

# **GROUP PROGRESS NOTE CORRECTIONS FOR ADMINISTRATIVE STAFF**



**Share of Cost/UMDAP:**

Share of Cost/UMDAP may impact a program's ability to make progress note corrections. In most situations, once Share of Cost is cleared, a program will need to follow instructions below as if the encounter has been claimed to the State.

**Billing Activity:**

If you identify an encounter that is final approved and has billing activity but has not claimed to Medi-Cal, please contact MHBUC for instructions.

**Billing Void, Replaces, and Deletion:**

Refer to the Financial Billing Manual for additional instructions when submitting the Void, Replace, or Deletion forms.

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## Introduction to Corrections

Administrative staff will have a primary role in the correction process. Once an encounter or progress note has been identified as needing a correction, administrative staff will act as a guide to assist the clinician or program manager on the next steps.

*(Key terms: Void and Replicate (V&R) is a new function which duplicates the original note making it available to edit for a correction. This is not the same as voiding an encounter or replacing an encounter. Voiding or replacing an encounter is a function that is completed by the Mental Health Billing Unit (MBHU) for encounters that have been paid).*

The first step in this process is checking on the status of the of the claim and reporting back to the clinical staff whether the encounter is in its original state, claimed and pending payment, or paid/denied. It is important to check the claim status of EACH client in the group.

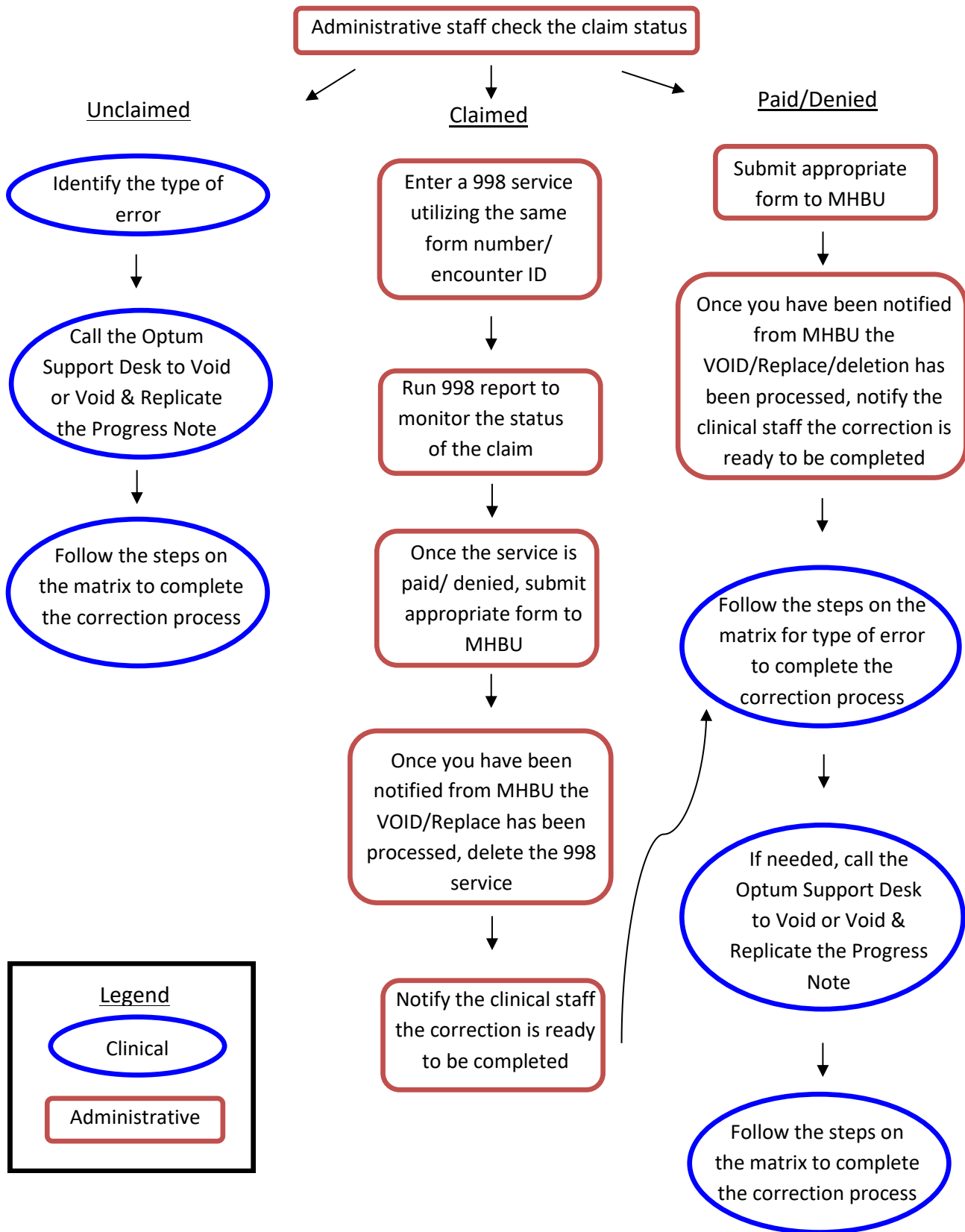
If an encounter is not claimed, clinical staff can request a void, or void and replicate from the Optum Support Desk. Administrative staff will have no further follow-up.

