

# Finance and Billing Procedures

Our Community Our Kids (OCOK) will comply with the utilization and compensation section of the Family Services Provider Service Agreement and addendums. Questions that arise should be sent to the OCOK Finance Department at [finance@oc-ok.org](mailto:finance@oc-ok.org) or call 817.502.1323.

## Purchased Family Services Categories and Service Codes

- Drug Testing
  - 79A - Drug Testing - Urine Analysis
  - 79B - Drug Testing - Oral Fluids
  - 79C - Drug Testing - Hair Testing
  - 79N - Drug Testing - Nail Testing
  - 79D - Drug Testing - Confirm All Tests
- Substance Abuse – Assessment, Counseling, Therapy
  - 83F - Sub Abuse - Assessment
  - 83G - Sub Abuse - Individual Counseling/Therapy
  - 83H - Sub Abuse - Group Counseling/Therapy
  - 83K - Sub Abuse - Diagnostic Consult
- Non-Substance Abuse – Assessment, Counseling, Therapy
  - 86C - Counseling/Therapy - Individual
  - 86E - Counseling/Therapy - Group
  - 86F - Counseling/Therapy - Family
  - 86U - Psycho-Social Assessment
  - 88K - Home-Based Therapy
- Parenting/Caretaker Training
  - 87C - Parent/Caretaker Training
  - 87N - Fatherhood Training
- Psychological/Psychiatric – Evaluation and Assessment
  - 86A - Psychological/Development Evaluation/Test
  - 86B - Psychiatric Evaluation
- Permanency Planning Meetings
  - 81M - Family Group Conference (FGC)
  - 81N - Circles of Support (COS)
  - 81P - Permanency Conference (PC)
  - 81Q - Transition Plan Meeting (TPM)
- Camping
  - 80T - Therapeutic Camping
  - 81G - Youth Camping
  - 90P - Specialized Camping Exp
- Concrete Services Administration
  - 82C - Concrete Services

- Translator Services
  - 98L - Translator Services
- Court Related Services
  - 86H - Court Related Services
- Supervised Visitation & Hospital Sitting
  - 92L - Supervised Visitation
  - 87B - Hospital Sitting Service
- Home Assessments
  - 68A - Kinship – Relative/Caregiver Home Assessment
  - 81D - ICPC – Relative/Caregiver Home Assessment
  - 88A - HSEGH Report

### **Initial Payment for Purchased Family Services**

OCOK will issue payment for family services performed for referred region 3b families on and after March 1, 2020, which comply with all billing requirements.

### **Payment Terms**

- Network Providers will be paid for each month's services by no later than the 25<sup>th</sup> day of the next month. For example, Network Providers would be paid for their September services by no later than October 25<sup>th</sup>. However, we will make every effort to pay Network Providers earlier than the 25<sup>th</sup> whenever possible.
- Network Providers must submit their invoice and required documents by the 10<sup>th</sup> day of each month in order to be paid by the 25<sup>th</sup> day of the month. For example, Network Providers would be paid for their September services by October 25<sup>th</sup>, if their correct and accurate invoice and required documents were received by October 10<sup>th</sup>. If the correct and accurate invoice and documents were received after the 10<sup>th</sup>, then the invoice could be included in the next month's payment.
- Network Providers will receive one payment each month for all services provided.
- Payment will be issued for pre-authorized services only.
- Services delivered by a person not meeting the minimum qualifications or who has not received prior OCOK approval will not be paid
- Service claims that exceed the number of authorized units or fall outside the authorized timeframe will not be paid
- Providers are required to bill Medicaid (traditional or managed care) for Medicaid eligible services for Medicaid eligible clients.
- Medicaid eligible services will not be paid by OCOK unless an acceptable Medicaid denial has been provided with the invoice. Network providers agree to accept Medicaid fee as payment in full for services rendered.
- If referred clients are covered by private insurance, Providers are required to make every effort to bill the private insurance plan for services performed.

- All Network Providers will be paid electronically by direct deposit. Your bank account will show that the deposit is from ACH Child and Family Services or All Church Operating. A Direct Deposit Authorization Form and a Form W-9 will be sent to all Network Providers to complete and return once the Network Provider application and contract process has been completed.

## **Family Services Provider Payments**

Our Community Our Kids (“OCOK”) will pay the Network Providers (“Provider”) for pre-authorized family services. The fees for these services are included in the Family Services Provider Services Agreement in the Fee Schedule Addendum.

