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Avatar Bulletin Possible Duplicate Services by Program Report Enhancement Mental Health Treatment Programs

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Who is impacted?

MH Providers' Administrative and/or Clinical staff in Programs that bill Short-Doyle Medi-Cal (SDMC). Please share this bulletin with all clinical and administrative staff at your program.

What is happening?

Enhancements were made to this report to further assist MH Programs in identifying possible duplicate services and to make billing error corrections needed.

When does this take effect?

The report is now available

How does this impact your program?

The Report provides a list of all possible duplicate services entered in the CBHS Avatar system for a specific Reporting Unit. The Duplicate Service Override modifier code must be entered by Providers to indicate multiple services billed for the same Client on the same Day are valid. The modifier certifies to CBHS that the Provider has verified the Services listed are distinctly different or, was actually performed again for valid clinical reasons.

The appropriate Duplicate Service Override modifier code is entered by Provider Staff into Avatar/CalPM, in the "Edit Service Information" form. All multiple services billed for the same Client on the same day, requires the Modifier to be entered. If any of the services listed were billed in error, the Provider must contact the BHIS - Avatar Help Desk to request corrections needed.

Following is a general rule used for selecting the appropriate Duplicate Service Override Modifier Code:

Check if Services are SAME or DIFFERENT

If DIFFERENT

Add Modifier HE,59

Else

Check if the **Clinicians** are **SAME** or **DIFFERENT**

If SAME

Add Modifier HE,76

Else add Modifier HE,77

Entering a modifier in the 'Edit Service Information' form overrides the Avatar system cross-walk table used for generating SDMC claims. Therefore, additional modifiers are required for Services that were rendered in the Field or Community setting, or over the Telephone with the Client, and/or for Katie A. services (KTAICC or KTAIHBS). Please use the following for these.

Check if the Service Location is 'COMMUNITY' or 'PHONE'

If **PHONE**, the additional Modifier '**SC**' is required:

Add Modifier HE,59,SC

Or HE,76,SC

Or HE,77,SC

If **FIELD** or **COMMUNITY**, additional Modifier '**HQ**' is required:

Add Modifier HE,59,HQ

Or HE,76,HQ

Or HE,77,HQ

Modifier Grid

МН	Service Location	Service Type	Repeat procedure, same clinician	Repeat procedure, different clinician	Distinct Procedure
МН	Any, except Community (Field) or Phone, or Other Place of Service	Outpatient	HE,76	HE,77	HE,59
МН	Community (Field) or Other Place of Service	Outpatient	HE,76,HQ	HE,77,HQ	HE,59,HQ
МН	"Phone"	Outpatient	HE,76,SC	HE,77,SC	HE,59,SC
МН	Any, except Community (Field), Phone, or Other Place of Service	Katie A.	HK,76	HK,77	HK,59
МН	"Field" or "Other Place of Service"	Katie A.	HK,76,HQ	HK,77,HQ	HK,59,HQ
МН	"Phone"	Katie A.	HK,76,SC	HK,77,SC	HK,59,SC

<u>Place of service: "Community (Field)".</u> Specialty mental health services provided in the community are claimed directly to Medi-Cal. When a service is provided in the Community <u>and no other, appropriate place of service applies</u>, the service location code used in Avatar is '02' (Field) and the Modifier "HQ" is used. The 'HQ' modifier indicates the service was provided in the Community.

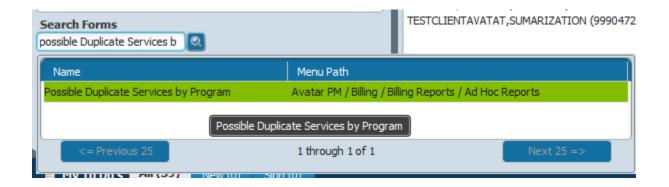
Note: the HIPAA 'Place of Service' code set uses '99' for "Other place of service not identified". In Avatar, the corresponding Service Location Code is '02'. This code is used only when no other Location Code can be used.

<u>Services provided by telephone.</u> Specialty mental health services provided over the telephone are billed directly to Medi-Cal. When a service is provided over the telephone to a Client, the place of service code '98' is entered in Avatar. Modifier "SC" indicates that the MH service was provided by Telephone. Note, only Medi-Cal covered services rendered over the telephone can be billed by Providers. Leaving a telephone message, scheduling an appointment, or other clerical functions are not reimbursable activities.

Menu Path> Avatar PM> Billing> Billing Reports>Ad Hoc Reports

Instructions: How to run this report in Avatar

1. Go to "Search Forms", type "possible" and click on "Possible Duplicate Services by Program."

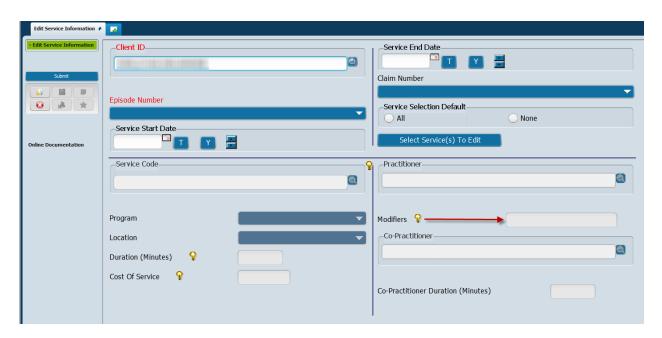


2. Enter your program, the start and end date. We recommend that you run this report at least monthly.



- 3. The report will group services that MediCal defines as a "duplicate" based on its Service Function Code. In the example below, ASMT1 and 90792 have the same SFC and therefore, look like a duplicate at the State level. The report also lists which modifier was entered. If no modifier was entered, this column will be blank.
- 4. Use the information and the modifier grid to enter the correct modifier(s) and format into the "Edit Service Information" screen.

Please use the correct Modifier format: Upper Case letters, Commas to separate, and No spaces or blanks in between



- 5. Once you have entered the modifier(s), if you re-run the report, the modifiers that were entered will appear in the Modifier column.
- For questions regarding accessing the report, please contact the Avatar Help Desk at 415-255-3788 or via e-mail at avatarhelp@sfdph.org
- For questions regarding Medi-Cal Billing and Service Correction Procedures, please contact Nanalisa Rasaily at 415-255-3610 or nanalisa.rasaily@sfdph.org