If an encounter is claimed and pending payment, administrative staff will monitor by entering a 998 service code and then monitoring the 998 Client Progress Note Audit Report. Once the encounter is adjudicated, administrative staff will submit the applicable form (Void Service Request, Disallowance & Delete Form, or Replacement Service Request) to MHBHU. Once it has been processed, administrative staff can remove the 998 service code and instruct the clinical staff to proceed with their correction process. In certain instances the administrative staff may re-enter the group service in Group Service Maintenance.

If an encounter is paid or denied, administrative staff will submit the applicable form (Void Service Request, Disallowance & Delete Form, or Replacement Service Request) to MHBHU. Once it has been processed, administrative staff will instruct the clinical staff to proceed with their correction process. In certain instances the administrative staff may re-enter the group service in Group Service Maintenance.

The progress note correction process will take collaboration amongst administrative staff, MHBHU, Optum Support Desk and clinical users. Please make sure all staff who touch encounters or progress notes have access to the correction packet for reference.

It's determined a progress note correction is needed...



**\*\*This will be the process for MOST progress note corrections, please consult the matrix or the Support Desk before making any edits.**  
ADMIN CORRECTIONS 03/2020

## GROUP PROGRESS NOTE CORRECTION MATRIX - MASTER

This matrix is used to identify which appendix to use for PN corrections.  
Do not use this in place of the appendix instructions! This matrix does not include important items in the appendices.  
Using the matrix you should work from left to right.

TYPE OF ERROR	Billing Status				APPENDIX TO USE	BASIC CORRECTION STEPS														
	UNCLAIMED	CLAIMED	PAID	DENIED		Admin Staff														
Encounter did not occur	Y				1	1	1													
Encounter did not occur		Y			2	1	2	3	4	4										
Encounter did not occur			Y		3	1			2											
Encounter did not occur				Y	3	1				2										
Wrong date of encounter/Overall group time entered incorrectly	Y				1	1	1													
Wrong date of encounter/Overall group time entered incorrectly		Y			2	1	2	3	4	4										
Wrong date of encounter/Overall group time entered incorrectly			Y		3	1			2											
Wrong date of encounter/Overall group time entered incorrectly				Y	3	1				2										
Duplicate progress note & encounter	Y				1	1														
Duplicate progress note & encounter		Y			2	1	2	3	4	4										
Duplicate progress note & encounter			Y		3	1			2											
Duplicate progress note & encounter				Y	3	1				2										
Change encounter to never billable activity (clerical, etc)	Y				1	1														
Change encounter to never billable activity (clerical, etc)		Y			2	1	2	3	4	4										
Change encounter to never billable activity (clerical, etc)			Y		3	1			2											
Change encounter to never billable activity (clerical, etc)				Y	3	1				2										
Wrong or insufficient info in client narrative (within 14 days)	Y				1	1														
Wrong or insufficient info in client narrative		Y		Y		CONTACT QM MATTERS @ QIMatters.HHSA@sdcounty.ca.gov														
Wrong billing indicator, for one client, which affects billing (Lockouts, No-Show, DAS)	Y				1	1														
Wrong billing indicator, for one client, which affects billing (Lockouts, No-Show, DAS)		Y			4	1	2	3	4	4										
Wrong billing indicator, for one client, which affects billing (Lockouts, No-Show, DAS)			Y		5	1			2											
Wrong billing indicators, for one client, which affects billing (Lockouts, No-Show, DAS)				Y	5	1				2										

## GROUP PROGRESS NOTE CORRECTION MATRIX - MASTER

This matrix is used to identify which appendix to use for PN corrections.  
Do not use this in place of the appendix instructions! This matrix does not include important items in the appendices.  
Using the matrix you should work from left to right.

