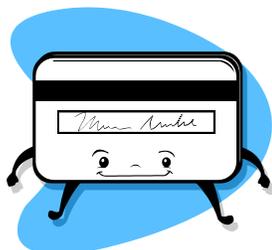


# RMD Bulletin

*Knowledge is power...*

## Medi-Cal HMO Card vs. BIC?



VS.



# Both Work!!

Recently, the State began requiring most new and existing beneficiaries to assign their Medi-Cal benefits to Medi-Cal Managed Care Plans, also known as Medi-Cal Health Maintenance Organizations (HMO). Los Angeles County Department of Mental Health (DMH) directly operated and contract providers are permitted to treat and bill for services rendered to clients who have assigned their benefits to a Medi-Cal HMO as long as the clients are Medi-Cal eligible.

Clients in Medi-Cal HMOs who come in for services may not have a traditional white and blue Benefit Identification Card (BIC) and may present a card from the Medi-Cal HMO instead. Even without the client's BIC, providers are able to use available client information to run an eligibility check in the Integrated System (IS), on a Point of Service (POS) device, by calling the Automated Eligibility Verification System (AEVS) at 1-800-456-AEVS (2387), or on the Medi-Cal website (<https://www.medi-cal.ca.gov/Eligibility/Login.asp>).

Below is an example of a positive eligibility response from the Medi-Cal website for a client whose benefits are assigned to a Medi-Cal HMO.

**CARVED OUT MENTAL HEALTH SERVICES (MHS)**  
**Services may be billed directly to Medi-Cal through the IS**

Regular Medi-Cal with MHS Carved out  
**SUBSCRIBER LAST NAME: Doe. EVC #: 000000ZX0. CNTY CODE: 19. PRMY AID CODE: 3N. MEDI-CAL ELIGIBLE W/ NO SOC/SPEND DOWN. HEALTH PLAN MEMBER: PHP-L.A. CARE HLTH PLAN: MEDICAL CALL (123) 123-1234. HCP: ANTHEM BLUE CROSS CALL: (123) 123-1234. PCP: DR. K CALL: (123) 123-1234. ACCESS DENTAL PLAN: DENTAL CALL (123)123-1234**

**We're here to help you...**

If you have any questions or require further information, please contact RMD at (213) 480-3444 or [RevenueManagement@dmh.lacounty.gov](mailto:RevenueManagement@dmh.lacounty.gov).

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

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