



COUNTY OF SAN BERNARDINO  
STANDARD PRACTICE

NO 6-3.32

ISSUE 7/98

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EFFECTIVE 8/9/95

DEPARTMENT

BEHAVIORAL HEALTH

SUBJECT

CORRECTION OF OVERLAPPING SERVICES

APPROVED

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James McReynolds, Director

### I. PURPOSE

The purpose of this policy is to ensure that there is a standardized method of correcting overlapping services (inpatient vs. outpatient service) when they occur.

### II. POLICY

It is the policy of the Department that all service providers review daily the MHS 942 report in order to avoid providing non-inpatient services to clients while they are in DBH's inpatient facility [Ward B/Children's Acute Care Center (CACC)].

### III. PROCEDURE

- A. All programs/clinics must distribute daily the Morning Report (MHS 942) to the clinic supervisors and every service provider. The MHS 942 report lists every client admitted to Ward B/CACC as well as the discharge date.
- B. Overlapping Services - Exceptions

The attached "lockouts" grid shows the limitations on services which can be reimbursed while the client is receiving inpatient care (See Attachment 1).

1. All non-inpatient services (with the exception of Psychiatric Health Facility) can be billed on the day of admission to inpatient care.
2. After the day of admission, only inpatient services [with the exception of limited Case Management/Brokerage (placement)] can be billed.
3. Case Management/Brokerage (placement) services can be billed (for the purpose of securing aftercare placement) during the 30 days prior to discharge for a maximum of three non-consecutive 30 day periods per uninterrupted inpatient stay.

C. Correcting Overlapping Services

1. When "overlapping services" occur, the service provider is to submit a Charge Data Correction Invoice (CDCI) to the clerk who will enter the change in SIMON (See Attachment 2). The clerk has five calendar days from when the original CDI was entered to make the change.
2. If the clerk is unable to make the correction in SIMON within the time allocated, the CDCI must be forwarded to Lois Hannah, Business Office, Building 3 for input. The clerk must write on the top of the CDCI, "Overlapping Inpatient Days", and enter on the "reason for deletion" line the following: "Unable to enter correction" (See Attachment 3).
3. Service provider must change the service on the Charge Data Invoice (CDI) to a non-billable CDI code. Also, change the heading in client's chart to non-billable and add a note stating the client is in inpatient. We can provide any service but when "locked out", we must indicate that the service is "non-billable" on the CDI.

LV:pm

## LOCKOUTS, OVERRIDES, COMPUTER EDITS, AND OTHER LIMITATIONS

	BH Svs	Med Support	CM Brokerage	Day Tx Intensive Full Day	Day Tx Intensive Half Day	Day Rehab Full Day	Day Rehab Half Day	Adult Resident Tx	Crisis Resid Tx	Crisis Intervention **	Crisis Stabilzn ER & Uc ***	Inpatient	PUF
BS Svs				T	T	T	T		A		T	A	A
Med Support											T	A	A
CM/Brokerage												I	
DT Int Full Day	T			L	L	L	L		A		T	A	A
DT Int Half Day	T			L	L	L	OR		A		T	A	A
Day Rehab – Full day	T			L	L	L	L		A		T	A	A
Day Rehab – Half Day	T			L	OR	L	L		A		T	A	A
Adult Res Tx								L	L		T	A	A
Crisis Res Tx	A			A	A	A	A	L	L	A	T	A	A
Crisis Intervention**									A		T	A	A
Crisis StabER*UC	T	T		T	T	T	T	T	T	T	T	A	A
Inpatient	A	A	I	A	A	A	A	A	A	A	A	L	A
PHF	A	A		A	A	A	A	A	A	A	A	L	A
Notes	I – Institutional Limitations – audit L – Lockout            Or – Override A – Lockout except for day of admission T – Lockout during actual time service is provided – audit, not a computer edit Providers may not allocate the same staff time under two cost center for the same period												
	*Max of 4 hrs per calendar day			**Max per day not yet specified				***Max hours per day not yet specified					



