

3. Inquiries and Resources



3.1 General Public Inquiries for Clients

The scope of benefits available to a Medi-Cal beneficiary is a very complex subject. Eligibility to obtain a given Medi-Cal service depends on many factors such as diagnosis, prognosis, age, and medical necessity.

Electronic Data Systems (EDS) issues manuals to Medi-Cal providers which inform them about scope of benefits, prior authorization requirements, and claims procedures.

All new applicants and any beneficiaries having questions concerning Medi-Cal benefits should be given the brochure, "Medi-Cal: What It Means To You" (PUB 68), which describes program benefits.

Common questions asked by clients concerning the program are to be handled by providing appropriate phone numbers.

3.1.1 Ability to Pay Program Determination (APD)

The Ability to Pay Program at VMC is available to persons who are not eligible for Medi-Cal. A person will only be screened for Ability to Pay when they are making an appointment or have had previous care and need coverage. For information on this program, the EW or the client can call:

Santa Clara Valley Medical Center
Patient Business Services Unit
2325 Enborg Lane
San Jose, CA 95128
408-885-7470 (if clients are ineligible for Medi-Cal and have VMC bills)

Medical services are not provided at the Enborg Lane location. Continue to refer clients needing medical care to:

751 S. Bascom Ave.
San Jose, CA 95128
1-888-334-1000 (if client is ineligible for Medi-Cal and need medical care/appointment and there is no VMC bill)

Inquiries and Resources**3.1.2 Access for Infants and Mothers (AIM)**

The AIM Program provides low-cost health coverage for pregnant women and their newborns. To learn more about the program and to apply, clients can call:

1-800-433-2611

www.aim.ca.gov

3.1.3 “Acquired Immune Deficiency Syndrome” (AIDS) Hotline

Clients may call the following phone numbers for AIDS information, testing centers, counseling, etc.

- California AIDS Hotline
P.O. Box 426182
San Francisco, CA 94142-6182
Hotline: 1-800-367-2437
Main Line: 415-863-2437
TDD: 1-888-225-2437
- Office of AIDS
California Department of Health Care Services
1616 Capitol Ave., Suite 616
MS-7700
P.O. Box 997426
Sacramento, CA 95899-7426
916-449-5900 (non Medi-Cal services for persons with AIDS)

www.dhcs.ca.gov/aids; or

www.thelivingcenter.org (for local resources in Santa Clara County)

3.1.4 BabyCal

Pregnant women who want to inquire about prenatal services, state programs that can help pay for prenatal care and to find a doctor, may call:

1-800-Baby-999 or 1-800-222-9999

www.dhcs.ca.gov/babycal

3.1.5 Breast & Cervical Cancer Treatment Program (BCCTP)

The treatment program serves low-income California residents who have been screened and found to be in need of treatment for breast and/or cervical cancer. For Information and how to enroll, contact:

California Department of Health Care Services
BCCTP
MS-4611
P.O. Box 997413
Sacramento, CA 95899-7413
1-800-824-0088

www.dhcs.ca.gov/mcs/mcpd/meb/bcctp

3.1.6 Buy-In Problems for Medicare Parts A & B and Technical Problems for Medicare Part D

California Department of Health Care Services

Third Party Liability Branch
Medicare Operations Unit
P.O. Box 997422, MS 4719
Sacramento, CA 95899-7422

Send DHCS 6166 via secured e-mail to: buyin@dhcs.ca.gov, or

Fax DHCS 6166 to: 916-440-5677

3.1.7 Child Health & Disability Prevention Program (CHDP)

To locate doctors and dentists who will accept Medi-Cal for treatment of PERSONS UNDER 21:

CHDP: 1-800-689-6669 or 408-494-7410

Santa Clara County Health Dept. Information Line: 408-494-7410

www.dhcs.ca.gov/pcfh/cms/chdp

Inquiries and Resources**3.1.8 Children's Health Initiative (CHI)**

To obtain information about enrolling children in a health plan, call:

1-888-CHI-5222 or 1-888-244-5222

www.chikids.org

3.1.9 COBRA

California Department of Health Care Services

COBRA

Information Line: 1-866-444-3272

Main Line: 415-975-4600

3.1.10 Complaints Against Health Care Providers

Medical Board of California

Central Complaint Unit

1426 Howe Avenue, Suite 54

Sacramento, CA 9582-3236

1-800-633-2322 or

916-263-2424

3.1.11 Consumer Information Center

The Consumer Information Center phone number may be given to clients for information about doctor's licenses or any records of disciplinary action against them.

