

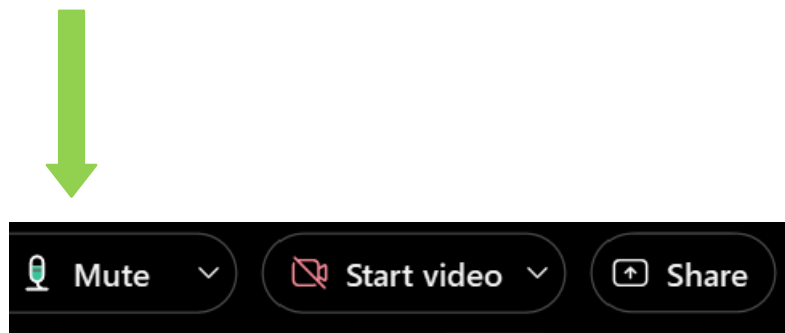


District Hospital Directed Payment (DHDP)

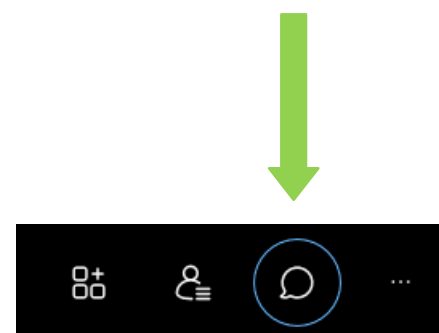
Presenters: Jennifer Lopez, Matt Kerlin

Webinar Instructions

- All participants have been muted to eliminate noise interference/distraction.
- To unmute, click on the microphone at the **bottom** of your screen.



- If you have any questions, please type your questions into the CHAT BOX located to the right of the screen at the bottom.



Agenda

- District Hospital Directed Payment Program Description
- Submission Information
- Key Dates
- Exclusions
- Contact Information
- Questions

What is District Hospital Directed Payments?

The District Hospital Directed Payment (DHDP) provides district hospitals with a uniform dollar percentage increase in supplemental reimbursement for the utilization of contracted services with Partnership HealthPlan of California. DHDP payments are calculated by the California Department of Health Care Services (DHCS) in accordance with the Centers for Medicare and Medicaid Services (CMS) approved preprint, and are issued by Partnership in six-month increments: January through June, and July through December.

Dollars for the Program

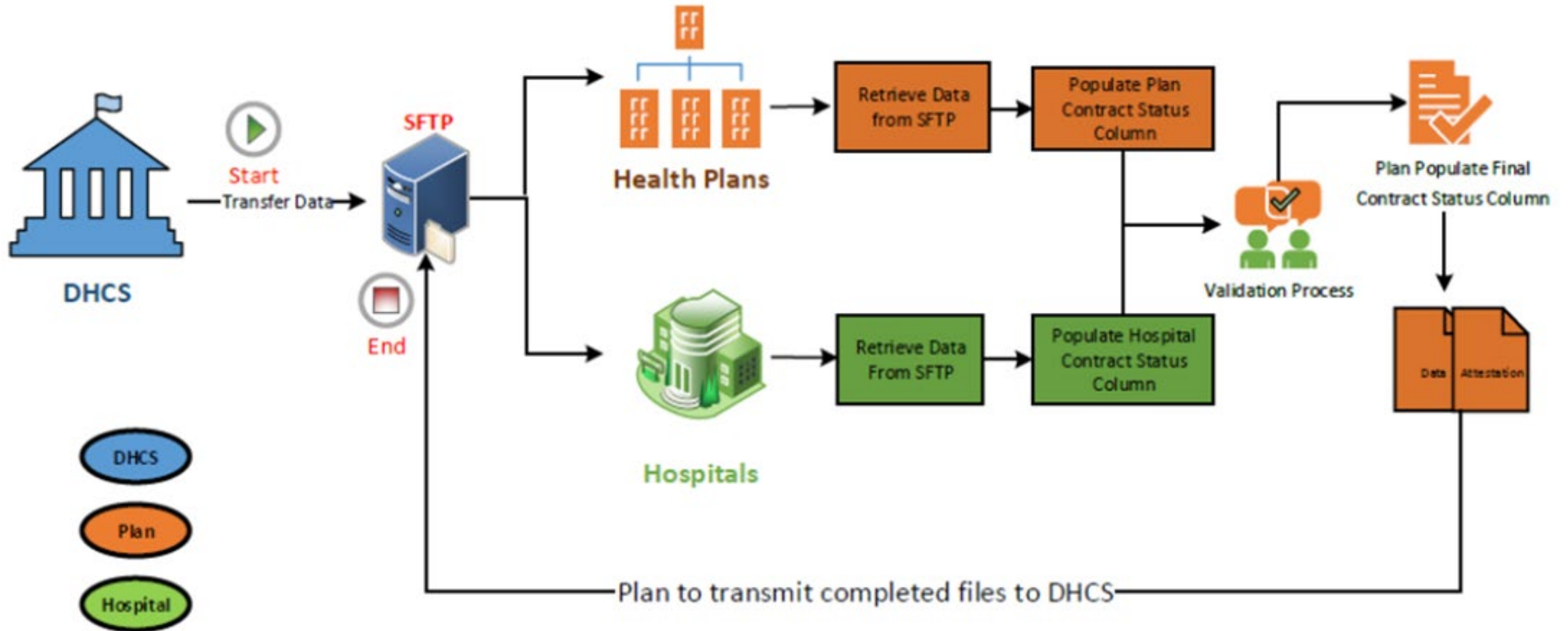
This new program for calendar year 2023 is valued at \$200 million statewide.

