



# CBO DISPATCH

The “B” means BUSINESS

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## Medi-Cal Denials for Gender and Date of Birth



Over the last several months, providers have reported a marked increase in the number of Medi-Cal denials related to the client’s gender and/or date of birth. These denials are the result of changes to the Short-Doyle/Medi-Cal (SDMC) claiming system made by the State Department of Health Care Services (DHCS) to verify that the gender and date of birth submitted on Medi-Cal claims for the client matches the sex and date of birth for the client that is in the Medi-Cal eligibility system. Medi-Cal denies the claim when the claim information does not match the sex or date of birth that is in the State’s eligibility system using the claim adjustment group, reason, and remark code CO 16 MA 39 for gender mismatches and CO 16 N327 for date of birth mismatches. *These denials can be prevented by making sure that the gender and date of birth that is submitted on claims matches the State’s eligibility record.*

The gender and date of birth that is submitted to Medi-Cal on claims is from the episode’s financial eligibility in the Integrated Behavioral Health Information System (IBHIS). The sex and date of birth that is in the State eligibility system is on the client’s Benefit Identification Card (BIC). Contract providers also receive the sex and date of birth for existing Medi-Cal clients in the Electronic File Transfer (EFT) folder from the Department of Mental Health (DMH). (For more information about how to access the the database with the sex and date of birth from the State eligibility system, please see [CBO Dispatch NGA 17-002: Update – Medi-Cal Date of Birth and Gender Edits.](#))

To prevent denials, update the client’s financial eligibility to match the State’s record. If the gender or date of birth on the BIC or in the EFT database was used and the claim was denied because of a gender and/or birth date mismatch, refer the client to his/her eligibility worker to correct the information in the State eligibility system or to get an updated BIC. Note that, if necessary, IBHIS allows the gender and date of birth in the client’s financial eligibility to be different than it is on the client’s demographics. Confirm with your vendor that your Electronic Health Record (EHR) supports this functionality. Remember that the gender and date of birth entered into the client’s financial eligibility must be supported by documentation in the client’s record.

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IBHIS providers, if you have any questions or need additional information, create a HEAT Ticket using the following link: <https://extra.dmh.lacounty.gov/SelfServiceSupport/Pages/SelfService.aspx>.



**DOES NOT APPLY TO FEE-FOR-SERVICE PROVIDERS**