1-916-263-2382

www.medbd.ca.gov

3.1.12 Dental Services

The following phone numbers may be given to clients for questions regarding dental services.

- Clients who need to locate a dentist who will accept Medi-Cal, or who need assistance with scheduling a “regional screening appointment”, or who have billing questions, or who have complaints about the level or quality of dental services they receive may be referred to Denti-Cal’s toll free number:

Denti-Cal Beneficiaries Services
 P.O.Box 15539
 Sacramento, CA 95852-1539

1-800-322-6384 (8:00-5:00 Monday-Friday; 8:00-12:00 Saturday).

Note:

Most dental services require prior authorization. Once a dentist has submitted a request for authorization, a state contracted dental consultant must evaluate the patient to assess the need for treatment. In these cases, DHCS may contact the client to arrange a regional screening appointment.

- Clients may contact the Santa Clara County Dental Society to locate a dentist.
 - Recording of Medi-Cal dentists within Santa Clara County 408-289-1482
 - Other dental questions 408-289-1480.

3.1.13 Dental Treatment Options

Low income persons who are ineligible for Medi-Cal may receive reduced cost dental care. The Santa Clara County Dental Society has provided these treatment options:

Saint James Health Center*	408-280-1316
The Indian Health Center (Will treat anyone)	408-445-3410
Chaboya Clinic*	1-888-334-1000
University of California	415-476-1891
University of the Pacific	415-929-6400
Foothill Community College	650-949-7335
NOTE: The client will need to explore the financial requirements at each facility. *San Jose residents only unless client has Medi-Cal.	

Inquiries and Resources**3.1.14 Doctor Services**

To find a doctor, clients may call:

- Santa Clara County Medical Association
408-998-8850
- Santa Clara Family Health Plan Customer Services
1-800-260-2055
- Anthem Blue Cross of California Member Services
1-800-407-4627
- Valley Connection (Santa Clara County Health and Hospital System)
1-888-334-1000
- The Child Health and Disability Prevention (CHDP) Unit for children under 21 or anyone who needs a doctor for pregnancy

408-885-5000 or 408-792-5158
- The Department of Health Care Services (DHCS) Provider Services Section can be contacted for assistance in locating a doctor or to assist clients with Medi-Cal billing problems.

916-323-1945

3.1.15 Electronic Data Systems (EDS) Help Desk

For Medi-Cal inquiries and billing issues, clients can call:

916-636-1980

3.1.16 Health Care Options (HCO)

For more information or to enroll or disenroll in a Medi-Cal Managed Care Health Plan, clients may contact:

California Department of Health Care Services
Health Care Options
P.O. Box 989009

W. Sacramento, CA 95798-9850
1-800-430-4263
TDD: 1-800-430-7077

To file a “plan specific” complaint, refer beneficiaries to the specific health plan:

- Santa Clara Family Health Plan Customer Services
1-800-260-2055
- Anthem Blue Cross of California Member Services
1-800-407-4627

If beneficiaries are not satisfied and cannot resolve their complaint, refer them to the State Office of the Ombudsman at:

California Department of Health Care Services
State Office of the Ombudsman
MS-4412
P.O. Box 997413
Sacramento, CA 95899-7413
1-888-452-8609

3.1.17 Health Insurance Billing and Coding

To inquire about health insurance billing or to request the removal/correction of an erroneous other health coverage (OHC) code, the EW must send a SECURED e-mail or a fax to the Third Party Liability and Recovery Division, Other Health Coverage Unit. Proof of OHC termination is not required. Allow AT LEAST 96 hours for the request to be processed.

