

ACUTE PSYCHIATRIC INPATIENT HOSPITAL SERVICES

SERVICE EXHIBIT II –

BEHAVIORAL HEALTH & PHYSICAL HEALTH

Notwithstanding language in section 9.0 of the Statement of Work (SOW), the following applies only for Behavioral Health and Physical Health services provided to Medi-Cal and uninsured clients at a General Acute Psychiatric Hospital (GACH). It is the Contractor's responsibility to review the SOW and Service Exhibit (SE) to ensure the appropriate billing is submitted.

Los Angeles County (LAC) shall reimburse acute inpatient psychiatric hospital services provided to Medi-Cal and uninsured clients of all ages receiving behavioral health services and the physical health services shall be claimed separately by the GACH to the managed care Plans. Contractor shall submit reimbursement claim for uninsured clients through LAC Department of Mental Health (DMH).

Medi-Cal and Uninsured clients of all ages who meet the criteria for medical necessity as defined by California Code of Regulations (CCR), Title 9, Section 1820.205 but also have a co-occurring medical condition are unable to obtain the medical clearance necessary for them to receive services on a behavioral health unit at an inpatient acute facility.

Both behavioral health and physical services will be provided in a licensed GACH to Los Angeles County residents, typically from Los Angeles Department of Health Services County Hospitals, GACH or referrals from the Los Angeles Psychiatric Mobile Response Team.

1. PROGRAM CRITERIA

- (1) Los Angeles Medi-Cal and Uninsured beneficiary through the Managed Care Plans (or other pre-approved funding sources such as full scope Medi-Cal and uninsured).
- (2) Patient meets criteria for a Lanterman Petris Short (LPS) involuntary hold as per an LPS designated clinician or meets criteria for medical necessity.
- (3) Patient has a medical condition that is preventing the patient from otherwise being accepted to an acute behavioral health unit as evidenced by at least five recent referrals and denials to an acute psychiatric inpatient unit.
- (4) The receiving hospital has bed availability and the means to address the medical condition. Receiving hospital are GACH designated as a LPS facility for this SE. According to Title 22, Section 100243, receiving hospital means a licensed GACH with a special permit for basic or comprehensive medical and psychiatric emergency services.
- (5) Referring hospital shall be responsible for cost of transportation. Referring hospital is the hospital that sends the clients with behavioral health and medical health condition.

2. PROCEDURE

- (1) LACDMH Intensive Care Division (ICD) will review each referral request to ensure it meets the program criteria;

- (2) GACH will determine that they are able to treat both the behavioral health and physical health needs of the patient;
- (3) The referring hospital will submit a package of clinical documentation to LACDMH - ICD to include the medical history and physical, the psychiatric comprehensive evaluation, recent psychiatric progress note(s), recent nursing progress note(s), current Medication Administration Records, and recent pertinent lab values within 24 hours in accordance with 42 CFR Subpart D and CCR, Title 22. LACDMH - ICD will securely share this package of documents and the hospital Single Point of Contact information with the GACH; and
- (4) If GACH accepts the patient, they will inform LACDMH – ICD. Referral hospital shall coordinate the transfer.

Invoice and Payment

GACH shall claim by submitting a Treatment Authorization Request and requisite supporting documentation to LACDMH for the behavioral health services. GACH shall separately invoice the Managed Care Plans for the physical health services.

Reimbursement Agency:

Medi-Cal Clients: State DHCS Fiscal Intermediary shall reimburse Contractor during the term of this Contract for Acute Psychiatric Inpatient Hospital Services provided to Medi-Cal clients.

Uninsured Clients: LACDMH shall reimburse Contractor during the term of this Contract for Acute Psychiatric Inpatient Hospital Services provided to Uninsured clients

For Uninsured clients, Contractor shall, no later than the 14th calendar day after discharge submit documentation for services provided with the Treatment Authorization Request (TAR) form to the County for approved services provided to eligible clients as described in SOW Section 2.0 Program Elements for Acute Psychiatric Inpatient Hospital Services. (<https://dmh.lacounty.gov/pc/cp/ffs1/>).

Contractor shall submit any supporting documentation, to the following:

Los Angeles County Department of Mental Health
Intensive Care Division — Treatment Authorization Unit
510 S. Vermont Avenue, 20th Floor
Los Angeles, CA 90020

The following is the Contractor's reimbursement process:

- a) DMH reviews the documentation provided for approval. Within 45 calendar days of receipt of the claims documentation, DMH will submit a log containing the claims and

the authorization results to the Contractor, with an Invoice Summary Request Form (invoice).

- b) Once the invoice has been completed by the Contractor and is agreed upon by both parties, it should be returned by email to:

By Email: TarUnit@dmh.lacounty.gov

Or

By Fax: (213) 402-2009

- c) ICD will forward the invoice for reimbursement to the Finance Services Bureau for reimbursement to the Contractor. Said invoice shall be in a form as specified by the County and will include an itemized accounting of all charges for each patient day.
- d) In the event of correction of a prior period invoice or reimbursement such as “retro-delete” (overpayment) or “retro-add” (underpayment), the adjustment will be shown and included in Contractor’s current invoice.
- e) DMH reviews the invoice for approval to reimburse Contractor within 30 calendar days after receipt of a complete and accurate invoice via the appropriate reimbursement method to be agreed upon by both parties.

Invoices shall be reimbursed at the base rate determined by LACDMH plus the rate for specialized programming and/or provision of more intensive mental health services provided to clients at County’s request, if applicable, and as approved by LACDMH.

LACDMH will inform Contractor annually of the reimbursement rate and, as needed, rate changes.

The Contractor shall comply with all requirements necessary for reimbursement as established by federal, State, and local statutes, laws, ordinances, rules, regulations, manuals, policies, guidelines, contractor bulletins/alerts and directives.

The Contractor shall be subject to any restrictions, limitation, or conditions imposed by County, State, and/or federal government entities, which may in any way affect the provisions or funding of the Contract, including, but not limited to, those contained in County Budget as adopted by County’s Board and/or State’s Budget Act.