

# Justice-Involved (JI) Reentry Initiative: Billing Tips for Select RAD Codes

*Justice-Involved (JI) Reentry Initiative: Billing Tips for Select RAD Codes* offers JI providers guidance on how they can proceed after receiving select Remittance Advice Details (RAD) codes. Additional billing reminders and resources are featured.

## RAD Codes

### RAD Code 0037

Code description: Health Care Plan/Mental Health Care enrollee, capitated service not billable to Medi-Cal.

- Validate that the correct 14-character member ID was used and check member eligibility prior to billing for JI pre-release services.
- Validate that the date of service is on or after the JI pre-release activation date or before the termination date. Services are considered payable when rendered within the JI pre-release period window.
- Providers can utilize the JI Screening Portal to confirm JI start and end dates by checking the Pre-Release Services Screening History screen.
  - **Note:** The Pre-Release Services Screening History screen does not display Medi-Cal Eligibility.

**Pre-Release Services Screening History**

Incarceration Date: 2024-01-01

AVENAL COMMUNITY HEALTH - ARIA COMMUNITY HEALTH CENTER 840 STILLWATER RD - 002

| Date of Action | Screening Action | Action Reason                           | JI Start Date | JI End Date | Release Date |
|----------------|------------------|---|---------------|-------------|--------------|
| 10/31/2024     | Pause            | Member going to Hospital for Evaluation | 09/10/2024    | 10/31/2024  | -            |

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| Date of Action | Screening Action | Action Reason                           | JI Start Date | JI End Date | Release Date |
|----------------|------------------|---|---------------|-------------|--------------|
| 09/10/2024     | Reset            | -                                       | 09/10/2024    | 12/08/2024  | -            |
| 09/03/2024     | Pause            | Member going to Hospital for Evaluation | 08/30/2024    | 09/03/2024  | -            |
| 08/30/2024     | Reset            | -                                       | 08/30/2024    | 11/27/2024  | -            |
| 08/29/2024     | Pause            | Member going to Hospital for Evaluation | 08/15/2024    | 08/29/2024  | -            |
| 08/28/2024     | Activate         | -                                       | 08/15/2024    | 11/12/2024  | 11/11/2024   |

**Figure:** Pre-Release Services Screening

## **RAD Code 0090**

Code description: The combination of procedure code and modifier is not valid on the dates of service billed.

Providers are encouraged to verify the following:

- Procedure code
- JI modifier and any other modifiers being billed
- “From-thru” dates of service

Providers can refer to the following provider manuals for billing guidelines:

- [Modifiers: Approved List](#)
- [Justice-Involved \(JI\) Pre-Release Services](#)

## **RAD Code 0169**

Code description: This service is not payable when billed with this diagnosis.

Providers are encouraged to verify the following:

- Primary diagnosis code
- Procedure code
- JI modifier and any other modifiers being billed

Providers can refer to the [Justice-Involved \(JI\) Pre-Release Services](#) specific policy section of the provider manual billing guidelines.

## **RAD Code 0188**

Code description: This is a “By Report” procedure. No report is attached, or the attached report is insufficient to warrant payment.

Providers are encouraged to verify the following:

- Is the documentation/report attached to the claim?
- Is the documentation/report relevant to the procedure billed?
- Does the member listed on the attached document/report match the member listed on the claim?
- Does the date of service on the documentation/report match the date of service on the claim?

“By Report” procedures require attachments or remarks. The following items are examples of acceptable documentation:

- Operative reports
- Laboratory reports
- Clinical notes
- Narrative reports

Refer to the specific policy section of the manual for billing guidelines.

### **RAD Code 0314**

Code description: Recipient is not eligible for the month of service billed.

- Validate that the correct 14-character member ID was used and check member eligibility prior to billing for JI pre-release services.
- The date of service is on/after the JI pre-release activation date or before the termination date. Services are considered payable when rendered within the JI pre-release period window.

### **RAD Code 9889**

Code description: The provider/type of service billed is not allowed for the member.

- Validate that the correct 14-character member ID was used and check member eligibility prior to billing for JI pre-release services.
- The date of service is on or after the JI pre-release activation date and before the termination date. Services are considered payable when rendered within the JI pre-release period window.

## **General Billing Reminders**

- Ensure that claims for JI services are billed for dates of service on or after October 1, 2024.
- Check the member’s eligibility to ensure they are eligible on the date the JI service is being rendered.
- Embedded providers should verify that the claim contains the appropriate revenue code and type of bill code:
  - Revenue code 0519: Other Clinic
  - Revenue code 0780: Telemedicine, General
  - Type of Bill 079x: Clinic, Other
- Modifier U8 is required on all JI services billed to simplify JI claim identification and processing.

## **General Billing Resources**

The following resources are available on the [Medi-Cal Providers](#) website:

- The [General Medicine Manual](#), which includes the [Justice-Involved \(JI\) Pre-Release Services](#) section.
- [Justice-Involved \(JI\) Reentry Initiative](#) page, which includes the following resources:
  - Articles
  - Supplemental Materials
  - Q&As
- The References tab of the Medi-Cal [Resources](#) page, which includes the following:
  - [Medi-Cal Rates](#) page
  - [CA-MMIS 837 Claim Billing and Technical Manual](#)
  - [Remittance Advice Details \(RAD\) Code Repository](#)