Justice-Involved Reentry Initiative: Billing Reference Guide

In 2024, the California Department of Health Care Services (DHCS) launched the Justice-Involved (JI) Reentry Initiative to allow eligible Californians who are incarcerated to enroll in Medi-Cal and receive a targeted set of services in the 90 days before their release.

JI providers should refer to the *Justice-Involved Reentry Initiative: Billing Reference Guide* for an array of billing-specific resources that can support providers during various stages of paper or electronic billing.

General Billing Resources

- Visit the <u>Billing Tips</u> web page of the Medi-Cal Providers website for billing insights on various categories including duplicate denials, durable medical equipment (DME), paper claims and *Treatment Authorization Requests* (TARs).
- Review the "Billing and Claims Approach for Pre-Release Services" section of the <u>Policy and Operational Guide for Planning and Implementing the CalAIM Justice-</u> <u>Involved Reentry Initiative</u> on the <u>Resources</u> web page of the DHCS website for the following:
 - An overview of what services should have their claims submitted through CA-MMIS versus Medi-Cal Rx,
 - Services rendered by embedded versus in-reach providers and
 - Claim submission using third party administrators.
- For assistance with general billing policy and procedures, contact Medi-Cal via the Telephone Service Center (TSC) at 1-800-541-5555 from 8 a.m. to 5 p.m., Monday through Friday, except holidays.
- If you are a provider billing fewer than 100 claim lines per month, consider enrolling in the Small Provider Billing Assistance and Training Program offered by the Small Provider Billing Unit (SPBU). The SPBU may be reached by calling 1-916-636-1275.
- For official National Uniform Billing Committee (NUBC) UB-04 billing information for both paper claims and electronic transactions, refer to the <u>Subscription Information</u> web page of the NUBC website.
- For a list of the various code sets used in all transactions, visit the <u>Code Sets Overview</u> web page of the Centers for Medicare & Medicaid Services (CMS) website.

Electronic Claims

- For details on the electronic methods used for submitting, adjusting or voiding a claim, refer to the *Electronic Methods for Eligibility Transactions and Claim Submissions* manual section of the Part 1 manual.
- For an overview on the purpose of 837 claim submissions, requirements, special 837 claim submission instructions, review the *Electronic Data Interchange (EDI) 837* <u>*Claims Overview*</u> manual section of the Part 1 manual.
- For data specifications for electronic claims, refer to the <u>CA-MMIS 837 Claim Billing</u> <u>and Technical Manual</u>. The *CA-MMIS 837 Claim Billing and Technical Manual* includes specific data elements for inpatient and outpatient services, as well as potential error codes and their descriptions.
 - The CA-MMIS 837 Claim Billing and Technical Manual is accessible through the References tab of the <u>Resources</u> web page of the Medi-Cal Providers website.
- Additional electronic submission resources are available on the <u>Technical Publications</u> web page of the Medi-Cal Providers website.
- Visit the <u>Electronic Services Transition</u> web page of the Medi-Cal Providers website for the latest news and resources for a range of electronic services available in the Medi-Cal Provider Portal.
- Providers can access their Remittance Advice Details (RADs) through the Medi-Cal <u>Provider Portal.</u>
 - Review <u>Justice-Involved (JI) Reentry Initiative: Billing Tips for Select RAD Codes</u> for guidance on how to proceed after receiving select RAD codes.
- Review the <u>X12 EDI Examples</u> web page of the X12 website for examples of electronic claim transactions in the standard of Accredited Standards Committee X12 Version 5010 (ASC X12N v5010). Examples include, but are not limited to, 837 transactions.
- For an overview of the various electronic transactions, visit the <u>Transactions Overview</u> web page of the CMS website.
- For an overview of the national standards for electronic transactions, code sets, unique identifiers and operating rules, review the resources on the <u>HIPAA and Administrative</u> <u>Simplification</u> web page on the CMS website.
- For a list of electronic transactions and their corresponding standards and operating rules, visit the <u>Adopted Standards and Operating Rules</u> web page on the CMS website.

Paper Claims

- For reminders and privacy protection tips for paper claims, visit the <u>Billing Tips: Paper</u> <u>Claims</u> web page of the Medi-Cal Providers website.
- For instructions on how to complete the paper UB-04 claim form, refer to the <u>UB-04</u> <u>Completion: Inpatient Services</u> and <u>UB-04 Completion: Outpatient Services</u> sections of the Part 2 Provider Manual.
- To obtain *UB-04* claims forms, purchase from a vendor directly, such as a commercial retailer or office supply store.

Pertinent Provider Billing Manual Sections

- Review the <u>Justice-Involved (JI) Pre-Release Services</u> manual section for instructions on how to bill for JI pre-release services, JI-specific billing codes and modifiers, a list of provider types who can bill for JI services, reimbursable services, claim format requirements and relevant definitions.
- For more information on billing requirements for Medi-Cal laboratory services, refer to the following manual sections:
 - Pathology: An Overview of Enrollment and Proficiency Testing Requirements
 - Pathology: Billing and Modifiers
 - Proprietary Laboratory Analyses (PLA)
- For more information on the billing requirements for Medi-Cal radiology services, refer to the <u>Radiology</u> manual section.
- For radiology billing examples, refer to the <u>Radiology Billing Examples: UB-04</u> manual section.
- For billing instructions regarding physician-administered drugs, refer to the <u>Injections:</u> <u>An Overview</u> manual section.
- For more information on telehealth services and billing, refer to the <u>Medicine:</u> <u>Telehealth</u> manual section.
- Certain procedures and services are subject to authorization by Medi-Cal <u>before</u> reimbursement can be approved. Providers request authorization using a TAR form. Providers can visit the <u>TAR Overview</u> and <u>TAR Completion</u> manual sections for identifying the type of TAR they need and instructions on completing and submitting TARs.

Claim Submission Timeliness, Denials and Follow-up

- Review the <u>Claim Submission and Timeliness Overview</u> manual section of the Part 1 manual for information on claim submission deadlines, how reimbursement rates are impacted by submission timeliness, claim form preparation instructions and a general overview of the claims process.
- If inquiring about a payment adjustment, correction to a denied claim, or the status of a claim, providers can submit a *Claims Inquiry Form* (CIF). For more information on a CIF, refer to the following manual sections:
 - <u>CIF Overview</u>
 - CIF Completion
 - CIF Special Billing Instructions
- To resolve an issue with a claim using an appeal, refer to the <u>Appeal Process</u> <u>Overview</u> and <u>Appeal Form Completion</u> manual sections.
- For instructions on how to resubmit or void electronic claims that have already been adjudicated, visit the <u>Electronic Methods for Eligibility Transactions and Claim</u> <u>Submissions</u> manual section.
- For denied claims, review the <u>Understanding Common Denials</u> web page for additional clarity and potential solutions for select RAD codes.

Additional Resources

- Visit the <u>About Administrative Simplification</u> web page on the CMS website for a history and overview of the governance of electronic administrative actions.
- For an overview of the different types of CPT[®] codes, as well as the latest updates to CPT codes and products by the American Medical Association (AMA), visit the <u>CPT[®]</u> web page of the AMA website.
- For an overview of HCPCS codes and HCPCS news, visit the <u>Healthcare Common</u> <u>Procedure Coding System (HCPCS)</u> web page of the CMS website.
- For ICD-10 code files, resources and news, visit the <u>ICD-10</u> web page of the CMS website.
- Visit the <u>Justice-Involved (JI) Reentry Initiative</u> web page of the Medi-Cal Providers website for the latest JI billing news.
 - The Justice-Involved (JI) Reentry Initiative web page is accessible through the References tab of the <u>Resources</u> web page of the Medi-Cal Providers website.