RMD Bulletin

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Short-Doyle/Medi-Cal Phase II: New Medi-Cal Share of Cost Obligation Field

The State Department of Mental Health directs Short-Doyle/Medi-Cal (SD/MC) providers to bill the client the full cost of service, the amount of the monthly share of cost (SOC), or the annual liability amount, whichever is less. The monthly Medi-Cal SOC is the amount the client is obligated to pay for services received before any additional services, delivered in the same month, may be billed to Medi-Cal.

With the new SD/MC Phase II gross billing requirement, the Integrated System (IS) will send the total claim amount to Medi-Cal along with the SOC obligation amount for adjudication. Medi-Cal will do the calculation and adjudicate on the balance.

The new business rules for billing Medi-Cal with a SOC in the IS requires the provider to do the following:

1. Note the portion of the claim used to clear the client's SOC on the claim.
2. Bill Medi-Cal for the portion of the claim that is greater than the client's SOC obligation.
   Example: Cost of Care = $158 SOC = $75
   $158 - $75 = $83 (If $75 is used to clear the SOC, $83 is billable to Medi-Cal)

<u>Provider Actions – Claiming Medi-Cal with a SOC:</u>

Providers need to know the client's SOC balance. To obtain this information, run an eligibility check to determine the client's SOC balance. Please remember that the client's SOC must be obligated outside of the IS. The IS has a new field in the outpatient claim screen called "SOC Obligation." Enter the SOC amount has been cleared in the ***new*** SOC Obligation field as shown below:

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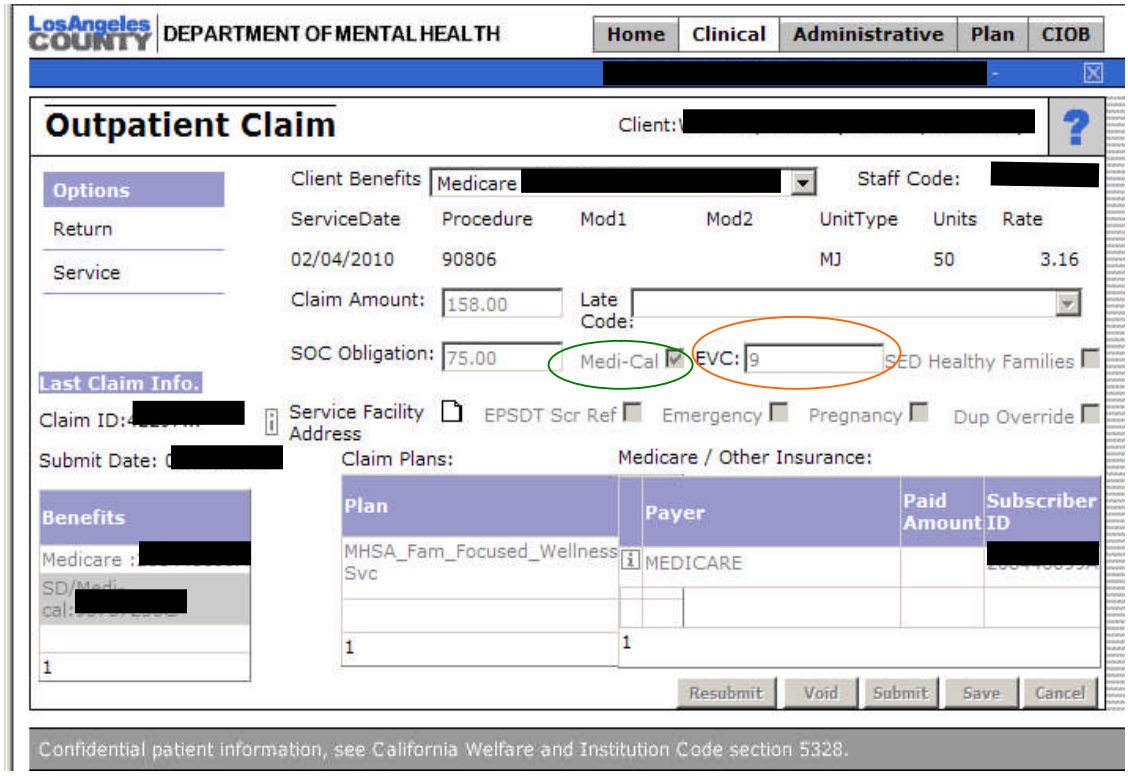
Actions to remember:

1. Do not check the Medi-Cal check box when the remaining claim balance is $0.00.
2. When there is a partial claim balance remaining, ensure that the Medi-Cal box is checked on the claim screen so that the claim balance after SOC obligation can be billed to Medi-Cal.
3. Enter the EVC number received from the eligibility check or enter "9" in the EVC box if the client is Medi-Cal eligible. Click **SUBMIT** to send the claim amount to the State; they will calculate the net billed amount.



If there is no SOC amount to be cleared, leave the SOC Obligation field blank.

NOTE: A client is not Medi-Cal eligible until the SOC has been cleared and certified.

EDI providers must also report this information!!!

We're here to help you…

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