HCA.
- d. NPI in the Service needs to match NPI in the Supplemental Data. This is for the reporting at the State level. The first reports submitted highlighted an issue where an NPI used by a provider, to indicate another region, was used in services submitted to NS and the State reports were showing that provider had Supplemental Data and no services.
- e. H2011 services, provided by crisis clinician, will be submitted to the ASO
 - i. H2011-HW services will correspond to the 160.05 Transaction (DCR Investigation and H2011's (outside of the investigation episode) will correspond to the 165.02 Transaction (Mobile Crisis Response)



- ii. Rules in conflict – currently the 165.02 Start and End Dates cannot be more than 1 day apart (BHDG DD). The new guidance, with the 1:1 relationship (H2011:UB vs 165.02) indicates an episode of care can last many days.

2. Table Updates

- a. New NPI numbers have been added to the Inpatient list used for the Detainment field of the DCR Investigation transaction. This list updates often. If you have an NPI number not found in the table list, email the NPI to cis@nsbhaso.org to have it added.

3. SERI Updates

- a. New SERI 2024-01 – available on their website and previously sent via email. Another version will be released soon with more edits to clarify language and the addition of a 'what's changed' section to make it easier to determine what has been updated each release. You can be added to the SERI notification list by using the link below.
- b. 99### definitions updated to '...meet minimum..' from range of minutes. An example of this is at the end of these notes.
- c. H2019
 - i. HA is a specific Team - Child Youth Family – in the Crisis System
 - ii. HB is for the services provided not during an Investigation Episode
 - iii. UB Modifier – Request for Service
 - 1. The UB is used on the first service provided during a non-investigation episode of crisis care
 - 2. There is a 1:1 relationship for the H2011:UB and the 165.02 Mobile Response Transaction
- d. H0038 peer services. Now allows HA and HB. Though not a new service in the SERI the modifiers are now allowed in the Crisis System as an individual service.

4. Data Dictionary Clarification

- a. Demographic
 - i. When a P1ID is not found for the client, include the patient number from your medical record (EMR) – the P1ID status doesn't matter. This would be for the Demographic transaction and for the services that are submitted. The P1ID is a unique ID and it help in matching up records at the State level.
 - ii. When the SSN is not given – leave the field NULL/Blank.
 - iii. Jane/John Doe with multiple PN – request merge if during the process of determining the client's true name results in multiple accounts being created that have been submitted to NS. Please contact us to assist with a merge of records on our side.



5. Service Transactions

- a. H2011-HW and when to remove the HW modifier after the investigation interaction – waiting for State guidance. This is being discussed at HCA is different teams with hopes to determine when the HW modifier is used during the ITA investigation episode of care. E.g. only while providing the interview with the client or can it be used while fact-gathering before or making referrals after?

- 6. Carelon weekly meetings – be sure to attend the weekly office hours meeting they provide. Information is found on their website and though it is geared towards the Medicaid side of services there is overlapping information about service structure and the Supplemental Data communications.

Schedule

Next Meeting January 12th

General schedule is the 2nd Friday of each month at 1pm

Send agenda items to CIS@nsbhaso.org

Links to SERI:

[Service Encounter Reporting Instructions \(SERI\) | Washington State Health Care Authority](#)

Code	Provider Type	Service Criteria
99202	363LP0808X - ARNP Psych, MH	This is an E&M code. May or may not be billed with indicated Psychotherapy codes, as appropriate.
CPT®/HCPCS Definition	363A00000X - Physician Assistant	
Office/OP visit, new patient, straightforward MDM;	363A00000X – Osteopathic Physician Assistant	
ef 15 minutes must be met or exceeded-29 total time of encounter	2084P0800X - Psychiatrist/MD	
	2084P0800X- Psychiatrist/Osteopathic Physician	
Unit (UN) / Minutes (MJ)		
UN (1 per ENC)		
Modifiers		
52 53 HH HK HT UD U8 FQ		