

Indian Health Service California Area Office Desert Sage Youth Wellness Center P. O. Box 2748 Hemet, CA 92546

May 15, 2017

The Desert Sage Youth Wellness Center, Youth Regional Treatment Center – Southern (YRTC), is dedicated to making the process for treatment referrals, billing, reimbursements, and timely payment on claims more streamlined. Included in this process is a new Admissions Applications, Patient Registration Form, billing requirements, as well as a new process for requesting and pre-authorizing those referrals requiring travel requests/reimbursement.

Effective immediately, the following billing requirements will apply:

- Reimbursement requests are to be submitted by the 15th of each month.
- All reimbursement requests shall include a CMS-1450 claim form (example attached). The CMS-1450 form (aka UB-04 at present) is the industry standard for submitting institutional claims for inpatient and outpatient services. The billing residential treatment center (RTC) shall use standard code sets as established by the Centers for Medicare & Medicaid Services (CMS) for the UB-04 claim form. Invoices from the RTC will no longer be accepted for reimbursement.
- Submit a claim once each month for dates of service the previous month. The CMS-1450 (UB-04) statement billing periods cannot overlap months.
- Claims must be received within 45 days after the date of discharge.
- IHS is the payer of last resort. When a resident has insurance from another source, private policy or Medicaid, the RTC must bill this source first before submitting to the YRTC Referral Program.
- Attach a copy of the third party payers' explanation of benefits (EOB) indicating payment or denial, if applicable.

Effective immediately, all requests for travel requests/reimbursement must be pre-approved prior to travel commencing. The request for travel assistance and reimbursement will be completed on a YRTC "*Travel Request Form*" (form attached). Once estimates are calculated and approved through the Desert Sage Youth Wellness Center, authorization to travel will be provided through a signed "*Travel Authorization Form*."

- Request for travel assistance is to be submitted when an application is approved.
- Approval is made through a signed "*Travel Authorization Form*" provided back to the requesting program.
- All travel funded and sponsored by the IHS is estimated and based on allowable reimbursement as per Federal Travel Regulations and must be done so in a prudent manner that will result in the greatest advantage and savings to the Government.
- Current, allowable reimbursement rates can be found at <u>www.gsa.gov</u>. Requests are to be made based on current allowable reimbursements.
- Claims for reimbursement must be received within 15 days after completion of travel.
- Original receipts for airfare (or other modes of travel), lodging, car rental, and other incidental expenses must be submitted at time of claim and attached to a copy of the original approved Travel Authorization. Receipts for meals are not required.

If you have questions regarding the Admissions Application, Patient Registration Form, or the YRTC intake/referral process, please contact Sabrina Lepkofker or Teresa Phinazee, YRTC Intake/Aftercare Coordinators at 951-708-4019.

If vou have questions, or need assistance with billing, claims reimbursement, or travel issues, please contact Marla Jones, Administrative Officer, YRTC, at 951-708-4040.

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