

Effective Date: 12/30/2019

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North Sound Behavioral Health Administrative Services Organization, LLC

Section 3000 - Fiscal: Third-Party Resource Requirements

Authorizing Source: HCA Contract

Approved by: Executive Director Date: 12/30/2019 Signature:

POLICY #3044.00

SUBJECT: THIRD-PARTY RESOURCE REQUIREMENTS

PURPOSE

To clarify how North Sound Behavioral Health Administrative Services Organization (North Sound BH-ASO) complies with third-party liability and service fee requirements.

DEFINITIONS

Third Party Resources means those resources that can be used to pay for services prior to billing the North Sound BH-ASO. For non-Medicaid individuals it is private insurance, Medicare and personal resources for people of means.

Coordination of Benefits means those activities undertaken by the North Sound BH-ASO and their network providers to ensure that appropriate benefits, as identified in the treatment plan, are properly funded using all available resources.

POLICY

1. North Sound BH-ASO will comply with Health Care Authority (HCA) contract requirements regarding the need to identify, pursue and record third-party liability in accordance with contract requirements.
2. North Sound BH-ASO will comply with HCA contract requirements regarding sliding scale service fees. Individual's benefits are funded through all available third-party resources with Medicare, Medicaid, state and grant funding being billed as a last resort.
3. All funds recovered from third-party resources are treated as a reduction of expenses paid and are used to support the public Behavioral Health system.

PROCEDURE

1. The North Sound BH-ASO provider network subcontracts include the requirement to identify, pursue and record third-party resources. This required subcontractor process is subject to quarterly certification.
2. North Sound BH-ASO provider network subcontracts include the requirement to document and review the individual service plan to coordinate the payment of the benefits.
3. When an individual has alternative payer sources, the explanation of benefits (EOBs) statement from the alternative payer can be reviewed to verify the denial of payment from this payer.
4. North Sound BH-ASO provider network subcontractors shall pursue third party resources. North Sound BH-ASO subcontractors shall bill applicable insurance companies prior to billing North Sound BH-ASO and provide documentation upon request.
5. All third-party collections related to North Sound BH-ASO services will be submitted to the BH-ASO

- within 45 calendar days from the date the provider receives the third-party reimbursement.
6. During provider administrative contract monitoring, a random sampling of third-party collections and potential collections will be reviewed to determine if individuals' benefits were funded appropriately and to determine if those funds were accounted for properly.
 7. If through the financial review, periodic chart review or other areas observed during the contract monitoring, any issues are identified concerning appropriate funding of benefits, the Provider must address such issues immediately and a Plan of Correction will be provided to North Sound BH-ASO within 30 calendar days that details how the issues were resolved. North Sound BH-ASO will follow-up periodically, to ensure that the Plan of Correction was fully implemented.
 8. North Sound BH-ASO will ensure it collects signed and certified third-party reports from providers quarterly and properly reports the information to HCA.

Sliding Scale Service Fees

North Sound BH-ASO must not deny the provision of Crisis Services, Involuntary Treatment Act (ITA) services or Substance Use Disorder (SUD) involuntary commitment services to individuals based on ability to pay. Providers must develop a sliding fee scale for Individuals taking into consideration an individual's circumstances and ability to pay. The fee schedule must be reviewed and approved by the North Sound BH-ASO.

North Sound BH-ASO will ensure providers with sliding scale fee policies adhere to these requirements:

1. There is a written sliding fee schedule whose provisions are non-discriminatory;
2. Include language in the sliding fee schedule that no individual shall be denied services due to inability to pay for crisis services and ITA services;
3. Provide signage and information to individuals to educate them on the sliding fee schedule;
4. Protect individuals' privacy in assessing individual fees;
5. Maintain records to account for each individual's visit and any charges incurred;
6. Charge individuals at or below 100% of Federal Poverty Level (FPL) a nominal fee or no fee at all; and,
7. Develop at least 3 incremental amounts on the sliding fee scale for individuals between 101-220% FPL.

Monitoring

This policy is mandated by contract and is monitored by the North Sound BH-ASO utilizing:

1. The Biennial North Sound BH-ASO Provider Administrative review; and/or
2. Utilization Management reviews and standard reports data.

ATTACHMENTS

3044.01 Provider Report Form

3044.02 Third-party Report Form