LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH / REVENUE MANAGEMENT DIVISION



**ON MEDI-CAL CLAIMS** 

**LESS THAN ONE YEAR OLD!** 

## Beginning this month, Short-Doyle/Medi-Cal providers are no longer required to include a late code on claims that are received by the State more than six (6) months but less than twelve months from the month of service. Based on this policy change at the State, the Integrated System (IS) has been updated.

Effective July 6, 2012, providers will be able submit original and replacement Medi-Cal claims without a late code as long as those claims are submitted within twelve months from the date of service. This means that you can submit any Medi-Cal claim that is less than twelve months from the date of service even if you did not previously have a valid applicable late code!



Contract providers should note that you must continue to factor in the payment process when determining how much time you have to submit a Medi-Cal claim. The payment process has not changed and still takes six (6) to eight (8) weeks. Please allow for that process to complete and make sure that your Medi-Cal claims are submitted to the IS within ten (10) months from the date of service.

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

