

**September 28, 2017**

*Please do not reply to this email. If you have LEA policy or program questions, please forward them to the LEA mailbox at: [LEA@dhcs.ca.gov](mailto:LEA@dhcs.ca.gov)*

- **Fiscal Year (FY) 2016-17 Inflated Reimbursement Rates**
  - Effective retroactively for dates of service on or after July 1, 2016, the LEA Services Billing Codes Chart, located in the *loc ed bil cd* section of the [LEA Provider Manual](#) has been updated with the most recent reimbursement rates for the LEA Medi-Cal Billing Option Program for FY 2016-17. Claims will be adjusted automatically via an Erroneous Payment Correction.
  - The [LEA Provider Manual PDF](#) (searchable document) has also been updated.
  - The [FY 2016-17 Current Reimbursement Rates Table](#) is posted on the [Claims Processing](#) page of the LEA website.
  
- The [LEA Toolbox](#) located under the *Getting Started* section of the LEA website now includes a link to the claims inquiry process.
  - A Claims Inquiry Form (CIF) is used to request an adjustment for either an underpaid or overpaid claim, request a Share of Cost reimbursement, a reconsideration of a denied claim, or a tracer for a record of a claim. Detailed information about the CIF process can be found in [Part One of the Medi-Cal Provider Manual](#). Providers may call the Point Of Service/Internet Help Desk at 1-800-427-1295 to obtain a CIF form or direct any questions relating to the CIF process.

***Remember: The submission deadline for the [FY 2016-17 Annual Report](#) and the [FY 2015-16 Cost and Reimbursement Comparison Schedule](#) is November 30, 2017.***