## State of California—Health and Human Services Agency

# Department of Health Services



SANDRA SHEWRY Director

May 19, 2004

TO:

ALL COUNTY WELFARE DIRECTORS

Letter No.04-18

ALL COUNTY ADMINISTRATIVE OFFICERS

ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

ALL COUNTY PUBLIC HEALTH DIRECTORS ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: MEDI-CAL PROGRAM REFERRAL TELEPHONE NUMBER AND

ADDRESS INFORMATION UPDATE

The purpose of this letter is to provide counties with updated referral telephone numbers and addresses for dissemination to Medi-Cal beneficiaries and providers. This information replaces the telephone list issued in the All County Welfare Directors Letter No. 00-49, dated September 22, 2000.

County staff must use discretion when providing telephone numbers and address information to beneficiaries. Beneficiaries must be provided with only telephone numbers and address information from the enclosed Beneficiaries Referral List to prevent frustration and unnecessary costs if they are misdirected to non-toll-free numbers.

Please note the following updates to the lists:

Due to the Department of Health Services (DHS) relocation in 2003 new contact telephone numbers and mailing addresses are provided for many DHS programs. When appropriate, program addresses have been included for beneficiaries' and providers' use.

New beneficiary referral information is provided for the DHS Breast and Cervical Cancer Treatment Program, and the Medical Board of California Central Complaint Unit. Direct toll-free telephone numbers and address information to DHS Third Party Liability Branch, Recovery Section, and Other Health Coverage is included for its programs: Consolidated Omnibus Budget Reconciliation Act Terminations, Health Insurance Premium Payment Program, and Medicare Part A and B Buy-in. Other changes include the consolidation of the Northern and Southern California telephone numbers for the Acquired Immune Deficiency Syndrome (AIDS) Program.

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AIDS program information may be accessed by calling the California AIDS Hotline. New provider referral information is provided for the DHS County Medical Services Program. Telephone number updates are provided for Electronic Data Systems (EDS). EDS has consolidated accessing program information through the EDS general information toll-free line, and EDS now answers both In-State provider billing calls in addition to Out-of-State provider billing calls.

If you have any questions regarding the enclosed lists, please contact Ms. Angelica Perez at (916) 552-9511.

Original signed by

Beth Fife, Chief Medi-Cal Eligibility Branch

Attachment

#### BENEFICIARIES REFERRAL TELEPHONE NUMBERS AND ADRRESS INFORMATION

California Department of Health Services
Medi-Cal Eligibility Branch
1501 Capitol Avenue, Suite 4063, MS 4607
P.O. Box 997413
Sacramento, CA 95899-7413
916-552-9200

Program	Address	Telephone Number
AIDS	California AIDS Hotline	1-800-367-2437 (Hotline)
AIDS	P.O Box 426182	1-800-307-2437 (Flotilite)
	San Francisco, CA 94142-6182	1-888-225-2437 (TDD)
	04117141101000; 07107112 0102	1 300 220 2 101 (122)
		415-863-2437 (Main line)
	Office of Aids	916-449-5900
	California Department of Health Services	
	1616 Capitol Avenue, Suite 616	(Non-Medi-Cal services for
	MS-7700	persons with AIDS)
	P.O. Box 997426	
	Sacramento, CA 95899-7426	
BabyCal		1-800-222-9999
		(Prenatal care information)
Denti-Cal	Beneficiaries Services Group	1-800-322-6384
	P.O. Box 15539	(5)111 · · · ·
	Sacramento, CA 95852-1539	(Billing inquiries)
Electronic Data		916-636-1980
Systems (EDS)		(Medi-Cal bills)
Healthy Families		1-800-880-5305
Medi-Cal Fraud		(Application information) 1-800-822-6222 (Statewide
Medi-Cai Fraud		hotline)
		Tiourie)
		(To report beneficiary and
		provider fraud and patient abuse)
Medi-Cal General	For information on Medi-Cal benefits, programs, the application	provider frada and patient abuse
information	process, and questions regarding county of residence refer	
	beneficiaries to their local County Social Services Office listed	
	in the white government pages of the telephone directory.	
	For information regarding services provided under the	<u> </u>
	Medi-Cal program, refer beneficiaries to the rendering provider	
	California Department of Social Services (DSS)	1-800-952-5253
	Public Inquiry and Response (PIAR)	(To some A a fairful and a line)
	744 P Street, MS 2023	(To request a fair hearing)
	P. O. Box 944243	
	Sacramento, CA 94244-2430	1-877-481-1044
	Los Angeles County-Case Complaint, Inquiry and Referral 12820 Cross Roads Parkway South	1-0//-401-1044
	Industry, CA 91746-3411	562-908-6603
	Industry, CA 91740-3411	302-300-0003
	San Diego County Public Assistance Information	1-858-514-6885