Providers will be required to send an invoice and any required documentation to the OCOK Finance Staff for Family Services. The correct and accurate invoice and document packet for non-medicaid eligible services must be received by OCOK within 30 days from the date of service. For Medicaid eligible services, the correct and accurate invoice and document packet must be received by OCOK within 30 days from receiving the Medicaid denial letter.

The invoice and document packet can be sent to the OCOK Finance staff by any of the following:

1. Emailed to [finance@oc-ok.org](mailto:finance@oc-ok.org);
2. Uploaded to the file sharing website, [box.com](https://box.com) (to setup, contact [finance@oc-ok.org](mailto:finance@oc-ok.org));
3. Faxed to the attention of OCOK Finance at 817-732-9332; and
4. Regular mail to the OCOK administration office

Our Community Our Kids  
Attn: Finance Dept – Billing  
7700 AWG Way  
Fort Worth, TX 76140

Once received, the OCOK Finance staff will review the document packet to ensure all documents have been received and have been properly completed. Upon verification, the OCOK Finance staff will enter the services provided and invoiced amount in the CoBRIS system. The invoice will be paid in the next monthly payment and will be included in the Provider’s monthly payment report.

## **Drug Testing – Invoice and Document Requirements**

Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - o Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - o Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount

- This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing finance@oc-ok.org , if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Court Order for Nail Testing
  - The rate for nail testing will be paid if the court has ordered the nail testing.
- Court Related Services Case Note Form
  - This form must be submitted if billing for time spent providing court testimony or deposition.

## **Substance Abuse Assessment, Counseling & Therapy – Invoice and Document Requirements**

### Service Codes

- 83F – Assessment
  - Providers may only bill for administering tests, evaluating and analyzing data and writing report.
- 83G – Individual Counseling
  - Consists of private, face-to-face counseling between a client and a counselor or a therapist, to help the client meet his or her treatment goals. Units are to be billed in 15 minute increments.
- 83H – Group Counseling
  - Consists of counseling provided simultaneously to individuals to help them meet their treatment goals. Units are to be billed in 15 minute increments.
- 83K – Diagnostic Consultation
  - Consists of participation in a formal meeting or staffing, initiated by OCOK, to discuss a specific case. OCOK purchases diagnostic consultation services to obtain professional recommendations and opinions about a specific client.
- 86H – Court Related Services
  - 3 units will be authorized and paid for time spent providing court testimony or deposition.
- Missed Appointments
  - Providers are allowed to bill up to a maximum of 2 missed appointments per service request.
- Note: Detoxification and inpatient services are not authorized by any OCOK contract.

Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - o Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - o Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
  - o Providers must include the client name and appointment dates when billing for missed appointments.
  - o This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing finance@oc-ok.org , if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - o If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - o A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Medicaid Denial
  - o This must be provided with your invoice for all Medicaid eligible services provided for all Medicaid eligible clients.
    - Network Providers must contact Medicaid for any Medicaid billing issues or disallowances
  - o The Medicaid denial will not be accepted if the client and services were not billed to Medicaid correctly.
- Court Related Services Case Note Form
  - o This form must be submitted if billing for time spent providing court testimony or deposition.

## **Non-Substance Abuse Assessment, Counseling & Therapy & Psychological Evaluation & Assessment – Invoice and Document Requirements**

### Service Codes

- 86A – Psychological Testing
  - o Providers may only bill for administering tests, evaluating and analyzing data and writing report, up to a maximum of 6 units of service.
- 86C – Individual Counseling
  - o Consists of private, face-to-face counseling between a client and a counselor or a therapist, to help the client meet his or her treatment goals. Units are to be billed in 15 minute increments.
- 86E – Group Counseling

