Provider Bulletin





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FFS II Medi-Cal Providers

A Publication of the Local Mental Health Plan (LMPH) of the County of Los Angeles Department of Mental Health

IN THIS ISSUE

DENIAL REASON CO 96/MA43 TO REPLACE CO96/N30

Effective March 9, 2021, the California Department of Health Care Services (DHCS) will begin denying specialty mental health claims previously denied with the Claim Adjustment Reason Code (CARC)/Remittance Advice Remark Code (RARC) combination CO 96/N30 (96 Non-covered charge(s)/N30 Patient ineligible for this service) with the CARC/RARC combination CO 96/MA43 (96 Non-covered charge(s)/MA43 Missing/incomplete/invalid patient status).

Denials will carry the CO 96/MA43 reason code when clients eligible for Medi-Cal under non-Affordable Care Act (ACA) aid codes have an issue with the way their immigration status is recorded in the Medi-Cal Eligibility Data System (MEDS). The Short-Doyle/ Medi-Cal (SDMC) claims adjudication system looks at the Citizen/Alien Indicator in MEDS and considers whether there is information entered into the system to populate the Alien Eligibility Code. The Alien Eligibility Code supports the Citizen/Alien Indicator on the client's record. If the information used to support certain Citizen/Alien Indicators is missing or needs updating, the Alien Eligibility Code is left blank.

DHCS is making this change because CO 96/MA43 depicts the reason the claim was denied more accurately. Clients with eligibility that causes these denials receive positive eligibility verification

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responses and are still eligible to receive services. Although they are eligible to receive services, providers cannot receive federal or State funding for those services.

For more information about what causes this denial please see FFS Provider Bulletin entitled CO 96/N 30 Denials (January 2021). Provider Bulletin 8th Edition Issue 4

If you have any questions regarding this bulletin, please contact the FFS Hotline at (213) 738-3311 or send an email to: FFS2@dmh.lacounty.gov

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