

RMD Bulletin

Knowledge is power...

To Hold or Not To Hold:



Changes Coming SOON for Late Medi-Cal Claims



On July 1, 2012, new regulations go into effect allowing Medi-Cal claims for specialty mental health services submitted up to twelve (12) months from the month of service to be considered as on time. The State Department of Health Care Services' (DHCS) Short-Doyle/Medi-Cal Phase II claiming system will be updated to allow mental health providers to submit claims between six and twelve months from the month of service without a late code.

The Los Angeles County Department of Mental Health (DMH) would like you to review all of your late Medi-Cal claims that are yet to be submitted because there is no valid late code and consider whether you want to hold these claims until the State changes go into effect. The change to no longer require a late code relates to all claims regardless of service date. For example, once the change goes into effect, a claim with a service date of September 2011 will be allowed to be submitted without a late code.

When making this decision, please keep in mind that the Integrated System (IS) has not been changed yet. The IS currently requires providers to use a late code when submitting Medi-Cal claims over six months. *If you submit your late claims now, before the IS has been updated, the IS will require you to add a late code to the claim even though the State will receive it after July 2, 2012.* This does not impact claims that are not late.

An RMD Bulletin with more information about the changes will be issued as more information is received.

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.