- Consists of counseling provided simultaneously to at least two (2) unrelated individuals to help them meet their treatment goals. Units are to be billed in 15 minute increments.
- 86F – Family Counseling
  - Provider will bill for family counseling as a family unit and per hour basis in 15 minute increments. Billing will be under the name of the oldest Medicaid-eligible family member. If no family member is Medicaid eligible, billing will be under the oldest family member.
- 86U – Psychosocial Assessment
  - Provider may bill when writing the report, up to a maximum of one (1) unit of service, or equal to one hour, billed in 15 minute increments.
- 88K – Home Based Counseling
  - Consists of services provided in the client’s home. Service is for individual therapy, family therapy or psychosocial assessment. Units are to be billed in 15 minute increments.
- 81H – Diagnostic Consultation
  - Consists of participation in a formal meeting or staffing, initiated by OCOK, to discuss a specific case. OCOK purchases diagnostic consultation services to obtain professional recommendations and opinions about a specific client.
- 86H – Court Related Services
  - 3 units will be authorized and paid for time spent providing court testimony or deposition.
- 98L – Translator Services
  - Provider is responsible for identifying the service provider and the compensation rate and securing prior approval from OCOK contract staff.
- Missed Appointments
  - Providers are allowed to bill up to a maximum of 2 missed appointments per service request.
- Travel Reimbursements
  - Provider is allowed to bill the IRS standard mileage rate for number of miles driven in order to provide services in underserved areas.
  - Underserved areas are determined by OCOK.
- Out of Office Services
  - Consist of services delivered in a location other than the Provider’s primary office, satellite office or client’s home. Services provided at a satellite office are to be billed at the in-office rate.

Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).

- Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
- Providers must include the client name and appointment dates when billing for missed appointments.
- This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing finance@oc-ok.org , if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Sign In Log
  - Provider must provide a copy of the sign in log for each session when billing for family counseling.
- Medicaid Denial
  - This must be provided with your invoice for all Medicaid eligible services provided for all Medicaid eligible clients.
    - Network Providers must contact Medicaid for any Medicaid billing issues or disallowances
  - The Medicaid denial will not be accepted if the client and services were not billed to Medicaid correctly.
- Court Related Services Case Note Form
  - This form must be submitted if billing for time spent providing court testimony or deposition.
- Travel Log
  - This must be provided when billing for travel reimbursement.

## **Parenting/Caretaker Training – Invoice and Document Requirements**

### Service Codes

- 87C – Parent/Caretaker Training
  - One (1) unit equals one (1) fee charged for each participant completing a single training session or class.
- 87N – Fatherhood Training
  - One (1) unit equals one (1) fee charged for each participant completing a single training session or class.

Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report

- Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
- Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
- Providers must include the client name and appointment dates when billing for missed appointments.
- This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing finance@oc-ok.org , if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Sign In Log
  - Provider must provide a copy of the sign in log for each training session or class.

## **Permanency Planning Meetings – Invoice and Document Requirements**

### Service Codes

- 81M – Family Group Conference
- 81P – Permanency Conference

### Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
  - This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing finance@oc-ok.org , if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Sign In Log
  - Provider must provide a copy of the sign in log for each conference meeting



## **Camping – Invoice and Document Requirements**

### Service Codes

- 80T - Therapeutic Camping
- 81G - Youth Camping
- 90P - Specialized Camping Exp

Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - o Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - o Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
  - o This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing [finance@oc-ok.org](mailto:finance@oc-ok.org), if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - o If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - o A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.

## **Concrete Services Administration – Invoice and Document Requirements**

### Service Codes

- 82C - Therapeutic Camping

Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - o Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - o Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
  - o This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing [finance@oc-ok.org](mailto:finance@oc-ok.org), if there is an issue with access to the CoBRIS system.
- Supplemental Services Report

- If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
- A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.

## **Supervised Visitation & Hospital Sitting – Invoice and Document Requirements**

### Service Codes

- 92L – Rules Discussion & Visitation Planning
  - Providers can bill for this one time charge per service request.
- 92L – Supervised Visitation
- 87B – Hospital Sitting Service
- 86H – Court Related Services
  - 3 units will be authorized and paid for time spent providing court testimony or deposition.
- Missed Appointments
  - Providers are allowed to bill for 1 missed appointment per service request.

### Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
  - Providers must include the client name and appointment dates when billing for missed appointments.
  - This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing finance@oc-ok.org , if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Sign In Log
  - Provider must provide a copy of the visitation sign in log for each visit in order to bill for supervised visitation

- Provider must provide a copy of the hospital sitting services sign in log in order to bill for hospital sitting services.

## **Home Assessments – Invoice and Document Requirements**

### Service Codes

- 68A - Kinship – Relative/Caregiver Home Assessment
- 81D - ICPC – Relative/Caregiver Home Assessment
- 88A - HSEGH Report
- 86H - Court Related Services
  - 3 units will be authorized and paid for time spent providing court testimony or deposition.

