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Owner: Jeffrey White: Fiscal Informatics & Analytics Administrator
Policy Area: Management & Budget
References:

Costing and Reporting Integrity: Procedure Code Work Group (PCWG)

POLICY

It is the policy of Detroit Wayne Mental Health Authority (DWMHA) to ensure consistent and accurate encounter/claims data.

PURPOSE

- A. DWMHA strives to ensure the highest corporate compliance, while establishing standards for the proper use of procedure codes (both CPT - Current Procedural Terminology and HCPCS – Healthcare Common Procedure Coding System). In order for DWMHA to fulfill its overall managed care responsibilities, a comprehensive coding and costing program has been established, with the Procedure Code Work Group (PCWG) as a key component. The PCWG will be the single entity responsible for providing oversight, detailed directions and answers to questions regarding the use of procedure codes, modifiers, place of service codes, staff qualifications and other related encounter data elements for both within DWMHA and its network of providers.
- B. A Procedure Code Manual and, throughout the year, Bulletins will be issued by the PCWG. The Procedure Code Manual will be updated periodically. These documents will clarify the approved use of procedure codes, modifiers, place of service codes, staff qualifications and related encounter data elements for the purpose of submitting or reporting claims and encounters to DWMHA. The intent of these documents is to provide further direction while supporting established rules and guidelines that are published by the State of Michigan and/or national standards.
- C. Written communications from the PCWG (i.e., the Procedure Code Manual, Bulletins and e-mail responses from the e-mail box described in section V., paragraph E) are the only official and approved source of the information described in paragraph B, above. Other DWMHA staff may communicate such information to the MCPNs or Direct Providers in other venues, but this communication must be consistent with the written communications from the PCWG and should refer the providers to the appropriate written communication from the PCWG.
- D. Only the PCWG may give directions to modify procedure codes, modifiers, place of service codes, staff qualifications and related encounter data elements in the DWMHA information system.

APPLICATION

1. This policy applies to DWMHA and its MCPNs, and all providers under contract to either entity.
2. Who is required to implement and adhere to this policy: DWMHA Board, DWMHA Staff, Contractual Staff, MCPN Staff, Network Providers, CVO, Access Center
3. Who does this policy serve: Adult, Children, I/DD, SMI/SEI, SED,SUD
4. What service line does this policy impact: MI-HEALTH LINK, SUD, Autism, Medicaid

KEY WORDS

- A. Procedure Code Work Group (PCWG)
- B. Procedure Code Manual
- C. PCWG Bulletins

STANDARDS

- A. The PCWG shall consist of a multidisciplinary team which at a minimum includes a representative from Managed Care Operations, Information Technology, Finance, Quality Management, Utilization Management, Corporate Compliance, Claims Management (Certified Coder) and Clinical Practice Improvement.
- B. DWMHA staff, MCPN staff, and staff of providers under contract to either entity will abide by the Procedure Code Manual and Bulletins as the official DWMHA documents which clarify the use of procedure codes, modifiers, place of service codes, staff qualifications and related encounter data elements.
- C. The PCWG does not abrogate a provider's responsibility to comply with state and federal coding and reporting requirements. If a provider identifies an apparent discrepancy between documents issued by the PCWG and those issued by state or federal agencies, the provider shall bring those issues to the PCWG for resolution.
- D. DWMHA staff, MCPN staff, and staff of providers under contract to either entity will use the PCWG as the forum to define and manage the use of codes, modifiers, place of service codes, staff qualifications and related encounter data elements.
- E. DWMHA has established an e-mail box for all questions and suggestions about codes or modifiers and for requests for new codes or modifiers: procedure.coding@dwmha.com. This e-mail box will be managed by the PCWG leadership and responses will be sent within five (5) business days of receipt.
- F. Any Claims or Encounters submitted to DWMHA with incorrect or unapproved procedure codes, modifiers or other encounter reporting elements may be denied or rejected by DWMHA.
- G. In some instances, the MPCN or service provider may choose to develop a procedure code crosswalk and/or make modifications to their information system to meet the reporting requirement in paragraph F, above. If so, the MPCN or service provider is responsible to ensure that their crosswalk and/or information system has been designed correctly.
- H. MCPNs have the responsibility to disseminate data reporting changes or clarifications issued by DWMHA to their provider network. DWMHA will have the responsibility for disseminating data reporting changes or clarifications to all providers with whom it directly contracts.

QUALITY ASSURANCE/IMPROVEMENT

DWMHA shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of MCPNs, their provider subcontractors, and providers directly under contract with DWMHA must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

COMPLIANCE WITH ALL APPLICABLE LAWS

DWMHA staff, MCPNs, contractors and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

LEGAL AUTHORITY

- A. Michigan Mental Health Code Act 258, PA 258 of 1974, as revised.
- B. Michigan Department of Health and Human Services (formerly Michigan Department of Community Health) Administrative Rules.
- C. MDHHS (formerly MDCH) contract reporting requirements.

RELATED POLICIES

None

RELATED DEPARTMENTS

- 1. Claims Management
- 2. Clinical Practice Improvement
- 3. Compliance
- 4. Customer Service
- 5. Information Technology
- 6. Integrated Health Care
- 7. Managed Care Operations
- 8. Quality Improvement
- 9. Utilization Management

CLINICAL POLICY

NO

INTERNAL/EXTERNAL POLICY

EXTERNAL

EXHIBIT(S)

NONE

Attachments:

No Attachments

Approval Signatures

Approver	Date
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