



CBO DISPATCH

The “B” means BUSINESS

CBO Dispatch No.: NGA 19-005

Issue Date: April 08, 2019



Inpatient Claims Without a Diagnosis



Recently, the Central Business Office (CBO) has noticed an increase in the number of claims that are missing a diagnosis for the client. The client’s diagnosis is required on claims. Without it, electronic claims will be rejected by the State.

Outpatient claims to the State use the diagnosis that is included on the 837P claim from non-governmental agency (NGA) contract providers. Outbound Medi-Cal claims for inpatient services use the primary admission diagnosis from the Diagnosis form in the Integrated Behavioral Health Information System (IBHIS) as well as the principal diagnosis submitted on the 837I. To ensure that a diagnosis is included on all outbound Medi-Cal claims, there must be a valid ICD-10 (International Statistical Classification of Diseases and Related Health Problems (ICD), revision 10) diagnosis covering the dates of service for the client in IBHIS. The diagnosis in IBHIS must be associated with the current IBHIS episode.

Inpatient providers must search for the presence of a diagnosis for the client in the IBHIS Diagnosis form. If there is no diagnosis for the client associated to the inpatient episode, inpatient providers must add a diagnosis for the client before submitting the claim to the Department of Mental Health.

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IBHIS providers, if you have any questions or need additional information, please use the following link create a HEAT Ticket using the HEAT app available on the LACDMH secure website: [Mental Health SSLVPN](#).



DOES NOT APPLY TO FEE-FOR-SERVICE PROVIDERS