

Overview & Administrative Items

Introduction

Purpose

The purpose of this module is to provide an overview of the California Children's Services (CCS) program and the Genetically Handicapped Person Program (GHPP) and identify important contact information for Systems of Care Division (SCD), CCS, GHPP, the Department of Health Care Services (DHCS) and the DHCS Fiscal Intermediary (FI).

Module Objectives

- Identify CCS program and GHPP requirements
- Identify important SCD, CCS, GHPP, DHCS and DHCS FI contact information

Resource Information

Medi-Cal Subscription Service (MCSS)

MCSS is a free subscription service that enables providers and others interested in Medi-Cal to receive subject-specific links to Medi-Cal news, *Medi-Cal Update* bulletins, urgent announcements and/or System Status Alerts via email. For more information and subscription instructions, visit the MCSS Subscriber Form at (www.medi-cal.ca.gov/mcss).

References

The following reference materials provide GHPP and CCS program and eligibility information:

Provider Manual References

Part 2

California Children's Services (CCS) Program (cal child)

California Children's Services (CCS) Program County Office Directory (cal child county)

California Children's Services (CCS) Program Eligibility (cal child elig)

California Children's Services (CCS) Program Special Care Centers (cal child spec)

Genetically Handicapped Persons Program (GHPP) (genetic)

Acronyms

A list of current acronyms is located in the *Appendix* section of this workbook.

DHCS Systems of Care Division

The Systems of Care Division (SCD) of DHCS is responsible for the administration and oversight of programs that focus on children and adults with special health care needs. SCD focuses on high-risk, high-cost child and adult populations:

- California Children's Services (CCS) program
- Child Health and Disability Prevention (CHDP) Program
- Genetically Handicapped Person Program (GHPP)
- Health Care Program for Children in Foster Care (HCPFC)
- High-Risk Infant Follow-up Program (HRIF)
- Medical Therapy Program (MTP)
- Newborn Hearing Screening Program (NHSP)
- Palliative Care Waiver Program

The CCS program is a partnership between local county health departments and the DHCS/SCD.

CCS Health Care Services

The CCS program provides administrative case management and authorization of health care services for the evaluation and/or treatment of a CCS-eligible condition for infants, children and youth up to 21 years of age who meet CCS residential and financial eligibility requirements.

Example: CCS-eligible medical conditions include: cystic fibrosis, sickle cell disease, hemophilia, cerebral palsy, heart disease, cancer, infectious diseases producing major sequelae, traumatic injuries and handicapping malocclusion.

A full description of all CCS-eligible conditions can be found on the DHCS website at www.dhcs.ca.gov/services/ccs/Pages/medicaleligibility.aspx

Children enrolled in the CCS program must have a CCS-eligible medical condition, be a resident of California and have a family adjusted gross income of \$40,000 or less in the most recent tax year. A child in a family with a higher income may still be financially eligible for the CCS program if the estimated out-of-pocket cost of care to the family for the child's CCS-eligible medical condition is expected to exceed 20 percent of the family's adjusted gross income.

The CCS program currently provides services to approximately 185,000 children through a network of CCS-paneled specialty and subspecialty providers, CCS-approved hospitals and Special Care Centers (SCCs). The CCS program also provides medical therapy services that are delivered at CCS Medical Therapy Units (MTU) located in public schools.

CCS/Medi-Cal Beneficiaries

Medi-Cal beneficiaries suspected of having CCS-eligible medical conditions are referred to CCS. If CCS determines that the beneficiary has a CCS-eligible condition, CCS will provide administrative case management for the treatment of the condition and authorize CCS treatment services. For full scope Medi-Cal beneficiaries Medi-Cal pays for the services authorized by CCS.

