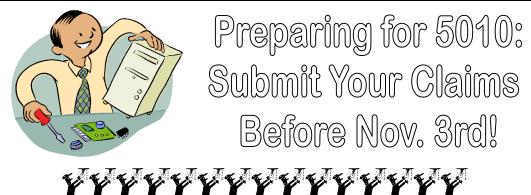
LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH / REVENUE MANAGEMENT DIVISION

RMD Bulletin

Knowledge is power...



Because of upcoming changes to the Integrated System (IS), the Los Angeles County Department of Mental Health is requiring all non-governmental agency providers to submit all claims to the IS no later than November 3, 2011 (for Electronic Data Interchange (EDI) providers) or November 4, 2011 (for Direct Data Entry (DDE) providers). Claims submitted to the IS after these dates will not be received by the State until *March or April 2012*.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that all electronic administrative and financial health care transactions conform to a standard format. Effective January 1, 2012, all electronic health care transactions, must be in the new 5010 format to comply with federal regulations. These electronic transactions include claims and eligibility checks. Federal regulations prohibit any electronic transaction in non-compliant formats. In accordance with the law, DMH will not accept or submit claims in the current format (4010) beginning January 1, 2012. Over the next several months, DMH is making changes to bring the IS into compliance that will allow us to accept and submit claims in the new format in 2012. These changes will impact all providers submitting any claim through the IS.

According to the current 5010 implementation schedule, DMH anticipates that the IS will be upgraded and able to accept 5010 compliant transactions in February or March of 2012; we

anticipate the first submission of 5010 claims to the State to occur in March or April of 2012. In order to assure that all claims in the current format are received by the State before December 31st, DMH will send its last batch of claims to Medi-Cal in the current format on or before December 23, 2011. For claims to be submitted to the State on or before December 23rd, all non-governmental agency providers must be current with their claiming and have all Medi-Cal claims submitted to the IS before November 3, 2011 (EDI) or November 4, 2011 (DDE). This allows enough time to go through the Certified



Public Expenditure process. Claims submitted after these dates will not be sent to the State until March or April of 2012 - after the IS has been upgraded to the 5010 format.

Please note that there will be <u>NO EXCEPTIONS PROVIDED TO THE ABOVE DATES</u> and that claims for services rendered in April 2011 or before must be submitted, with the appropriate good cause late code, if applicable, before the November 3rd and 4th deadlines.

We're here to help you...

If you have any questions or require further information, please do not hesitate to contact RMD at (213) 480-3444 or <u>RevenueManagement@dmh.lacounty.gov</u>.