



Health Care Agency Behavioral Health Services Policies and Procedures	Section Name:	Compliance
	Sub Section:	Billing
	Section Number:	07.01.02
	Policy Status:	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised

	SIGNATURE	DATE APPROVED
Chief of Operations Behavioral Health Services	_____	_____

SUBJECT: Billing Compliance

PURPOSE:

To ensure that services provided by Behavioral Health Services (BHS) staff are accurately and appropriately coded and billed.

POLICY:

All services provided and billed shall be compliant with payor requirements.

SCOPE:

This policy and procedure applies to all BHS providers and financial/reimbursement staff.

REFERENCES:

HCA Compliance Office Policy and Procedure (P&P) # I 4.03 [Employee Hotline Operation](http://intranet.ochca.com/docs/compliance/p&p/I-04.pdf)
<http://intranet.ochca.com/docs/compliance/p&p/I-04.pdf>

HCA Compliance Office P&P #I 5.04 [Issue Reporting](http://intranet.ochca.com/docs/compliance/p&p/I-05.pdf)
<http://intranet.ochca.com/docs/compliance/p&p/I-05.pdf>

BHS P&P # 04.02.02 [Communication between Behavioral Health Administration and Medical Billing Unit Personnel](http://intranet/docs/bhs/p&p/04.02.02.pdf)
<http://intranet/docs/bhs/p&p/04.02.02.pdf>

PROCEDURE:

- I. All BHS staff responsible for providing and processing services shall receive training on coding and documentation of services by training staff designated by Authority and Quality Improvement Services (AQIS).
- II. All staff shall receive training coordinated by the Health Care Agency (HCA) Office of Compliance (OOC) on the HCA Compliance Program and on issues related to fraud and abuse.

- III. Fraud and Abuse issues shall also be addressed in the Coding Training for Clinicians and Support Staff involved in billing.
- IV. If a new staff member is to provide services prior to receiving the training, the Service Chief (SC) or their designee who has received the training shall mentor the new staff member and review all Encounter Documents (ED) and Progress Notes of the new staff member prior to the submission of the ED for processing and billing.
 - A. For programs using the Electronic Health Record (EHR), the Service Chief shall electronically review all the progress notes created by a new staff member. If a service was billed inappropriately, the Service Chief shall back out the service and provide education to the new staff person regarding the reason the note was backed out.
- V. If the new employee has not completed the training described in steps I through IV by 30 days from the employee's employment date, the employee shall immediately stop providing services.
- VI. All staff are responsible for accurate and complete processing of documentation related to billing.
- VII. All staff are required to take action should they have any concerns that services are not being accurately and appropriately coded and billed. The options for action are detailed in the HCA Compliance Office P&P # 4.03 Employee Hotline Operation & 5.04 Issue Reporting.
- VIII. Providers:
 - A. Are responsible to accurately and appropriately code and document services provided.
 - B. Any staff person who feels uncertain regarding the appropriate coding and or billing of a service should consult with their Service Chief, AQIS chain of command, the Auditor Controller Medical Billing Unit Coder, or any other resource as outlined in the BHS P&P on Communication between Program, Administration and Billing.
- IX. Office support:
 - A. Support Staff are responsible to review the ED to ensure that all required fields are completed.
 - 1. For programs using the Electronic Health Record (EHR), there are no longer ED's to review. However, clinicians are responsible for entering correct information into the pre-registration fields within the EHR when creating their own financial information number (FIN) for billing.

- B. Support staff are responsible to accurately and appropriately process the documentation given to them by providers, and to do so within one business day of receiving the ED from the provider.
 - 1. This does not apply to programs using the Electronic Health Record.

- X. No disciplinary action or retaliation shall be taken against an employee for reporting in good faith a perceived issue, problem, concern, or violation regarding billing compliance to a supervisor, manager, Human Resources, the Office of Compliance, the Compliance Hotline, or regulatory agency. "In good faith" simply means that the employee actually believes or perceives the information reported to be true. The value and dignity of each person and the right as an employee to be treated fairly and with respect shall be recognized by all HCA staff.