



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

DATE: November 14, 2007

BHRS POLICY: 07-04

SUBJECT: Claims Processing Guidelines and Procedures

AUTHORITY: Federal (CMS) Managed Care Manual, Ch. 13; San Mateo County Mental Health Services Compliance Plan

AMENDED: December 2011; Technical Edit February 2016; January 2017; July 1, 2018

Attachments A – F: revised December 20, 2011
Attachment G: added April 2012
Attachment J: added July 1, 2018
Attachment K: added September 2020
Attachment L: added August 2021
Attachment M: added January 2022

ATTACHMENTS:

- A. Procedure for Preparing and Distributing EOP's
- B. Procedure for Receiving and Processing Claims from Providers
- C. Procedure for Processing Payable MHP Contractor Claims
- D. Procedure for Processing Denied MHP Claims
- E. Procedure for Investigating Pended Claims before Final EOP Run
- F. Procedure for Paying Interest on Non-Contract Claims
- G. Procedure for Adjusting Overpaid and Underpaid Claims
- H. Procedure for Terminating or Reducing Authorized Services due to Loss of Eligibility
- I. Procedure for Setting up Providers and Fee Schedules
- J. Procedure for Processing Non-Contractor Claims
- K. Procedure for Updating Supplemental Payment for Prop 56
- L. Procedure for Reimbursing Provider Claims for Telehealth and Phone Services
- M. Procedure for Identifying, Reporting, and Recovering Mental Health and Drug Medi-Cal Overpayments



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PURPOSE

To establish an omnibus policy that defines procedures concerning significant aspects of claims processing for the Mental Health Plan (MHP).

DEFINITION

Centers for Medicare and Medicaid Services (CMS) – Federal agency which administers Medicare, Medicaid, and the State Children’s Health Insurance Program

POLICY

The MHP is committed to processing claims quickly and efficiently, in accordance with CMS required guidelines and timeframes. The MHP accepts paper claims from providers and provides appropriate notification to providers regarding claims determinations.

The Assistant Director and Billing Manager are responsible for overseeing the claims activity of the MHP. They are responsible for ensuring that claims are handled appropriately and that appropriate and timely notice is given to providers regarding claims payment determinations.

Approved: Signature on File
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