TYPE OF ERROR	Billing Status				APPENDIX TO USE	BASIC CORRECTION STEPS															
	UNCLAIMED	CLAIMED	PAID	DENIED		Admin Staff															
Wrong billing indicator, for one client, which does NOT affect billing	Y				1	1															
Wrong billing indicator, for one client, which does NOT affect billing		Y	Y	Y	1	1															
Wrong service code for the entire group	Y				1	1															
Wrong service code for the entire group		Y			2	1	2	3					4	5	6	7					
Wrong service code for the entire group			Y	Y	3	1						2	3	4							
Time data entry error	Y				1	1									2						
Time data entry error		Y			-																
Time data entry error			Y		-																
Time data entry error				Y	-																
Change service code for one client to non-billable service code/ One client needs to be disallowed	Y	Y			-		CONTACT MHBU @ 619-338-2612														
Change service code for one client to non-billable service code/ One client needs to be disallowed			Y		3	1			2						3	4					
Change service code for one client to non-billable service code/ One client needs to be disallowed				Y	3	1			2						3	4					
Entire Encounter should be non-billable service code/ Progress note was final approved after 14 days	Y				1	1									2						
Entire Encounter should be non-billable service code/ Progress note was final approved after 14 days		Y			4	1	2	3	4	4			5	7	8						6
Entire Encounter should be non-billable service code/ Progress note was final approved after 14 days			Y		5	1			2				3	5							4
Entire Encounter should be non-billable service code/ Progress note was final approved after 14 days				Y	5	1				2			3	5							4
One Client included in the group that should not have been	Y				1	1									2						
One Client included in the group that should not have been		Y			4	1	2	3	4	4			5	7	8						6
One Client included in the group that should not have been			Y		5	1			2				3	5							4
One Client included in the group that should not have been				Y	5	1			2				3	5							4

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The following pages will outline specific scenarios and will direct you to the correct action steps. Each of the action steps are outlined step by step in the appendix and are meant to walk you through the process. **Your first step when you hear that a correction need to be made, is to check Display Client Services for the claim status. You must check the claim status for EACH client in the group.** If at ANY time you cannot move forward with the included instructions, please contact the Optum Support Desk for assistance. ***If an encounter is non-Medi-Cal or has billing activity (such as share of cost, UMDAP or other health coverage), contact MHBU for specific instructions.***

### **Encounter did not occur**

If the encounter documented did not occur and was entered in error and the encounter is:

#### **Unclaimed** (Appendix 1):

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

#### **Claimed** (Appendix 2):

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- **See applicable paid or denied steps below.**
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

#### **Paid** (Appendix 3):

- Submit the Void Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

#### **Denied** (Appendix 3):

- Submit the Disallowance & Delete Form for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

### **Wrong date of encounter/Overall group time entered incorrectly**

If the wrong date of encounter was selected or if the overall group time was entered incorrectly and the encounter is:

#### **Unclaimed** (Appendix 1):

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

#### **Claimed** (Appendix 2):

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- **See applicable paid or denied steps below.**
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#### **Paid** (Appendix 3):

- Submit the Void Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.



**Denied (Appendix 3):**

- Submit the Disallowance & Delete Form for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Duplicate progress note and encounter**

If a second progress note was written for the same group for the same encounter and the encounter is:

**Unclaimed (Appendix 1):**

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

**Claimed (Appendix 2):**

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- **See applicable paid or denied steps below.**
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

**Paid (Appendix 3):**

- Submit the Void Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Denied (Appendix 3):**

- Submit the Disallowance & Delete Form for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Change encounter to never billable activity**

If never-billable activity (for example: clerical, payee service such as completing forms, filing CPS/APS reports, leaving a voice message or faxing information) was provided and the encounter is:

**Unclaimed (Appendix 1):**

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

**Claimed (Appendix 2):**

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- **See applicable paid or denied steps below.**
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

**Paid (Appendix 3):**

- Submit the Void Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Denied (Appendix 3):**

- Submit the Disallowance & Delete Form for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.

- Let the PN staff know the note is ready for correction.

**Change non-billable service code to an informational progress note**

- The non-billable codes' series will always be in their original state - never claimed or paid/denied. Therefore, you will never submit a request to the MHBU. Let the PN staff know the note is ready for correction.

**Wrong or insufficient information in the client narrative (within 14 days)**

If there is wrong or insufficient information in the client narrative (for example: incomplete documentation, blank narratives, a different client's full name is mentioned) and the note is within 14 days of the DOS and the encounter is:

**Unclaimed (Appendix 1):**

- Let the PN staff know the note is ready for correction.

**Claimed/Paid/Denied – post 14 days from the DOS:**

- Let the PN staff know to contact QI Matters via email for correction.

**Wrong billing indicator which affects billing (Lockouts, No-Show, DAS)**

If the encounter has a wrong billing indicator which affects billing such as it was provided during a lockout, the client was a no show and it is not indicated, or the service has a wrong diagnosis attached and the note is:

**Unclaimed (Appendix 1):**

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

**Claimed (Appendix 4):**

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- See applicable paid or denied steps below.
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

**Paid (Appendix 5):**

- Submit the Void Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Reenter the entire group service with the correct billing indicators in the Group Service Maintenance screen. The original note has billing activity attached to it, and cannot be voided.
- Let the PN staff know the note is ready for correction.

