

# SUD Billing Errors and Guides

This billing guide is created in accordance with the existing rules and the CalAIM/Payment Reform changes for billing purposes. Providers should review the following items by exporting the claim items report before batching or placing the claims on hold:

## I. Service Location/Place of Service (POS).

*(Refer to the chart below for the list of Place of Service codes.)*

- A. Outpatient Providers:** should not use service location code 55 or 58.
- B. Residential Providers:** should not use service location code 57 or 58.
- C. OTP Providers:** Should not use service location 55 for any services.
- D. For all providers:** use only service location code 02 or 10 if a service is done through telehealth or telephone.

## II. Payor Group Enrollment (PGE), Encounters and Release to Billing, Claims Data, Out-of-County (OOC), and Others.

### A. All Providers:

- Do not use the County Billable PGE if the client intends to reside in San Diego and your program is helping the client with the transition process.
- Use the DMC Billable if the above OOC requirements are met.
- If the client is not planning to transition to San Diego, please refer the client to the County of Residence. For more information: [BHS Info Notice-DMC Process for Out-of-County Clients \(pdf\) \(optumsandiego.com\)](#).
- Make sure to double-check that the 'units' and 'duration' on the SanWITS Claim Item List report were entered correctly.
- Providers should have the appropriate Payor Group Enrollment (PGE) set in SanWITS. The attached SanWITS Notice has been distributed to all providers.



Important SanWITS  
Notice\_Change in P

- It is important to enter the correct Medi-Cal subscriber number for DMC billable claims.  
[PGE or Benefit Plan Review Billing Tip Sheet 11-19-2018.pdf](#)  
[\(optumsandiego.com\)](#).
- A client without Medi-Cal: Do not batch the claims. Instead, place the claims on hold and assist the client in applying for Medi-Cal. Monitor the eligibility status and batch the claims once Medi-Cal is active. Ensure that you track all your claims on hold every month.
- Always review the program enrollment.
- Notify the Billing Unit if you have any claims in “pending roll-up” status. Please refer/read the **SUD Billing Unit Announcement: Roll-up Functionality in SanWITS** that was emailed to all providers on 08.24.2023.
- For all perinatal **batches**, make sure to select Perinatal “YES” on the encounter screen.
- Always ensure that the lead staff discipline matches or consistent with the service’s discipline. Providers must monitor their groups to make sure this is correct before creating individual encounters.

The screenshot shows the 'Group Session Notes' form with the following details:

- Group Name: OS-OS Group
- Group Type: ODS Group
- Note Type: DMC Billable
- Billable: Yes
- Calculate ODS units: No
- Lead Staff: LPCC
- Start Date: 07/01/23
- Start Time: 9:00 AM
- Location: Non-residential Substance Abuse Treatment F...
- Service: [Empty dropdown]
- Co-Lead Staff: [Empty dropdown]
- Service Groups List:
  - # LP\_Recovery Service Group - OS/OTP/RES
  - # LPCC\_Clinical Group - OS/OS/OTP
  - # LPCC\_Patient Education Group - 0.5 Early Intervention
  - # LPCC\_Patient Education Group - OS/OS
  - # LPCC\_Recovery Service Group - OS/OTP/RES
  - # MFT\_Clinical Group - OS/OS/OTP
  - # MFT\_Patient Education Group - 0.5 Early Intervention
  - # MFT\_Patient Education Group - OS/OS
  - # MFT\_Recovery Service Group - OS/OTP/RES

## **B. Residential and Outpatient Providers:**

- OHC claims must be released to the OHC PGE [OHC/Medicare Risk]. Do not release them to the County Billable or DMC PGE.
- Residential Bed days should be released to the regular Residential Bed Day PGE.
- Do not batch the OHC claims until you have proof of billing/Evidence of Coverage (EOC)/Explanation of Benefits (EOB). If you have any of these documents or unsure of the process, please contact the County SUD Billing Unit (BU) as soon as possible.
- All group services should be created through the group module. Ensure you can see the group session ID on the claim item list report.

## **C. Residential Provider:**

- Do not batch the claims for clients with Justice Override authorization. Place them on hold with a Justice override hold reason.

## **D. OTP Providers:**

- Methadone, group counseling, and individual counseling can be billed to DMC if the client is Out-of-County. *Do not bill the County for these services if the client is OOC.*
- Care Coordination can be billed to DMC if the client has Medicare or Medicare Risk.
- Do not batch the claims for Medicare Risk clients until you have proof of billing/Evidence of Coverage (EOC)/Explanation of Benefits (EOB). If you have any of these documents or unsure of the process, please contact the County SUD Billing Unit (BU) as soon as possible.

The Place of Service Codes List is available on the next/last page for your guidance.

## Place of Service Codes List



### CALAIM PAYMENT REFORM – PLACE OF SERVICE CODES IDENTIFIED

CODE	LOCATION	DESCRIPTION
02	Telehealth Provided Other than in Patient's Home'	The location, other than in patient's home, where health services and health related services are provided or received, through a telecommunication system
03	School	A facility whose primary purpose is education
04	Homeless shelter	A facility or location whose primary purpose is to provide temporary housing to homeless individuals (e.g., emergency shelters, individual or family shelters)
(10)	Telehealth Provided in Patient's Home	Health services and health related services are provided or received, through a telecommunication system in the patient's home.
12	Home	Location, other than a hospital or other facility, where the patient receives care in a private residence.
16	Temporary Lodging	A short-term accommodation such as a hotel, campground, hostel, cruise ship or resort where the patient receives care and which is not identified by any other Place of Service code.
55	Residential Substance Abuse Treatment Facility	A facility, which provides treatment for substance (alcohol and drug) abuse to live-in residents who do not require acute medical care. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, psychological testing, and room and board.
57	Non-residential Substance Abuse Treatment Facility	A location, which provides treatment for substance (alcohol and drug) abuse on an ambulatory basis. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, and psychological testing.
(58)	Non-residential Opioid Treatment Facility	A location that provides treatment for opioid use disorder on an ambulatory basis. Services include methadone and other forms of Medication Assisted Treatment (MAT)
99	Other Place of Service	Other place of service not identified above.

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If you have any questions about this tip sheet, please feel free to contact [ADSBillingUnit.HHSA@sdcounty.ca.gov](mailto:ADSBillingUnit.HHSA@sdcounty.ca.gov).