



The CP Connection

Issue 62

The Community Partner Newsletter

October 2020

Community Partners,

Happy Halloween! This year's celebrations will look different, but I hope everyone has a good holiday. We are carving pumpkins tonight and are planning to watch a Halloween movie outdoors tomorrow.



After months of enrollment increase, MHLA saw a drop in enrollment from nearly 140,000 in August to about 123,000 in September. This was expected but we are hoping to get the numbers back up as soon as possible. Please see page 2 for how to determine who didn't renew. Let us know if you need guidance on re-enrollments, which can be done by phone. We want to ensure MHLA participants have health coverage during this critical time. The drops also impact how much your clinics get paid. As a reminder, clinics are only eligible for MGF payment for enrolled participants who've had a visit in the prior 24 months.

We've been learning from clinics— and the data — that there are some challenges with implementation of the mental health project. Please follow instructions on page 2 on how to submit claims and scores on the PHQ-9 (and GAD-7 when applicable). Reminder: CPs must conduct the screening process (which includes the PHQ-9) on all MHLA participants and must provide prevention services to anyone who would benefit from them.

The FY 20-21 annual audits will begin next week. The new audit tools are posted on the website and the audit team will contact you a few weeks before your schedule audit. All FY 20-21 audits will be conducted remotely.

Finally, last month we reported that DHS has a new contract with Lyft. DHS staff will coordinate the rides if deemed necessary for specialty care appointments. If MHLA participants have a need for transportation, they or your clinic staff can inform the DHS appointment scheduler.

Stay Safe! — Anna Gorman

Don't Forget to Vote!



Featured in This Issue:

- ♦ **Reminder: Don't Forget to Vote!**
- ♦ **Diagnosis Codes Required on Dental Claims**
- ♦ **Mental Health Claim Instructions**
- ♦ **Drop in Renewals and Enrollment**

Diagnosis Codes Required on Dental Claims

Francia Nava, Program Advocate

Community Partners (CPs) will be required to provide diagnosis code(s) on all dental claims submitted to American Insurance Administrators (AIA), effective December 1, 2020. The diagnosis code(s) shall be noted in box number 34. The changes are being made to meet encounter data submission requirements for the California Department of Health Care Services (DHCS).

The change is described in Provider Information Notice (PIN) 20-03, which was sent out this week along with instructions for Completion of ADA J430D claim form. These revised dental billing instructions are also posted on the MHLA website under the section titled, "Providers, Notices and Contracts", in Tab 6: Dental Formulary & Service Billing Information. Questions? Contact your Program Advocate.

Visit us on the MHLA [website](#)!

Mental Health Claim Instructions

Francia Nava, Program Advocate

By now all agencies have started providing Mental Health Prevention Services (MHPS). All clinics are required to submit encounter data each time a MHLA participant undergoes the complete screening process and each time a participant receives services (such as stress management). Every time a MHLA participant undergoes the complete screening process, CPs shall submit a claim with procedure code H0002. Every time a MHLA participant receives services, CPs shall submit a claim with procedure code H2014. These are the only two allowable codes.

Reporting data on claim with H0002 (screening)

PHQ-9 only: If you administered only the PHQ-9, enter procedure code H0002 in the first service line. Put "P1" (for PHQ-9) in the 1st modifier box and the two-character PHQ-9 score in the 2nd modifier box. Example: Put "00" if the score is 0 or put "07" if the score is 7.

PHQ-9 and GAD-7: If you administered both the PHQ-9 and the GAD-7, enter procedure code H0002 in the first service line. Put "P1" (for PHQ-9) in the 1st modifier box and the two-character PHQ-9 score in the 2nd modifier box. On the next service line, enter procedure code H0002, then "G1" (for GAD-7) in the 1st modifier box and the two-character GAD-7 score in the 2nd modifier box.

Reporting data on claim with H2014 (services)

If you provide services and then administer the PHQ-9 (or GAD-7) again, you will need to include the scores. If you are reporting scores for PHQ-9 and GAD-7 with procedure code H2014: Enter procedure code H2014 on the applicable service line and input "P1" (for PHQ-9) in the 1st modifier box and the two-character PHQ-9 score in the 2nd modifier box. On the next service line enter procedure code H2014, followed by "G1" in the 1st modifier box and the two-character GAD-7 score in the 2nd modifier box.

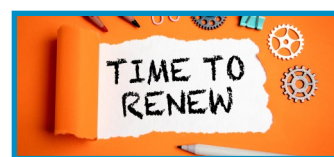
If you provide services but don't administer the PHQ-9 or GAD-7, enter H2014 procedure code and leave the modifier fields blank.

Reminders: Every claim form with H0002 must have a score for the PHQ-9 (and GAD-7 if applicable). The score should never be left blank when you report procedure code H0002. Always include P1 for PHQ-9 or G1 for GAD-7 on the modifier box when you are reporting scores (either with H0002 or H2014).

If you have any questions, please don't hesitate to contact your Program Advocate.

Drop in Renewals and Enrollment

Tom Lau, Eligibility Review Unit



Due to COVID-19, application renewals with due dates from March to July 2020 were extended to August 31, 2020. A significant number of participants did not renew by that date, leading to a significant drop in enrollment.

In addition, there was a 16% drop in the rate of renewals due in August 2020 compared to the same month last year. This may stem from safer-at-home measures and participants' lack of awareness that they could renew via telephone.

To address this reduction in renewals, we encourage Community Partners to:

- ◆ Identify participants whose renewal has or is about to lapse. The easiest way to do this is to pull the OEA Medical Home Summary Report.
- ◆ Reach out to these participants and inform them that renewals/re-enrollments can be done by telephone and help them with their renewal/re-enrollment.
- ◆ Let us know if you need help. We can provide you with the names of those who disenrolled in September.

As you know, during the pandemic, MHLA program coverage is more vital than ever.



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