California Department of Health Care Services
Third Party Liability and Recovery Division
Other Health Coverage Unit
P.O. Box 997422
MS-4719
Sacramento, CA 95899-7422

E-mail: wats@dhcs.ca.gov

Fax: 1-916-650-6580, 1-916-650-6581, or 1-916-650-6582

Inquiries and Resources**3.1.18 Healthy Families**

To receive an application packet, ask questions, get information on Healthy Families doctors and dentists, and get names and addresses of organizations which help applicants complete the applications; applicants may call:

Information Line: 1-800-880-5305

Outreach Information Line: 1-888-747-1222

Membership Line: 1-866-848-9166

www.healthyfamilies.ca.gov

3.1.19 Health Insurance Premium Payment Program (HIPP)

California Department of Health Care Services
Health Insurance Premium Payment Program
P.O. Box 997422, MS 4719
Sacramento, CA 95899-7422
1-866-298-8443

3.1.20 LTC Ombudsman Program

The long-term care Ombudsman works to resolve any problem or complaint involving a resident of a nursing home or board and care facility (Long Term Care Patients).

408-944-0567

3.1.21 Managed Care Ombudsman

The State Office of the Ombudsman works to resolve any problems involving managed care and Medi-Cal.

California Department of Health Care Services
State Office of the Ombudsman
P.O. Box 997413
MS-4412
Sacramento, CA 95899-7413
1-888-452-8609

3.1.22 Medical Board of California Central Complaint Unit

Medical Board of California
Central Complaint Unit
1426 Howe Ave., Suite 54
Sacramento, CA 95825-3236
1-800-633-2322
916-263-2424

3.1.23 Medi-Cal Cards with Utilization Restrictions

Have the beneficiary call DHCS, Audits and Investigations at 916-322-1071.

3.1.24 Medi-Cal Fraud and Patient Abuse

To report beneficiary and provider fraud and patient abuse, contact one of the following:

- Medi-Cal Fraud Statewide Hotline: 1-800-822-6222
- Department of Health Care Services
Investigation Unit - North
P.O. Box 997413 - MS 2201
Sacramento, CA 95899
Main Line: 916-650-6630
Fax: 916-324-0772
- State Attorney General's Office
Bureau of Medi-Cal Fraud and Patient Abuse
Complaint Hotline: 1-800-722-0432
- **EWs use ONLY:**
Art Rincon, M/C Fraud Unit Investigator
Phone: (510) 620-3079
Fax: (510) 620-3111

Note:

The Department of Justice in San Francisco investigates the criminal aspects of provider fraud.

415-436-7212 or 415-657-0801

Inquiries and Resources**3.1.25 Medi-Cal General Information for All Aid Programs**

For information regarding services provided under the Medi-Cal program, refer beneficiaries to:

Electronic Data System (EDS)
Beneficiary and HIPPA Help Desk
916-636-1980
TDY (for hearing impaired): 1-800-952-8349

3.1.26 Medi-Cal Managed Care Plans

To receive information about Medi-Cal providers, enrollment and disenrollment, or to receive an enrollment packet or a provider directory, clients may call:

- Santa Clara Family Health Plan (SCFHP)
210 E. Hacienda Ave.
Campbell, CA 95008
1-800-260-2055
408-260-4400 (Eligibility Verification and Authorization)

www.scfhp.com

- SCFHP Family Resource Center
1775 Story Road, Suite 130
San Jose, CA 95122
408-874-1888
- Anthem Blue Cross of California Member Services
1-800-407-4627

www.anthem.com/ca

For Enrollment or Disenrollment Problems, clients may also call:

- Health Care Options Program Health Line (MAXIMUS)
P.O. Box 989009
W. Sacramento, CA 95798
1-800-430-4263 or
- 916-657-0025.