Medi-Cal Managed Care

DHCS has implemented several different managed care systems designed to meet the health care needs for the Medi-Cal population previously receiving services through a “fee-for-service” system. Many Medi-Cal-eligible children with CCS program-eligible medical conditions are enrolled in these Medi-Cal managed care plans. Services to treat a child’s CCS program-eligible medical condition are “carved-out” of benefits of most Medi-Cal managed care plans and are authorized by CCS on a fee-for-service basis.

The County Organized Health System (COHS) managed care plans in Santa Barbara, San Mateo, Solano, Napa, Marin and Yolo counties have “carved-in” CCS services. In these counties, CCS continues to authorize CCS services for children enrolled in the “carved-in” plans who have CCS-eligible medical conditions, but the plans are responsible for paying for services.

The term “carved-out” means that Medi-Cal managed care plans are not capitated to provide services for a child’s CCS program-eligible medical condition.

All Medi-Cal managed care plans are responsible for providing primary care and prevention services not related to the CCS program-eligible medical condition for enrollees.

Commercial Health Insurance

Providers are required to bill a CCS client's Other Health Coverage (OHC) prior to billing the CCS program or Medi-Cal. Providers must submit an *Explanation of Benefits* (EOB) or a valid denial letter from the OHC with every claim. The EOB must include a glossary and definition of codes. The denial letter must contain the carrier/carrier representative name and address; client name or subscriber number; date, statement of denial, termination or amount paid; and procedure or service rendered.

For detailed information, refer to the *OHC Guidelines for Billing* (other guide) section in the Part 1 Medi-Cal provider manual and *Other Health Coverage* (oth hlth) section in the Part 2 Medi-Cal provider manual.

A prior payment made by the OHC must be indicated in the appropriate fields on the claim. Providers should not reduce the charge amount or total amount billed because of any OHC payment. Providers may receive an additional amount only up to the Medi-Cal rate of payment, less the amount paid by the OHC.

When providers have an agreement with an OHC carrier/plan to accept the carrier's contracted rate as "payment in full," they will not receive any additional payments.

Service Authorization Requests (SAR) and the Independent County

In counties with a population greater than 200,000 (known as CCS "independent" counties), county staff perform all case management activities for eligible CCS program clients residing within their county. These services include determining all phases of program eligibility, evaluating medical necessity for specific services, determining the appropriate provider and authorizing services for medically necessary care.

The state SCD offices in Sacramento or Los Angeles provide consultation, technical assistance and oversight to the CCS independent counties.

Service Authorization Requests (SAR) and the Dependent County

Smaller counties with a population less than 200,000 (known as "CCS dependent" counties) do not provide medical case management, authorize CCS services or determine medical eligibility and benefits. The SCD offices provide these services for CCS-eligible children in these counties. The dependent counties remain responsible for the determination of CCS residential and financial eligibility.

GHPP Health Care Services

The GHPP provides authorization for health care services for adults with genetic diseases specified in the *California Code of Regulations (CCR)*, Title 17, Section 2932.

Clients must reside in California and have a qualifying health condition. Clients must also pay an enrollment fee based on their Adjusted Gross Income (AGI) as follows:

- Clients between 200% – 299% of federal poverty level (FPL) are required to pay a fee of 1.5% of their AGI.
- Clients at or above 300% of FPL are required to pay a fee of 3% of their AGI.

The following is a summary of GHPP-eligible medical conditions. This summary is solely to assist providers in understanding the medical eligibility criteria of the GHPP. It is not an authoritative statement of, and should not be cited as, authority for any decisions, determinations or interpretations of the GHPP. Providers should refer to the CCR section cited above for a definitive description of GHPP medical eligibility.

GHPP-eligible medical conditions include: Hemophilia and other genetic bleeding disorders; cystic fibrosis; Hemoglobinopathies with anemia, including sickle cell disease and thalassemia; Huntington's disease; Joseph's disease; Friedrich's Ataxia and other neurologic diseases; Phenylketonuria; Wilson's disease; galactosemia and other metabolic diseases; and Von Hippel-Lindau Disease.

