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North Sound BH-ASO Memorandum 2026-04

DATE: August 28, 2026

TO: North Sound BH-ASO Provider Network – Crisis Stabilization Providers

FROM: North Sound BH-ASO Contracts

RE: Utilization Management, Data Submission, and Invoice Processes for Third Party Liability at CSUs/CRCs

Dear Crisis Stabilization Unit (CSU) and Crisis Relief Center (CRC) Providers:

North Sound Behavioral Health Administrative Services Organization (North Sound BH-ASO) is issuing this memorandum to notify provider network partners of expectations regarding utilization management, data submission, and invoicing processes for Third Party Liability at facility-based crisis stabilization (S9485) and crisis relief center services (S9484).

Third-Party Liability (TPL)

Medicaid and North Sound BH-ASO are the payers of last resort and providers will make every effort to determine the appropriate Third-Party payer for services rendered. Providers will attempt to recover any Third-Party resources available and shall maintain records pertaining to TPL collections on behalf of individuals for audit and review. All TPL collections must be reported on a monthly invoice to North Sound BH-ASO in the Third-Party payer report section. These amounts will be deducted from the invoice for the month in which the revenue was reported. Please refer to the Invoice Processes section for more information.

Third-Party collections that providers should report to North Sound BH-ASO include all payments for crisis stabilization or crisis relief center services from payers outside the BH-ASO. This may include Medicare, commercial insurance, and Medicaid with no assigned MCO. In the case of Medicaid with no assigned MCO (including AI/AN), providers should bill the HCA directly and report that revenue on the Third-Party payer report. If providers need more information on how to submit claims to HCA, please contact **ffsquestion@hca.wa.gov**.

Utilization Management

Providers will submit authorization notifications for all individuals when they are admitted to the facility, regardless of payer. Providers will also submit concurrent review requests and relevant supporting clinical documentation for individuals receiving crisis stabilization (S9485) services for all stays longer than five calendar days. Providers will submit all authorization notifications and concurrent review requests within 24 hours. This allows North Sound BH-ASO to track utilization and ensure medical necessity is met for continued stays in a timely manner.

Data Submission

Providers will submit data in a timely manner for all individuals, regardless of payer. Data transactions will include:

- Notification of an admission requires the submission of the 980.00 supplemental data transaction. This notification transaction is due within 24 hours of admission to the facility.
- Extension to a stay requires the submission of the 981.00 transaction and accompanying clinical webform submission. Response files are delivered and should be reviewed for rejections promptly. Only records in an accepted status are reviewed by clinicians.
- Service encounters for all individuals.
- All individuals currently receiving facility-based crisis stabilization and crisis relief center services will be included on the daily crisis log report. The crisis log is uploaded to the SFTP folder by 01:00am, each day, for the day's previous census records.

The North Sound BH-ASO Supplemental Provider Services Guide should be reviewed for more detail regarding submission of the transactions.

Invoice Processes

Providers who submit a census to North Sound BH-ASO accompanying their monthly invoice for facility-based crisis stabilization services will include all individuals who received services the prior month, regardless of primary payer. Individuals will be listed on the appropriate Medicaid MCO Client List or Non-Medicaid Client List. The census should align with the authorizations and service encounters submitted for that month. Once remittance has been received from a Third-Party payer, the corresponding client information and amount collected must be included on the Third-Party Supplemental Information tab of the next monthly invoice. The total amount collected from Third-Party revenue will be deducted from that invoice in order to reconcile previous Medicaid and Non-Medicaid payments with any Third-Party collections.

Providers who are paid Fee-for-Service by North Sound BH-ASO for crisis stabilization or crisis relief center services will submit a monthly Third-Party

Supplemental Report that includes the corresponding client information and amount collected from Third-Party payers during the prior month. The total amount collected from Third-Party revenue will be deducted from the next Fee-for-Service payments in order to reconcile previous Medicaid and Non-Medicaid payments with any Third-Party collections.

North Sound BH-ASO is in the process of updating provider invoices and the Supplemental Provider Service Guide with this information.

If you have questions regarding this memorandum or need additional clarification, please contact Anna Cesa, North Sound BH-ASO Crisis Services Project Manager (**anna_cesa@nsbhas.org**).

Cc: North Sound BH-ASO Contracts; North Sound BH-ASO Staff