### Invoice and document packets are required to include:

- Family Services Invoice Form
- Outstanding Purchase of Service (POS) Report
  - Shows all open service requests which have been sent to the Network Provider (similar to the DFPS/CPS Pre-Bill Form).
  - Network Provider will add to the report the columns and data for Units of Service provided, Rate per Unit Invoiced and Total Invoiced Amount
  - This report can be downloaded by the Network Provider from the CoBRIS system at the beginning of each month. This report can also be requested by emailing [finance@oc-ok.org](mailto:finance@oc-ok.org), if there is an issue with access to the CoBRIS system.
- Supplemental Services Report
  - If you received a service request and provided services for a client that does not appear on the Outstanding POS Report, then you can complete and submit the Supplemental Services Report with your invoice.
  - A copy of the approved service request must be provided for each client/service that is reported on the Supplemental Services Report.
- Routing and Approval Form for each assessment/report
- Withdrawal Report
  - Must be submitted for withdrawn assessments
- Court Related Services Case Note Form, if applicable

## **Payment Reports for Providers**

Upon sending the monthly payment to the Network Providers, the Providers will be able to download from the CoBRIS system a payment report showing the details of the Provider's direct deposit payment. The payment report shows the Provider agency name, client's names, client's ID number, number of units, and the service codes. This report can also be requested by emailing [finance@oc-ok.org](mailto:finance@oc-ok.org), if there is an issue with access to the CoBRIS system.

## Payment Dispute Resolution Process

The Network Provider will reconcile the payment from OCOK to the Provider's records. If any discrepancies are noted, the Network Provider will initiate the following dispute resolution process within 30 days of receiving payment.

- The parties will confer, in person or by telephone/email, to resolve disputes over payment for services through the following process. In order to initiate this process, either party must provide the other party with written notice of its dispute about a service and/or payment issue. The provider can request a Provider Payment Discrepancy Report form in order to submit payment discrepancies to the OCOK Finance Staff. The discrepancy report can be submitted by encrypted email, fax, regular mail and can also be uploaded to their file on box.com. Please contact the OCOK Finance department with any questions at [finance@oc-ok.org](mailto:finance@oc-ok.org).
- Staff Conferencing. Within ten (10) days of receipt of a written notice initiating the dispute resolution process, OCOK and Network Provider, through representatives of their services and financial staff, will confer and attempt to reconcile any disputed payments for which OCOK – based upon a good faith review of any documents submitted by the Network Provider and OCOK's own documentation or records – does not believe it is responsible for paying. The parties shall complete the staff conferencing process described in this section within thirty (30) days of the receipt of the written notice initiating the dispute resolution process. If the dispute is not resolved within this time period, the process will continue to CFO Conferencing.
- CFO Conferencing. For services still in dispute following the staff conferencing reconciliation process, OCOK's Chief Financial Officer and the Network Provider's Chief Financial Officer, or their designees, shall confer to resolve, settle, or compromise the dispute. The parties shall complete the CFO Conferencing process described in this section within thirty (30) days of the completion of the Staff Conferencing process described above.
- Payment after Resolving Disputes. If OCOK after conferring as provided herein with the Network Provider about the disputed payment concludes it is responsible for paying for a service or some part of it, OCOK shall make its payment to the Network Provider in the next monthly payment following the month in which OCOK concluded it was liable for payment.
- In the event the Network Provider owes OCOK for any services provided herein or pursuant to any other agreement between the parties, and such balance has been due for in excess of sixty (60) days from invoicing by OCOK to Network Provider, OCOK may deduct the balance amount due to OCOK from any amount owed to the Provider pursuant to the Provider Services Agreement.

- Compliance with Master Contract. OCOK shall take all action reasonable and necessary to comply with the requirements of the Master Contract and ensure payment for the Services thereunder.

### **Return of Funds**

In the event that the Network Provider or its independent auditor discovers that an overpayment has been made by OCOK, the Network Provider shall repay said overpayment immediately to OCOK without prior notification or request from OCOK. In the event that OCOK first discovers an overpayment has been made to the Network Provider, OCOK shall notify the Network Provider by letter of such a finding and request repayment forthwith. OCOK may unilaterally deduct overpayments made to Network Provider from monies owed to Network Provider.

### **Invoice/Billing Monitoring**

The OCOK Quality Improvement and Contracts department will periodically monitor the family services network providers to ensure that the providers records and documentation justify and support the invoices that have been submitted to OCOK for payment.