Clients enrolled in GHPP must have a GHPP-eligible medical condition and be a resident of California. Children and youth with GHPP-eligible conditions are usually served by CCS. However, persons less than 21 years of age with a GHPP-eligible genetic disease can apply to GHPP if they have been determined to be financially ineligible to receive services from the CCS program. There is no income limit for GHPP eligibility.

Medi-Cal Managed Care

Medi-Cal contracts with a variety of managed care organizations to provide health care on a capitated basis to Medi-Cal recipients residing within specific service areas. Some GHPP clients who are eligible for Medi-Cal reside in these areas and are enrolled in these Medi-Cal managed care plans.

The health plans are capitated and are responsible for providing comprehensive health care to these GHPP clients, including services to treat their GHPP-eligible conditions. However, some services such as blood factor products are not included in Medi-Cal managed care plan capitation. GHPP authorizes these services for GHPP clients enrolled in the plans on a fee-for-service basis.

Private Health Insurance and Commercial HMOs

Some GHPP clients have private indemnity health insurance, or are enrolled in commercial health maintenance plans or preferred provider organizations. In these cases, GHPP is the health care payer of last resort and will authorize medically necessary services for the GHPP client only after it has been demonstrated that the services are beyond the scope of benefits of the indemnity insurance or health plan. The provider and/or client are required to exercise their appeal rights before GHPP will authorize and reimburse for these services.

Providers are required to bill a GHPP client's Other Health Coverage (OHC) prior to billing GHPP or Medi-Cal. Providers must submit an *Explanation of Benefits* (EOB) or a valid denial letter from the OHC with every claim. The EOB must include a glossary and definition of codes. The denial letter must contain the carrier/carrier representative name and address; client name or subscriber number; date, statement of denial, termination or amount paid; and procedure or service rendered.

For detailed information, refer to the *Other Health Coverage (OHC) Guidelines for Billing* (other guide) section in Part 1 of the Medi-Cal provider manual and the *Other Health Coverage* (oth hlth) section in Part 2 of the Medi-Cal provider manual.

A prior payment made by the OHC must be indicated in the appropriate fields on the claim. Providers should not reduce the charge amount or total amount billed because of any OHC payment. Providers may receive an additional amount only up to the Medi-Cal rate of payment, less the amount paid by the OHC.

When providers have an agreement with an OHC carrier/plan to accept the carrier's contracted rate as "payment in full," they will not receive any additional payments.

Service Authorization Requests (SAR) and the GHPP

A Service Authorization Request (SAR) must be submitted to the GHPP state office for approval of all GHPP diagnostic and treatment services. GHPP will issue a unique SAR number for services authorized by GHPP. This SAR number will begin with "99." The SAR number must be indicated on the claim in the appropriate Treatment Authorization Code field prior to submission to the DHCS Fiscal Intermediary (FI).

The provider is responsible for ensuring that their SAR number is indicated on the claim. Claims submitted without the correlating SAR number in the Treatment Authorization Code field will be denied.

For emergency services, authorization must be obtained from GHPP by the close of the next business day following the date of service.

GHPP eligibility determination, case management and authorization of services are conducted on a statewide basis by the GHPP state office.

The most effective way for GHPP to process SARs is for providers to fax their SARs to the GHPP state office. After GHPP adjudicates the SAR, providers will receive a hard copy authorization approval or denial for each submitted SAR. The Provider Electronic Interchange (PEDI) allows approved providers to electronically check the status of their SARs.