- Inpatient (IP) sub pool - \$140 million
 - Inpatient add-on per qualifying IP day
 - SNF add-on per qualifying SNF day
- Outpatient (OP) sub pool – \$60 million
 - OP add-on per qualifying OP visit
 - Emergency Department (ED) per qualifying ED visit

DHCS Program Information

- Hospitals must be contracted with Partnership to receive the DHDP payment
- DHCS is required to evaluate the extent to which these enhanced payments are achieving the goals of the program
- For each calendar year, DHCS has implemented a cycle/phase approach for the collection of data about contracted services eligible for reimbursement

Encounter Flow



DHCS Encounter Detail Files

DHCS provides details on how to retrieve your organization's encounter detail file(s). To do so, you will need:

- A designated SFTP Contact(s)
- The first time, a temporary password provided by DHCS
- Open the “DHCS-CRDD-HospitalFinancing” folder
- Open and transfer the files for your organization
- DHCS Help desk: DistrictDP@dhcs.ca.gov
- Recommend verifying access immediately

Submission Structure

- Confirm contact information on [DHCS Statewide Directory](#)
- **Phase 1** data corresponds to encounters in the first half of a calendar year, whereas **Phase 2** corresponds to encounters in the second half of a calendar year
- Each phase is divided into six cycles, with each cycle having different objectives
- For any given phase, eligibility for reimbursement is contingent upon entry into the DHCS encounter system prior to specific deadlines

Cycles 1 & 2

- These are preliminary phases to verify that DHCS has proper encounter details. Cycle 1 will usually begin before the relevant phase is complete.



Cycles 3 & 4

- This is the most critical cycle for providers to ensure that all encounters they expect for a phase are in the DHCS file; after cycle 4's deadline, it will not be possible to add new encounters for a phase
- Cycle 3 will include only a portion of the dates of service, but you should not wait for the complete set to start reconciling
- When Partnership specific reconciliation efforts are identified, only send Partnership data to Partnership as all contracted plan encounters will be included within your hospital files.



Reviewing Files in Cycle 5 and 6 (Contract Status)

- Cycle 5 is first contract status pass and cycle 6 is final contract status pass
 - Cycles 5 and 6 are for contract status updating only. It is more than likely too late to submit encounters
- Upon completion of updating “hospital_contract_status”, providers submit updated files to Partnership
- Use “C” to indicate contracted and “N” to indicate non-contracted



Reviewing Files in Cycle 5 and 6 (Contract Status) – Continued

- Partnership compares, for all encounters, contract statuses as indicated by service providers with the values identified by Partnership.
 - If all data matches, Partnership will contact the provider with a confirmation.
 - If there are discrepancies, Partnership will contact the provider with the following:
 - An iterative process ensues wherein Partnership provides data regarding discrepancies until Partnership and the provider come to the same conclusions
 - If needed, the provider may need to resubmit their updated files to Partnership
- Once providers and Partnership agree on the contract status of all encounters, Partnership updates the `final_contract_status` field and submits results to DHCS.
- Reminder final program timelines are governed by DHCS

Phase and Cycle Timing

Encounter Detail File Release Date	CY 2023 Phase 1	CY 2023 Phase 2	CY 2024 Phase 1	CY 2024 Phase 2
December 8, 2023	3	1		
March 8, 2024	4	2		
June 14, 2024	5©	3	1	
September 13, 2024	6©	4	2	
December 9, 2024		5©	3	1
March 7, 2025		6©	4	2

© indicates a data release for the purpose of contract status reporting.
Future dates are tentative and subject to change.



