State of California—Health and Human Services Agency

Department of Health Services





June 25, 2004

MEDI-CAL ELIGIBILITY PROCEDURES MANUAL LETTER NO.: 289

TO: ALL HOLDERS OF THE MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

SUBJECT: ARTICLE - 16F-OVERPAYMENTS AND FRAUD

Enclosed are updated pages for Article 16F, the Overpayments and Fraud Section. This section provides the addresses, telephone, and fax numbers for the Department of Health Services Investigations Branch Headquarters and Regional Offices.

Filing Instruction:

Remove Pages:

Insert Pages:

Article 16F, pages 1 through 4

Article 16F, pages 1 through 4

If you have any questions regarding these changes, please contact Ms. Vicki Partington at (916) 552-9496 or E-mail Vparting@dhs.ca.gov.

Original signed by

Richard Brantingham, Acting Chief Medi-Cal Eligibility Branch

Enclosures

16F-DHS INVESTIGATIONS BRANCH

Branch Responsibilities

The DHS Investigations Branch is responsible for the investigation of Medi-Cal potential overpayments of \$100 or more and/or fraud. The Investigations Branch local offices will coordinate with counties to determine how counties should request and obtain the Medi-Cal utilization information for a case. When a county refers a potential overpayment case to the local Investigations office, Investigation's staff will obtain the most recent claims payment information, conduct additional review and investigation, and compute the actual Medi-Cal overpayment.

II. Medi-Cal Fraud

The local DHS Investigations offices are responsible for investigating all cases involving potential Medi-Cal fraud as outlined in Title 22, CCR, Sections 50781 and 50782. Suspected fraud is defined as intentional misrepresentation of material facts such as property, residence, income, or other factors which may affect eligibility. Note: County staff granting Medi-Cal eligibility for long term care should look closely at any disqualifying transfers during the thirty-month "look-back" period for potential fraud.

The local DHS Investigations offices also maintain the Early Fraud Detection Program (EFDP) to detect fraudulent activity during the application process. The purpose of this program is to identify persons not entitled to receive Medi-Cal benefits prior to a case being granted. County personnel initiates a referral to their assigned investigator if they suspect an applicant is not accurately reporting information on their Medi-Cal application pertinent to income, property, residency, or persons in the home. Referrals may be made by telephoning the local DHS's Investigations office and/or by completing and sending the Confidential Medi-Cal Complaint Report (MC 609) to the local Investigations office. County welfare departments shall develop a referral process for these cases with their local Investigations office investigators

All EFDP referrals will receive top priority from the local Investigations office and will be processed within seven working days. Results of the investigation will generally be reported back to the county within ten working days of the referral.

Medi-Cal fraud/overpayment referral packages will be sent by the counties to the following local Investigations offices:

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III. Offices

DEPARTMENT OF HEALTH SERVICES INVESTIGATIONS BRANCH

Investigations-Northern Region (Headquarters)

Sacramento Unit I: Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Nevada, Placer, Plumas, Sacramento, San Francisco, Shasta, Siskiyou, Solano, Sonoma, Tehama, Trinity, Yolo, Tuolumne

Sacramento Unit II: Alameda, Alpine, El Dorado, Humboldt, Monterey, Sacramento, San Benito, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Sierra, Sonoma, Stanislaus, Sutter, Yuba

1500 Capitol Ave., MS 2201 P.O. Box 997413 Sacramento, CA 95899-7413 Phone: (916) 650-6630 Fax: (916) 650-6663

HOTLINE: (800) 822-6222 Wayne Duguid, Section Chief

Fresno: Fresno, Kings, Madera, Mariposa, Merced, San Luis Obispo, Santa Barbara,

Tulare

1782 East Bullard, Suite 104 Fresno, CA 93710 Phone: (559) 446-2440 Fax: (559) 446-2455 Kevin Fite, Unit Chief

Investigations-Southern Region: Imperial, San Diego

7575 Metropolitan Dr., Suite 330 San Diego, CA 92108 Phone: (619) 688-0143 Fax: (619) 688-0250

HOTLINE: (800) 822-6222
Bruce Edwards, Section Chief

Investigations-Eastern Region: Orange, Riverside, San Bernardino

770 The City Drive South, Suite 7300 Orange, CA 92868
Phone: (714) 703-2600

Phone: (714) 703-2600 Fax: (714) 703-2617

Michael Pearlman, Section Chief

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Rancho Cucamonga, Unit 1

10370 Commerce Center Drive, Suite 100 Rancho Cucamonga, CA 91730 Phone: (909) 483-0227

Fax: (909) 483-0243

Send referrals to Eastern Region Office

West Covina

1000 Lakes Dr., Suite 330 West Covina, CA 91790 Phone: (626) 918-6685/6805

Fax: (626) 918-7515

Send referrals to Eastern Region Office

Investigations-Western Region: Inyo, Kern, Los Angeles, Mono, Ventura

5701 South Eastern Avenue, Suite 600

Commerce, CA 90040 Phone: (323) 838-7000 Fax: (323) 838-7015

Barbara Naimark, Section Chief

Bakersfield

1200 Discovery Plaza, Suite 160 Bakersfield, CA 93309 Phone: (661) 395-2705

Fax: (661) 395 2707

Send referrals to Western Region Office

Gardena

19300 Hamilton Avenue, Suite 270 Gardena, CA 90248 Phone: (310) 516-4677 Fax: (310) 516-4108 Send Referrals to Western Region Office

Granada Hills

16800 Devonshire Street, Suite 220 Granada Hilis, CA 91343 Phone (818) 832-3254 Fax: (818) 832-3264 Send Referrals to Western Region Office

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Provider/Beneficiary Hotline For reporting Medi-Cal Fraud 800-822-6222

All written MC 609 complaints on providers should be sent directly to the Western Regional Office in Commerce. Beneficiary complaints should be sent to the Regional Office responsible for the county the complaint is in (e.g., Los Angeles beneficiary complaints should go to the Western Regional Office).

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