Genetically Handicapped Persons Program
1515 K Street, Suite 400, MS 8100
P.O. Box 997413
Sacramento, CA 95899-7413
(916) 327-0470
1-800-639-0597
Fax: (916) 440-5318

Directories

The following directories are provided in this training module:

- Systems of Care Division Directory
- CCS County Directory
- FI Directory
- DHCS Directory

Systems of Care Division Directory

SCD Sacramento Office		SCD Genetically Handicapped Persons Program (GHPP) San Francisco Office	
MS 8100 P.O. Box 997413 Sacramento, CA 95899 Main: (916) 327-3100 Fax: (916) 327-0998		4555 Golden Gate Avenue, Suite 7321 San Francisco, CA 94102 Main: 1-800-639-0597 Fax: (916) 440-5318	
SCD Los Angeles Office		SCD – Provider Services Unit (PSU)	
311 South Spring Street, #600 Los Angeles, CA 90013 Main: (213) 897-3574 Fax: (213) 897-3501 or 213-897-2882		MS 8100 P.O. Box 997413 Sacramento, CA 95899 Main: (916) 322-8702 Fax: (916) 440-5299	
SCD Genetically Handicapped Persons Program (GHPP)			
1515 K Street, Suite 400 MS 8100 P. O. Box 997413 Sacramento, CA 95899 Main: (916) 327-0470 or Toll Free: 1-800-639-0597 Fax: (916) 440-5318			

Websites:

- (www.dhcs.ca.gov)
- (www.medi-cal.ca.gov)
- (www.dhcs.ca.gov/services/ccs)

CCS County Office Directory

The following is an alphabetical directory of CCS county offices, including mailing and street addresses and telephone and fax numbers. It also identifies the county offices as dependent or independent and the state office in Sacramento or Los Angeles assigned to each county for the CCS program. This list is important in determining whether to contact the CCS county or the state SCD office in Sacramento or Los Angeles when requesting authorization.

County Office Selection Guidelines

- For questions about residential or financial eligibility, authorization and submitting claims in independent counties, please contact the CCS independent county office.
- For residential or financial eligibility questions in CCS-dependent counties, please contact the CCS dependent county office.
- For questions about medical eligibility, authorization or claims submission in CCS-dependent counties, please contact the state SCD office in Sacramento or Los Angeles.
- The SAR number must be indicated on the claim in the appropriate *Treatment Authorization Code* field (Box 63) on the *UB-04* form or the *Prior Authorization Number* field (Box 23) on the *CMS-1500* form prior to submission to the DHCS FI.

CCS County Office Directory

County Office Address	Telephone #	Fax #	Dependent/ Independent	State Office
Alameda 1000 Broadway, Suite 500 Oakland, CA 94607-4033	(510) 208-5970	(510) 267-3254	Independent	N/A
Alpine 75-B Diamond Valley Road Markleeville, CA 96120-5679	(530) 694-2146	(530) 694-2252	Dependent	Sacramento
Amador 10877 Conductor Boulevard, Suite 400 Sutter Creek, CA 95685-9688	(209) 223-6630	(209) 223-3524	Dependent	Sacramento
Butte 2491 Carmichael Drive, Suite 400 Chico, CA 95928-7191	(530) 895-6546	(530) 895-6557	Independent	N/A
Calaveras 891 Mountain Ranch Road San Andreas, CA 95249-9713	(209) 754-6460	(209) 754-1710	Dependent	Sacramento
Colusa 251 East Webster Street Colusa, CA 95932-2951	(530) 458-0380	(530) 458-4136	Dependent	Sacramento
Contra Costa 1220 Morello Avenue, Suite 101 Martinez, CA 94553-4707	(925) 957-2680	(925) 372-5113	Independent	N/A
Del Norte 880 Northcrest Drive Crescent City, CA 95531-2313	(707) 464-3191	(707) 465-6701	Dependent	Sacramento
El Dorado 941 Spring Street, Suite 3 Placerville, CA 95667-4543	(530) 621-6128	(530) 622-5109	Dependent	Sacramento