[Refer to “Disenrollment,” page 15-10]

To report a plan-specific managed care complaint: The beneficiary should call his/her specific health plan. If the beneficiary is not satisfied with their solution, call the State Office of the Ombudsman at: (888) 452-8609

3.1.27 Medicare

- For general/enrollment information, Medicare Prescription Drug Plan (Part D), Medigap and Medicare Supplemental Insurance, replacement of Medicare card, find a doctor, or ask for publication, clients may call:

Center for Medicare & Medicaid Services (CMS)
1-800-MEDICARE or 1-800-633-4227

www.medicare.gov

3.1.28 Medicare Part D

- To apply for Low Income Subsidy (LIS) Program (also known as Extra Help), refer clients to Social Security Administration (SSA):

1-800-772-1213 or local SSA office

www.socialsecurity.gov

- For assistance in selecting a Prescription Drug Plan (PDP), clients may call the Health Insurance Counseling & Advocacy Program (HICAP).

1-800-434-0222

- For prescription related problems such as problems getting a prescription filled, pharmacists can call the CMS Dedicated Pharmacy Phone Line:

1-866-835-7595

- To inquire about what specific drugs a plan covers or co-payments, contact the appropriate PDP:

AARP Medicare Rx	1-888-867-5575
Health Net Orange	1-800-806-8811
Humana	1-800-281-6918

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Pacificare	1-800-797-9794
Sierra Rx	1-866-789-0565
Unicare	1-800-928-6201
United Health Rx	1-888-556-7060
Well Care	1-888-423-5252
Wellpoint	1-866-892-5335

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3.1.29 Probate/Estate Recovery

Questions concerning Probate and Estate Recoveries:

Department of Health Care Services
 Estate Recovery Unit
 MS4720
 P.O. Box 997425
 Sacramento, CA 95899-7425

916-650-0490 or fax 916-650-6584

Note:

The Department of Health Care Services is required to grant hardship waivers under limited circumstances, when repayment of Medi-Cal claims would result in substantial hardship to heirs. Questions or inquiries about “hardship waivers” should be directed to this number. The claims letter issued by DHCS includes a statement about hardship waivers and how heirs can apply.

3.1.30 Railroad Retirement Information

U.S.R.R. Board
 Wells Fargo Bank Bldg.
 1333 Broadway, Suite 490
 Oakland, CA 94612

510-637-2973

3.1.31 Safely Surrendered Baby Hotline

For information on how to safely surrender a newborn under the Safely Surrendered Baby Law:

(877) BABY SAFE (877-222-9723)

3.1.32 Santa Clara County Mental Health Plan (MHP)

The managed care mental health plan for Santa Clara County is the “Access” program.

Santa Clara County Mental Health Department
645 S. Bascom Avenue
San Jose, CA 95128
1-800-704-0900

3.1.33 Senior Outreach

Senior Outreach and Escort Program

408-436-2865

Appropriate referrals include: disabled persons age 60+ or aged persons 62+ who are in need of transportation, help in dealing with SSA, emergency housing or PG&E assistance, food/nutrition program, counseling, etc.

3.1.34 State Hearings and Appeals

Recipients may request a State Hearing regarding scope or duration of Medi-Cal benefits by contacting:

California Department of Social Services (CDSS)
State Hearings Division
P.O. Box 944243, MS 19-37
Sacramento, CA 94244-2430
Phone: 1-800-952-5253
Fax: 916-229-4110
TDD: 1-800-952-8349

Or submitting a request in writing to:

Inquiries and Resources

Appeals Section
 Santa Clara County Social Services Agency
 333 W. Julian Street
 San Jose, CA 95110
 408-491-6325

3.1.35 State Programs - Disability Determination Service Division (SP-DDSD)

Department of Social Services
 Disability Determination Service Division
 Oakland State Programs Branch
 P.O. Box 23645
 Oakland, CA 94623-0645