Phase 1 Key Dates

Phase 1 Service Dates: January 1 – June 30, 2023

Activity	Cycle 3	Cycle 4	Cycle 5	Cycle 6
File from DHCS	December 8, 2023	March 8, 2024	June 14, 2024	September 13, 2024
Reconcile Encounter Records to DHCS	February 16, 2024			
Encounter Reconciliation to Partnership due		May 10, 2024		
Encounter Submission deadline to DHCS		June 28, 2024		
Contract Status Update			July 12, 2024	October 11, 2024
Estimated payment from Partnership to hospitals for Phase 1 is April 2025				

Dates are estimates and subject to change

Phase 2 Key Dates

Phase 2 Service Dates: July 1 – December 31, 2023

Activity	Cycle 3	Cycle 4	Cycle 5	Cycle 6
File from DHCS	June 14, 2024	September 13, 2024	December 9, 2024	March 7, 2025
Reconcile Encounter Records to DHCS File	August 23, 2024			
Encounter Reconciliation to Partnership due		November 15, 2024		
Encounter Submission deadline to DHCS		December 31, 2024		
Contract Status Update			January 15, 2025	April 4, 2025
Estimated payment from Partnership to hospitals for Phase 2 is October 2025				

Dates are estimates and subject to change

Contract Criteria

Agreement MUST	Agreement MUST NOT
Cover one or more defined non-excluded populations of Medi-Cal beneficiaries	Be limited to a single patient only
Cover a defined set of one or more non-excluded hospital services	Be limited to treatment of a single case or instance only
Specify rates of payment or include a defined methodology for calculating specific rates of payment	Permit payment to be negotiated on a per patient or single instance of service basis
Be for a term of at least 120 days, be signed and dated, and be effective for the date(s) of service	Expressly permit the provider to select on a case-by-case basis whether to provide services covered in the agreement to a patient covered by the agreement

Exclusions

The following services are excluded from the DHDP:

- Inpatient services provided to enrollees with Medicare Part A, and Non-Inpatient services provided to enrollees with Medicare Part B
- Services provided to enrollees with Other Health Coverage
- Services provided by the following:
 - Cost-based Reimbursement Clinics (CBRCs)
 - Indian Health Care Providers (IHCPs)
 - Federally Qualified Health Centers (FQHCs)
 - Rural Health Clinics (RHCs)
 - All professional services
- State-only abortion services

DHCS Toolkit

DHCS is expected to be publish a DHCS DHDP Toolkit which will contain additional program guidelines and details. In the interim we recommend hospitals rely on the DHCS Enhanced Payment Program (EPP) Toolkit logic linked below for mapping logic. The tool kit includes

- Encounter Detail File Data Elements
- Category of Service Groupings
- Mapping Logic
- [DHCS EPP Toolkit link](#)

Mapping Logic

The Mapping Logic comes from the [DHCS EPP Toolkit](#)
Pages 29-33

Payment Information

Phase 1: January 1 – June 30, 2023 Service Dates

- Hospital IGT to DHCS - February 2025
- Partnership payment to hospital - April 2025

Phase 2: July 1 – December 31, 2023 Service Dates

- Hospital IGT to DHCS - August 2025
- Partnership payment to hospital - October 2025

Dates are estimates and subject to change

Contacts

- Partnership District Hospital In-box: DistrictDP@partnershiphp.org
- Partnership website: PartnershipHP.org
- DHCS Help Desk Email: DistrictDP@dhcs.ca.gov
- DHDP Program site: <https://www.dhcs.ca.gov/services/Pages/District-and-Municipal-Public-Hospital-Directed-Payment.aspx>

Next Steps

Please email the DistrictDP@partnershiphp.org box to:

1. Verify that the hospital SFTP folder has been established with Partnership.
 - Each hospital should have received an email from Partnership's IT department to set-up access for the Partnership SFTP site.
2. Confirm hospital primary and secondary contact.
 - Partnership SFTP is the preferred method of sharing data files.
 - Please avoid sending data files via email given they include PHI.
3. Begin review of Cycle 3 data files, downloaded from DHCS SFTP site.
 - Report any data discrepancies to Partnership by **February 16, 2024**.

Questions