10 Overview & Administrative Items

County Office Address	Telephone #	Fax #	Dependent/ Independent	State Office
Fresno Mail: P.O. Box 11867 Fresno, CA 93721-1867 Street: 1221 Fulton Mall Fresno, CA 93721-1915	(559) 600-3300	(559) 455-4789	Independent	N/A
Glenn 240 North Villa Avenue Willows, CA 95988-2694	(530) 934-6588	(530) 934-6463	Dependent	Sacramento
Humboldt 908 7th Street Eureka, CA 95501-1115	(707) 445-6212	(707) 441-5686	Independent	N/A
Imperial Mail: 935 Broadway Street El Centro, CA 92243-2396 Street:: 797 Main Street, Suite A El Centro, CA 92243-7916	442-265-1904	442-265-1481	Dependent	Los Angeles
Inyo 207-A West South Street Bishop, CA 93514-3407	(760) 873-7868	(760) 873-7800	Dependent	Los Angeles
Kern 1800 Mt. Vernon Avenue, Second Floor Bakersfield, CA 93306-3302	(661) 321-3000	(661) 868-0280	Independent	N/A
Kings 330 Campus Drive Hanford, CA 93230-4375	(559) 852-4693	(559) 582-6803	Dependent	Sacramento
Lake 922 Bevins Court Lakeport, CA 95453-9739	(707) 263-5806	(707) 263-5872	Dependent	Sacramento
Lassen 1445-B Paul Bunyan Road Susanville, CA 96130-3146	(530) 251-8183	(530) 251-2668	Dependent	Sacramento
Los Angeles 9320 Telstar Avenue, Suite 226 El Monte, CA 91731-2849	1-800-288-4584	(626) 569-6465	Independent	N/A
Madera 14215 Road 28 Madera, CA 93638-5715	(559) 675-4945	(559) 675-7803	Dependent	Sacramento

County Office Address	Telephone #	Fax #	Dependent/ Independent	State Office
Marin 3240 Kerner Boulevard San Rafael, CA 94901-4840	(415) 499-6877	(415) 499-6369	Independent	N/A
Mariposa 5085 Bullion Street Mariposa, CA 95338	(209) 966-3689	(209) 966-4929	Dependent	Sacramento
Mendocino 1120 South Dora Street Ukiah, CA 95482-8333	(707) 472-2600	(707) 472-2735	Independent	N/A
Merced 260 East 15th Street Merced, CA 95341-6216	(209) 381-1114	(209) 381-1102	Independent	N/A
Modoc 441 North Main Street Alturas, CA 96101-3457	(530) 233-6311	(530) 233-6279	Dependent	Sacramento
Mono Mail: P.O. Box 3329 Mammoth Lakes, CA 93546-3329 Street: 437 Old Mammoth Road, Suite Q Mammoth Lakes, CA 93546-2013	(760) 924-1841	(760) 924-1831	Dependent	Los Angeles
Monterey 1615 Bunker Hill Way, Suite 190 Salinas, CA 93906-6011	(831) 755-4747	(831) 796-8690	Independent	N/A
Napa 2261 Elm Street, Building R Napa, CA 94559-3721	(707) 253-4391	(707) 299-2123	Independent	N/A
Nevada 500 Crown Point Circle, Suite 110 Grass Valley, CA 95945-9561	(530) 265-1450	(530) 271-0841	Dependent	Sacramento
Orange 200 West Santa Ana Boulevard, Suite 100 Santa Ana, CA 92701-4134	(714) 347-0300	(714) 347-0301	Independent	N/A
Placer 11484 B Avenue Auburn, CA 95603-2603	(530) 886-3630	(530) 886-3613	Independent	N/A