General Information: 510-622-3756 (Master Files)
 Fax: 1-800-869-0203

3.1.36 Supplemental Security Income (SSI) and Social Security Administration (SSA)

General Information: 1-800-772-1213 (7:00 AM to 7:00 PM)
 TTY: 1-800-325-0778

www.socialsecurity.gov

Refer clients to the following local SSA offices to apply:

Campbell Office 770 W. Hamilton Avenue Campbell, CA 95008 408-348-5832	Mountain View Office 700 E. El Camino Real, Suite 350 Mt. View, CA 94040
East San Jose Office 2500 Fontaine Road San Jose, CA 95121 1-866-931-4496	San Jose Downtown Office 280 S. First Street, Room 244 San Jose, CA 95113 1-866-331-2235
Gilroy Office 1059 First Street Gilroy, CA 95020	South San Jose Office 6140 Cottle Road San Jose, CA 95123

3.1.37 Third-Party Liability

Questions concerning accident settlements, Medi-Cal casualty, personal injury, probates, estates, liens, lawsuits, workers' compensation payment or claims, overpayment, or other situations where a third party is responsible for reimbursing Medi-Cal for payments made on behalf of a recipient should be referred to:

- California Department of Health Care Services
Recovery Section
P.O. Box 997425, MS 4720
Sacramento, CA 95899-7425

Information Line: 916-323-4836
Main Line: 916-650-0490
Fax: 916-650-6584

- California Department of Health Care Services
Other Health Coverage Unit
P.O. Box 997422, MS-4719
Sacramento, CA 95899-7422
E-mail: wats@dhcs.ca.gov
Fax: 916-650-6580, 916-650-6581, or 916-650-6582

- California Department of Health Care Services
COBRA
Information Line: 1-866-444-3272
Main Line: 415-975-4600

- California Department of Health Care Services
Health Insurance Premium Payment Program (HIPP)
P.O. Box 997422
Sacramento, CA 95899-7422
1-866-298-8443

- California Department of Health Care Services
Medicare Parts A & B Buy-In and Part D Technical Problems
P.O. Box 997422, MS 4719
Sacramento, CA 95899-7422
1-866-227-9863

Send DHCS 6166 via secured e-mail to: buyin@dhcs.ca.gov, or

Fax DHCS 6166 to: 1-916-440-5677

Inquiries and Resources**3.1.38 Vision Care**

Clients with questions concerning vision care are to be referred to:

Optometric Information
916-636-1980 (Sacramento)

3.1.39 Voluntary Repayment of Benefits by Beneficiaries

Public Guardians, Social Workers or representative payees of Medi-Cal recipients may want to reimburse Medi-Cal for benefits paid on their behalf. These persons shall be referred to the following Department of Health Care Services Office:

California Department of Health Care Services
Third Party Liability Branch
Recovery Section
P.O. Box 997425, MS-4720
Sacramento, CA. 95899-7425
Phone: 916-650-0490
Fax: 916-650-6584

**3.2 Provider Inquiries**

Questions from Medi-Cal PROVIDERS concerning the scope of benefits and billing procedures are to be handled as outlined below. DO NOT REFER CLIENTS TO THESE STATE OFFICES.

3.2.1 Automated Eligibility Verification System (AEVS)

Providers may call the EDS number to enroll in the Automated Eligibility Verification System (AEVS):

1-800-456-2387

1. AEVS enables providers to verify an individual's Medi-Cal eligibility using a touch-tone telephone and entering the beneficiary's 14-digit I.D. number or SSN.

- a. AEVS contains Medi-Cal eligibility information for the current month and prior three months.
 - b. The provider is given eligibility status information, including service restrictions, unmet share of cost, participation in prepaid health plan, restricted services information and other health coverage.
 - c. Providers must pay for this service.
2. Although AEVS is available to providers, it is optional. Eligibility staff are required to provide verification of Medi-Cal eligibility to providers upon request.

