



Quality Assurance Bulletin

Office of Performance Data

County of Los Angeles – Department of Mental Health

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UPDATES TO CO-PRACTITIONERS

Currently, when there are multiple rendering providers (hereafter called practitioners) involved in a service, a single progress note may be written and a single claim submitted which groups the time of all practitioners under one practitioner and one National Provider Identifier (NPI). This Bulletin is to notify all providers of changes related to co-practitioner claim submission requirements per Department of Health Care Services (DHCS) Information Notice 18-002 and its impact on documentation.

Claiming Requirements

Effective April 10, 2018, DHCS will require a separate claim for each practitioner with his/her own NPI. Providers will no longer be able to submit a single claim for services involving two or more practitioners. The purpose of the change is to allow DHCS to validate the NPI number against excluded, terminated and suspended practitioner lists.

Note: DHCS has stated that the April 10, 2018 effective date is based on the date the claim is submitted to DHCS. Contracted providers must adhere to this requirement for all claims submitted to DMH after February 1, 2018. Refer to CBO Dispatch 18-002 for additional information regarding claiming requirements.

Documentation Requirements

DHCS Information Notice 17-040 states that a single progress note may be written when co-practitioners are involved in a service so long as the intervention(s) of each practitioner is clearly stated. The Organizational Provider's Manual currently states:

“When more than one practitioner participates in the same service, the names of each practitioner participating in the service must be included in the note with his/her specific intervention/contribution and time.”

Impact for Contracted Providers:

The Department of Mental Health will continue to allow a single progress note for multiple practitioners only as long as the contracted provider is also able to meet the new DHCS claiming requirements. If contracted providers are not able to meet the requirement to include each practitioner on the claim, then separate progress notes must be written for each practitioner claiming time for the service.

Impact for Directly Operated Providers:

Directly operated staff do not need to make any changes to how services are documented. The QA Division will work with the Central Information Office Bureau (CIOB), Central Business Office (CBO), Office of Clinical Informatics and managers of the Juvenile Justice programs on how to claim for co-practitioners. Please attend or listen to the January 25, 2018 QA/Error Correction Call In and the February 7, 2018 Super User Call In for additional information.

Note: The definition of practitioner in DMH Policy 401.03 will be updated to be in-line with this new requirement for each practitioner's NPI to be listed on the claim.

If directly-operated or contracted providers have any questions regarding this Bulletin, please contact your Service Area QA Liaison.

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