12 Overview & Administrative Items

County Office Address	Telephone #	Fax #	Dependent/ Independent	State Office
<p>Plumas Mail: P. O. Box 3140 Quincy, CA 95971-3140</p> <p>Street: 270 County Hospital Road, Suite 111 Quincy, CA 95971-9180</p>	(530) 283-6330	(530) 283-6110	Dependent	Sacramento
<p>Riverside 10769 Hole Avenue, Suite 220 Riverside, CA 92505-2869</p>	(951) 358-5401	(951) 358-5198	Independent	N/A
<p>Sacramento 9616 Micron Avenue, Suite 970 Sacramento, CA 95827-2627</p>	(916) 875-9900	(916) 854-9500	Independent	N/A
<p>San Benito 439 Fourth Street Hollister, CA 95023-3801</p>	(831) 637-5367	(831) 637-9073	Dependent	Sacramento
<p>San Bernardino 150 E Holt Boulevard, Third Floor Ontario, CA 91762-3822</p>	(909) 458-1637	(909) 986-2907	Independent	N/A
<p>San Diego 6160 Mission Gorge Road, Suite 400 San Diego, CA 92120-3431</p>	(619) 528-4000	(619) 528-4087	Independent	N/A
<p>San Francisco 30 Van Ness Avenue, Suite 210 San Francisco, CA 94102-6082</p>	(415) 575-5700	(415) 575-5790	Independent	N/A
<p>San Joaquin Mail: P.O. Box 2009 Stockton, CA 95201-2009</p> <p>Street: 420 S. Wilson Way Stockton, CA 95205-6243</p>	(209) 468-3900	(209) 953-3632	Independent	N/A
<p>San Luis Obispo 2180 Johnson Avenue San Luis Obispo, CA 93401-4513</p>	(805) 781-5527	(805) 781-4492	Independent	N/A
<p>San Mateo 701 Gateway Boulevard, Suite 400 South San Francisco, CA 94080-7041</p>	(650) 616-2500	(650) 616-2598	Independent	N/A

County Office Address	Telephone #	Fax #	Dependent/ Independent	State Office
Santa Barbara 345 Camino del Remedio, Bldg 4, Room 311 Santa Barbara, CA 93110-1132	(805) 681-5360	(805) 681-4763	Independent	N/A
Santa Clara 720 Empey Way San Jose, CA 95128-4705	(408) 793-6200	(408) 793-6250	Independent	N/A
Santa Cruz Mail: P.O. Box 962 Santa Cruz, CA 95061-0962 Street: 1430 Freedom Boulevard, Suite 101 Watsonville, CA 95076-2728	(831) 763-8000	(831) 763-8410	Independent	N/A
Shasta 2615 Breslauer Way, Bldg 5 Redding, CA 96001-4247	(530) 225-5760	(530) 225-5355	Dependent	Sacramento
Sierra Mail: P.O. Box 7 Loyalton, CA 96118-0007 Street: 202 Front Street Loyalton, CA 96118	(530) 993-6700	(530) 993-6790	Dependent	Sacramento
Siskiyou 806 South Main Street Yreka, CA 96097-3321	(530) 841-2132	(530) 841-4075	Dependent	Sacramento
Solano 275 Beck Avenue, MS 5-240 Fairfield, CA 94533-4090	(707) 784-8650	(707) 421-7484	Independent	N/A
Sonoma 625 Fifth Street Santa Rosa, CA 95404-4428	(707) 565-4500	(707) 565-4520	Independent	N/A
Stanislaus Mail: P.O. Box 3088 Modesto, CA 95353-3088 Street: 830 Scenic Drive, Third Floor Modesto, CA 95350-6131	(209) 558-7515	(209) 558-7862	Independent	N/A