3.2.2 Dental Contract Questions

For general questions, billing information and dental contract questions, providers may call:

Delta Dental, Denti-Cal
Provider Group
P.O. Box 15609
Sacramento, CA 95852-0609
1-800-423-0507

Inquiries and Resources**3.2.3 Drug Benefits**

Questions concerning drug benefits are to be referred to:

Department of Health Care Services
Northern California Drug Unit
P.O. Box 201007
Stockton, CA 95201

209-942-6030

3.2.4 Electronic Data Systems (EDS)

Electronic Data Services (EDS) is the Medi-Cal claims payment fiscal intermediary. EDS has the following toll free number to answer provider inquiries regarding billing, claim status, and Medi-Cal policies and procedures (e.g., provider asking why a claim is being rejected):

1-800-541-5555	<ul style="list-style-type: none"> • General questions and billing information • Provider Support • Obstetrics/Perinatal Services Program • California Children's Services (CCS) • Genetically Handicapped Person's Program (GHPP)
1-800-427-1295	POS Help Desk
916-636-1200	Out-of-State & In-State Medi-Cal Provider Billing

3.2.5 General Information

Providers can call the Department of Health Care Services (DHCS) regarding general scope of benefits and prior authorization:

1-800-541-5555

3.2.6 Health Access Programs (HAP) Hotline

Providers may call the HAP hotline concerning State Only Family Planning at:

1-800-257-6900

3.2.7 Non-Emergency Medical Transportation

Questions concerning non-emergency medical transportation:
(800) 325-5964.

3.2.8 Out-of-State Authorization for Treatment

In order for out-of-state providers to bill Medi-Cal, they must first obtain a provider number, an out-of-state billing manual, and the appropriate forms.

Staff receiving calls from out-of-state providers should refer them to:

California Department of Health Care Services
Field Services Section
P.O. Box 193704
San Francisco, CA 94119-3704
415-904-9600

3.2.9 Out-of-State Provider Billing

For out-of-state providers, the following number may be given:

916-636-1200

Out-of-state providers who have a provider number and the appropriate claim forms for billing can forward them to:

San Francisco Medi-Cal Field Office
Inpatient Claims
P.O. Box 193704
San Francisco, CA 94119
415-904-9600

Inquiries and Resources**3.2.10 Provider Enrollment**

Physicians and other providers (including out-of-state providers) who wish to become a Medi-Cal provider may contact:

California Department of Health Care Services
Provider Enrollment Branch
P.O. Box 997413, MS-4704
Sacramento, CA 95899-7413
916-323-1945

www.medi-cal.ca.gov

3.2.11 Treatment Authorization Requests

California Department of Health Care Services
Field Services Section
P.O. Box 193704
San Francisco, CA 94119-3704
415-904-9600

3.2.12 Vision Care

Providers with questions concerning vision care are to be referred to:

Optometric Information
916-552-9539



3.3 Contract Hospitals

Effective March 1, 1983, the following seven (7) hospitals have contracts with the State of California to provide inpatient care to Medi-Cal patients:

Note:

All hospitals must provide emergency care for a person with a life threatening medical problem.

1. Regional Medical Center of San Jose
225 North Jackson Avenue
San Jose, CA 95116
Telephone: (408) 259-5000
2. O'Connor Hospital
2105 Forest Avenue
San Jose, CA 95114
Telephone: (408) 947-2500
3. Rehabilitation Center of Los Gatos-Saratoga
815 Pollard Avenue
Los Gatos, CA 95030
Telephone: (408) 866-4020
4. Santa Clara Valley Medical Center
751 South Bascom Avenue
San Jose, CA 95128
Telephone: (408) 885-5930
5. Stanford University Medical Center
300 Pasteur Drive
Palo Alto, CA 94304
Telephone: (650) 723-4000
6. El Camino Hospital
2500 Grant Road
Mountain View, CA 94039-7025
Telephone: (650) 940-7000
7. Saint Louise Regional Hospital
9400 No Name Uno
Gilroy, CA 95020
Telephone: (408) 848-2000

