

DHCS AUDITS AND INVESTIGATIONS  
CONTRACT AND ENROLLMENT REVIEW DIVISION  
RANCHO CUCAMONGA – SECTION

**REPORT ON THE MEDICAL AUDIT OF  
LOCAL INITIATIVE HEALTH AUTHORITY FOR  
LOS ANGELES COUNTY  
DBA L.A. CARE HEALTH PLAN  
FISCAL YEAR 2023-24**

Contract Number(s): 22-20466 and 23-30264

Contract Type: State Supported Services

Audit Period: February 1, 2023 — January 31, 2024

Dates of Audit: June 10, 2024 — June 21, 2024

Report Issued: January 16, 2025

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## I. INTRODUCTION

This report presents the results of the audit of Local Initiative Health Authority for Los Angeles County dba L.A. Care Health Plan (Plan) compliance and implementation of the State Supported Services contract numbers 22-20466 and 23-30264 with the State of California. The State Supported Services Contracts cover abortion services with the Plan.

The audit covered the period of February 1, 2023, through January 31, 2024. The audit was conducted from June 10, 2024, through June 21, 2024, which consisted of a document review and verification study with the Plan administration and staff.

An Exit Conference with the Plan was held on December 18, 2024. No deficiencies were noted during the review of the State Supported Services Contracts.

# COMPLIANCE AUDIT FINDINGS

## State Supported Services

The Plan is required to provide, or arrange to provide, to eligible members the following State Supported Services: Current Procedural Terminology Codes 59840 through 59857 and Health Care Financing Administration Common Procedure Codes X1516, X1518, X7724, X7726 and Z0336. These codes are subject to change upon the Department of Health Care Services implementation of the Health Insurance Portability and Accountability Act of 1996 electronic transaction and code sets provisions. (*State Supported Services Contract, Exhibit A*)

Plan policy, *CLM-029 Abortion Services* (effective 06/28/2022), stated that the Plan will cover an abortion as a physician service regardless of the gestational age of the fetus, as well as the medical services and supplies incidental or preliminary to an abortion. Additionally, for outpatient services, no medical justification or prior authorization is required.

The Plan's Member Handbook also provided information on abortion services. The Member handbook stated that if your Primary Care Physician, hospital, or other provider has a moral objection to providing you with an abortion, call Member Services. For minors, if you are under the age of 18, you can receive abortion services without a parent or guardian's permission.

A review of the Plan's claims processing reports revealed that the Plan appropriately processed, paid, or denied abortion service claims within the standard timeframes.

Based on the review of the Plan's documents, there were no deficiencies noted for the audit period.

**Recommendation:** None