14 Overview & Administrative Items

County Office Address	Telephone #	Fax #	Dependent/ Independent	State Office
<p>Sutter Mail: P.O. Box 1510 Yuba City, CA 95992-1510</p> <p>Street: 1445 Veterans Memorial Circle Yuba City, CA 95993-3011</p>	(530) 822-7215	(530) 755-0741	Dependent	Sacramento
<p>Tehama Mail: P.O. Box 400 Red Bluff, CA 96080-0400</p> <p>Street: 1860 Walnut Street, Suite C Red Bluff, CA 96080-3611</p>	(530) 527-6824	(530) 527-0362	Dependent	Sacramento
<p>Trinity Mail: P.O. Box 1470 Weaverville, CA 96093-1470</p> <p>Street: 51 Industrial Park Way Weaverville, CA 96093</p>	(530) 623-1358	(530) 623-1297	Dependent	Sacramento
<p>Tulare 1062 S. K Street Tulare, CA 93274-6422</p>	(559) 687-6915	(559) 685-4780	Independent	N/A
<p>Tuolumne 20111 Cedar Road North Sonora, CA 95370-5939</p>	(209) 533-7404	(209) 533-7406	Dependent	Sacramento
<p>Ventura 2240 East Gonzales Road, Suite 260 Oxnard, CA 93036-8210</p>	(805) 981-5281	(805) 658-4580	Independent	N/A
<p>Yolo 137 N Cottonwood Street, Suite 2300 Woodland, CA 95695-6681</p>	(530) 666-8333	(530) 666-1283	Independent	N/A
<p>Yuba 5730 Packard Avenue, Suite 100 Marysville, CA 95901-7117</p>	(530) 749-6340	(530) 749-6830	Dependent	Sacramento

FI Directory

Telephone Center

FI Telephone Service Center (TSC) (6 a.m. to midnight, 7 days a week) Secondary Menu Prompt Options: <ul style="list-style-type: none"> • California Children’s Services (CCS) Program/Genetically Handicapped Persons Program (GHPP) • Computer Media Claims (CMC) • POS/Internet Help Desk 	1-800-541-5555 Press or say 5 then 3 Press or say 4 then 2 Press or say 4 then 2
Automated Eligibility Verification System (AEVS) (2 a.m. to midnight, 7 days per week)	1-800-456-2387
Provider Telecommunications Network (PTN)	1-800-786-4346
Out-of-State Providers	(916) 636-1960

Department/Units

Subject Matter	Address
Appeals Unit	Xerox State Healthcare Services, LLC P.O. Box 15300 Sacramento, CA 95851-1300
Cash Control Unit	Xerox State Healthcare Services, LLC P.O. Box 13029 Sacramento, CA 95813-4029
Claims Inquiry Forms (CIFs)	Xerox State Healthcare Services, LLC P.O. Box 15300 Sacramento, CA 95851-1300
Correspondence Specialist Unit	Xerox State Healthcare Services, LLC P.O. Box 13029 Sacramento, CA 95813-4029
Hand Delivery of Claims/Correspondence	Xerox State Healthcare Services, LLC 820 Stillwater Road, West Sacramento, CA 95605-1630
Resubmission Turnaround Documents	Xerox State Healthcare Services, LLC P.O. Box 15200 Sacramento, CA 95851-1200
Medi-Cal Website	(www.medi-cal.ca.gov)

DHCS Directory

<p>Medi-Cal Benefits Branch MS 4601 P.O. Box 997417 Sacramento, CA 95899-7417 Telephone: (916) 552-9797</p>	<p>Medi-Cal Fraud Reporting Hotline Providers and Recipients Telephone: 1-800-822-6222</p>
<p>Medi-Cal Third Party Liability Division MS 4720 P.O. Box 997425 Sacramento, CA 95899-7425 Telephone: (916) 650-0490</p>	<p>Medi-Cal Fraud and Elder Abuse Reporting Hotline (Department of Justice) Telephone: 1-800-722-0432</p>
<p>Medi-Cal Eligibility Division MS 4607 P.O. Box 997417 Sacramento, CA 95899-7417 Telephone: (916) 552-9200</p>	<p>Medi-Cal Managed Care Division MS 4400 P.O. Box 997413 Sacramento, CA 95899-7413 Telephone: (916) 449-5000</p>
<p>Medi-Cal Provider Enrollment Division MS 4704 P.O. Box 997413 Sacramento, CA 95899-7413 Telephone: (916) 323-1945</p>	<p>Medi-Cal Benefits, Waiver Analysis and Rates Division MS 4600 P.O. Box 997417 Sacramento, CA 95899-7417 Telephone: (916) 552-9400</p>