



<b>Policy Number:</b>	<b>07-04</b>
<b>Policy Name:</b>	<b>Claims Processing Guidelines and Procedures</b>
<b>Authority:</b>	Federal (CMS) Managed Care Manual, Ch. 13; San Mateo County BHRS Compliance Plan and Program
<b>Original Policy Date:</b>	November 14, 2007 Effective Date: 11/14/07
<b>Supersedes:</b>	N/A
<b>Policy Last Revised:</b>	08/2022
<b>Attachments:</b>	<ul style="list-style-type: none"> <li><b>A.</b> Procedure for Preparing and Distributing EOP's</li> <li><b>B.</b> Procedure for Receiving and Processing Claims from Providers</li> <li><b>C.</b> Procedure for Processing Payable MHP Contractor Claims</li> <li><b>D.</b> Procedure for Processing Denied MHP Claims</li> <li><b>E.</b> Procedure for Investigating Pended Claims before Final EOP Run</li> <li><b>G.</b> Procedure for Adjusting Overpaid and Underpaid Claims</li> <li><b>I.</b> Procedure for Setting up Providers and Fee Schedules</li> <li><b>J.</b> Procedure for Processing Non-Contractor Claims</li> <li><b>L.</b> Procedure for Reimbursing Provider Claims for Telehealth and Phone Services</li> <li><b>M.</b> Procedure for Identifying, Reporting, and Recovering Mental Health and Drug Medi-Cal Overpayments</li> <li><b>N.</b> Procedure for System Maintenance</li> </ul>

**PURPOSE**

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

**DEFINITIONS**

**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.

**SIGNATURES**

Approved: \_\_\_\_\_ *Signature on File*  
 Dr. Jei Africa, PsyD, FACHE  
 BHRS Director

Approved: \_\_\_\_\_ *Signature on File*  
 Sheryl Uyan  
 BHRS Acting Compliance Officer

**REVISION HISTORY**

<b>Date of Revision</b>	<b>Type of Revision</b>	<b>Revision Description</b>
02/24/26	<b>Amend</b>	<b>Attachment M:</b> Information added on how to address service corrections including info about resolving overpayments; frequency of Contractor provider chart review updated from annually to monthly.
09/07/24	<b>Tech Edit</b>	<b>Attachment M:</b> Technical Edits
12/2022	<b>Tech Edit</b>	<b>Attachment B:</b> Technical Edits
08/2022	<b>Amend</b>	<b>Attachments F, H, K:</b> Retired
08/2022	<b>Tech Edit</b>	<b>Attachments A-E &amp; G, I, J, L:</b> Technical Edits
01/2022	<b>Amend</b>	<b>Attachment M:</b> Added
10/11/21	<b>Amend</b>	<b>Attachment N:</b> Added
08/2021	<b>Amend</b>	<b>Attachment L:</b> Added



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

09/2020	<b>Amend</b>	<b>Attachment K:</b> Added
07/01/2018	<b>Amend</b>	<b>Attachment J:</b> Added
07/01/2018	<b>Amend</b>	<b>Policy:</b> Amended
01/2017	<b>Tech Edit</b>	<b>Policy:</b> Technical Edits
02/2016	<b>Tech Edit</b>	<b>Policy:</b> Technical Edits
04/2012	<b>Amend</b>	<b>Attachment G:</b> added
12/20/11	<b>Tech Edit</b>	<b>Attachments A-F:</b> Technical Edits
12/2011	<b>Amend</b>	<b>Policy:</b> Amended

**COMPLIANCE REVIEW HISTORY**

<b>Date of Review</b>	<b>Reviewer Name and Job Title</b>
02/24/26	Sheryl Uyan, Acting Compliance Officer
10/11/24	Scott Gruendl, Compliance Officer