STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY PETE WILSON, *Governor*

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
P.O. BOX 942732
SACRAMENTO, CA 94234-7320

(916) 657-2941

April 21, 1995

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons

Letter No.: 95-27

MC 180 (Eligibility Letter of Authorization)

Payment Systems Division has brought to the Medi-Cal Eligibility Branch's (MEB) attention the need to include a date on the new MC 180. This is due to the requirement that claims related to these circumstances be received by the Electronic Data Systems, Over-One-Year Claims Unit, no later than 60 days after the date of resolution of the circumstances which caused the billing delay.

To solve this problem, we are asking counties to date these forms in the upper left-hand corner near the Document Number. It is our understanding that a small number of forms were returned for correction. We have asked the Over-One-Year Claims Unit to contact MEB before returning any more MC 180s with the above described problem. MEB staff will attempt to obtain the omitted information so as to reduce processing delays. Lastly, the next revision of this form will include a space to capture this needed information.

If you have any questions, please contact Craig Yagi of my staff at (916) 657-1182.

Sincerely,

ORIGINAL SIGNED BY
GLENDA ARELLANO for

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch