



State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

DATE: December 31, 2013

MHSD INFORMATION NOTICE NO.: 13-24

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: CLAIMING SHORT-DOYLE/MEDI-CAL SPECIALTY MENTAL
HEALTH SERVICES FOR BENEFICIARIES WITH COVERAGE
THROUGH MEDICARE ADVANTAGE PLANS

REFERENCE: INFORMATION NOTICES 09-09, 10-11, 10-23, and 11-06

This Department of Health Care Services (DHCS) Information Notice provides instructions for county Mental Health Plans (MHPs) submitting claims for Medi-Cal reimbursement for Short-Doyle/Medi-Cal (SDMC) reimbursable specialty mental health services provided to beneficiaries eligible for both Medicare and Medi-Cal (dual eligibles) whose Medicare coverage is provided through a Medicare Advantage plan (also known as a Medicare Risk HMO or Medicare Part C plan).

Background

Currently, because Medicare Advantage plans may have broader service coverage than Fee-for-Service (FFS) Medicare Part A and Part B (collectively, FFS Medicare), MHPs must bill dual eligibles' Medicare Advantage plans for services, and receive either denial or partial payment from the plan, before billing SDMC for the balance remaining after the Medicare Advantage plan's adjudication. For dual eligibles with FFS Medicare, MHPs are not required to bill FFS Medicare for reimbursement for services which DHCS has determined are not covered by Medicare because the service, the provider type, or the combination of the service, provider type, and place of service are not reimbursable by Medicare. These conditions are identified in Information Notices 09-09, 10-11, 10-23, and 11-06.

New Billing Procedure for Dual Eligibles with Medicare Advantage Plan Coverage

Effective November 12, 2013, MHPs may bill directly to the State, claims for Medi-Cal specialty mental health services provided to dual eligibles with coverage through a Medicare Advantage plan under the following two conditions:

- 1) The Medicare Advantage plan must not provide coverage for specialty mental health services that is greater than that available through FFS Medicare (“FFS-equivalent plan”); and
- 2) The MHP must submit claims for Medicare Advantage dual eligibles in accordance with the conditions identified for FFS Medicare dual eligibles in Information Notices 09-09, 10-11, 10-23 and 11-06.

Under these conditions, the MHP, or its contract providers, need not first bill the Medicare Advantage plan, nor is coordination of benefits information for the Medicare Advantage plan required by SDMC when adjudicating the claims.

For beneficiaries whose Medicare Advantage plan is one of the Cal MediConnect managed care plans providing both Medi-Cal and Medicare benefits, once the Cal MediConnect demonstration project begins, no MHP action will be necessary before submitting claims directly to Medi-Cal for dual eligibles with the plan. The adjudication process in the SDMC system will automatically identify beneficiaries whose Medicare coverage is provided through a Cal MediConnect plan and apply the appropriate adjudication rules.

For FFS-equivalent Medicare Advantage plans other than Cal MediConnect plans, MHPs should solicit, from each such plan, a letter certifying that the plan provides no additional coverage for specialty mental health services beyond that which is provided by FFS Medicare. Each such letter must conform to the attached “Medicare Advantage Plan Specialty Mental Health Services Fee-For-Service Equivalent Coverage Certification”, and must specify the Medicare Advantage plan name, federal contract number, and calendar year(s) of service to which it applies, which must not include any year of service later than the year following the date of the letter. The letter may include prior calendar years, if applicable and needed for claiming prior year services. To submit signed certification letters to the DHCS, scan and email the letter to the Mental Health Services Division, County Customer Service Section at: MedCCC@DHCS.CA.GOV using the subject line: “FFS-Equivalent Coverage Certification”.

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Once DHCS has received and processed the certification letter for a plan, the SDMC system will treat the plan as a FFS-equivalent plan when adjudicating services for the service dates covered by the certification letter. As certification letters are processed, DHCS will publish the list of the Medicare Advantage plans and the covered years of service, indicating when the related claims may be billed to the SDMC system. This list will be available from the DHCS website at:

[http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-ShortDoyle2\(SD2\).aspx](http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-ShortDoyle2(SD2).aspx)

In order to minimize duplication of effort for MHPs when a single Medicare Advantage plan covers beneficiaries in more than one county, DHCS requires only a single certification letter from any plan for any service years covered by the letter, no matter how many counties the plan's coverage area includes.

MHPs with claims which were previously denied because the services were not first billed to the beneficiary's Medicare Advantage plan may submit replacement claims for any such denied claims which include services which no longer require billing to the Medicare Advantage plan before billing Medi-Cal under the procedures outlined in this Information Notice. Such replacement claims may be submitted once DHCS has received and processed the letter certifying the plan as FFS-equivalent, as shown on the list of certified FFS-equivalent plans posted on the DHCS website. Where the 15-month period for submitting such replacement claims has elapsed, MHPs are authorized to submit the replacement claims beyond the 15-month limit, using Delay Reason Code "9", so long as they are submitted not later than September 30, 2014.

Questions regarding the content of this information notice or its attachment may be directed to the County Customer Service Section at MedCCC@dhcs.ca.gov or (916) 650-6525.

Sincerely,

Original Signed By

Karen Baylor, Ph.D., LMFT, Deputy Director
Mental Health and Substance Use Disorder Services

Attachment