**Denied (Appendix 5):**

- Submit the Disallowance & Delete Form for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Reenter the entire group service with the correct billing indicators in the Group Service Maintenance screen. The original note has billing activity attached to it, and cannot be voided.
- Let the PN staff know the note is ready for correction.

**Wrong billing indicator which does NOT affect billing:**

If the wrong billing indicator is selected and it does not affect billing such as, scheduled vs not scheduled or language used and the encounter is:

**Unclaimed/Claimed/Paid/Denied (Appendix 1):**

- Let the PN staff know the note is ready for correction.

**Wrong service code for the entire group:**

If the incorrect service code is selected for the entire group and the encounter is:

**Unclaimed (Appendix 1):**

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

**Claimed (Appendix 2):**

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- See applicable paid or denied steps below.
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

**Paid/Denied (Appendix 3):**

- Submit the Replacement Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Travel or Documentation Time data entry error:**

**This correction should not be used to fix unsubstantiated time.** It should only be used to fix a data entry error when, the amount of time entered on the encounter portion is greater than the time documented within the content of the narrative and the encounter is:

**Unclaimed (Appendix 1):**

- If all clients are unclaimed, let the PN staff know the note is ready for correction

**Claimed/Paid/Denied:**

- Contact MHBU at 619-338-2612. The steps will vary depending on the different insurance coverages the clients in the group have.

**Change service code for one client to a non-billable service code/ One client needs to be disallowed:**

If you need to change a service code for one client to be non-billable, or one client needs to be disallowed; for example the encounter documented is not covered by an active client plan (when a client plan is required) and the encounter is:

**Unclaimed/Claimed:**

- You must wait for the encounter to be paid or denied to complete the correction process.

**Paid (Appendix 3):**

- Submit the Void Service Request for the one client, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Denied (Appendix 3):**

- Submit the Disallowance & Delete Form for the one client, to MHBUS.
- The MHBUS will let you know via email once your request has been processed.
- Let the PN staff know the note is ready for correction.

**Change service code, for the entire group to a non-billable service code:**

If the entire group should be a non-billable service code; for example the service was non-billable, or the note was final approved after 14 days and the encounter is:

**Unclaimed** (Appendix 1):

- If all clients are unclaimed, let the PN staff know the note is ready for correction.

**Claimed** (Appendix 4):

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- **See applicable paid or denied steps below.**
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

**Paid** (Appendix 5):

- Submit the Void Service Request for the entire group, to MHBUS.
- The MHBUS will let you know via email once your request has been processed.
- Reenter the entire group service with the 802 service code in Group Service Maintenance. Ensure the non-billable service code is entered with the correct billing indicators and actual service, travel and documentation time. The original note has billing activity attached to it, and cannot be voided.
- Let the PN staff know the note is ready for correction.

**Denied** (Appendix 5):

- Submit the Disallowance & Delete Form for the entire group, to MHBUS.
- The MHBUS will let you know via email once your request has been processed.
- Reenter the entire group service with the 802 service code in Group Service Maintenance. Ensure the non-billable service code is entered with the correct billing indicators and actual service, travel and documentation time. The original note has billing activity attached to it, and cannot be voided.
- Let the PN staff know the note is ready for correction.

**One client was included in the group that should not have been:**

If one client was included in the group and should not have been and the encounter is:

**Unclaimed** (Appendix 1):

- If all clients are unclaimed, let the PN staff know the note is ready for correction

**Claimed** (Appendix 4):

- Enter a 998 service in the Individual Service Entry screen.
- Monitor the claim status by running the Client Services Report: 998 Client Progress Note Audit Report. Check the claim status of the original claim in Display Client Services. Continue to do this until the original claim has been paid or denied.
- **See applicable paid or denied steps below.**
- **IMPORTANT:** Once paid or denied steps below are complete delete the 998 service that was created.

**Paid** (Appendix 5):

- Submit the Void Service Request for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Reenter the entire group service with the correct clients in Group Service Maintenance. The original note has billing activity attached to it, and cannot be voided.
- Let the PN staff know the note is ready for correction.

**Denied** (Appendix 5):

- Submit the Disallowance & Delete Form for the entire group, to MHBU.
- The MHBU will let you know via email once your request has been processed.
- Reenter the entire group service with the correct clients in Group Service Maintenance. The original note has billing activity attached to it, and cannot be voided.
- Let the PN staff know the note is ready for correction.