# BENEFICIARIES REFERRAL TELEPHONE NUMBERS AND ADDRESS INFORMATION

Program	Address	Telephone Number
Medi-Cal Managed Care/Prepaid	California Department of Health Services Health Care Options	1-800-430-4263
Health Plans	P.O. Box 989009 West Sacramento, CA 95798	(To enroll or disenroll)
	To file a "plan specific" complaint, refer beneficiaries to their specific health plan.	
	If beneficiaries are not satisfied, and cannot resolve their complaint, refer them to the State Office of the Ombudsman.	
	California Department of Health Services	
	State Office of the Ombudsman MS 4412	1-888-452-8609
	P.O. Box 997413	
	Sacramento, CA 95899-7413	
Medical Board Central	Medical Board of California	1-800-633-2322
Complaint Unit	Central Complaint Unit	040 000 0404
	1426 Howe Avenue, Suite. 54 Sacramento, CA 95825-3236	916-263-2424
MEDICARE	-	1-800-MEDICARE
		(1-800-633-4227)
		(Medigap & Medicare
		supplement information &
		general Medicare
		information)
Breast & Cervical	California Department of Health Services	1-800-824-0088
Cancer Treatment	BCCTP MS 4611	
Program (BCCTP)	P.O. Box 997413	İ
	Sacramento, CA 95899-7413	
State Hearing	California Department of Social Services	1-800-925-5253
& PIAR	744 P Street, MS 2023	
	Sacramento, CA 95814	
Supplemental Security		1-800-MEDICARE
Income (SSI), Social		(1-800-633-4227)
Security Administration (SSA)		(General information)
(33A)		(General illionnation)

### BENEFICIARIES REFERRAL TELEPHONE NUMBERS AND ADDRSS INFORMATION

Program	Address	Telephone Number
Third Party Liability Branch	California Department of Health Services Recovery Section P.O. Box 997425 Sacramento, CA 95899-7425	916-650-0490 (Information line)  (Medi-Cal casualty, personal injury, probate, estate, liens, worker's compensation & overpayments)
	California Department of Health Services Other Health Coverage (OHC) P. O. Box 997422 Sacramento, CA 95899-7422	1-800-952-5294  (OHC, Medi-Cal Eligibility Data System (MEDS) coding errors)
	California Department of Health Services COBRA Terminations	1-800-952-5294
	California Department of Health Services Health Insurance Premium Payment Program (HIPP) P. O. Box 997422 Sacramento, CA 95899-7422	1-866-298-8443
	California Department of Health Services Medicare Part A and B Part Buy-In P. O. Box 997422 Sacramento, CA 95899-7422	1-866-227-9863

#### PROVIDERS REFERRAL TELEPHONE NUMBER AND ADDRSS INFORMATION

California Department of Health Services Medi-Cal Eligibility Branch 1501 Capitol Avenue, Suite 4063, MS 4607 Sacramento, CA 95814 916-552-9200

Program	Address	Telephone Number
	<u> </u>	
County Medical Services Program (CMSP)	County Medical Services Program Office of County Health Services Program California Department of Health Services 1501 Capitol Ave., Ste. 71-5195 P.O Box 942732 Sacramento, CA 94234-7320	916-552-8015
	Beneficlary Inquiry Unit	916-636-1980 (To refer beneficiaries with
		benefit questions)
	Denti-Cal	1-800-423-0507
		(Billing problems for dental services)
	Electronic Data Systems (EDS)	1-800-541-5555
		(Billing problems for medical services)
	Medimpact System	1-800-788-2949 (CMSP prescription drug benefits information)
Delta Dental, Denti-Cal	Delta Dental, Denti-Cal Provider Group	1-800-423-0507
	P.O. Box 15609 Sacramento, CA 95852-0609	(General questions, billing information and dental contract questions)
EDS	<u> </u>	1-800-541-5555 (General questions and billing information.)
	California Children's Services/Genetically Handicapped Persons Program	1-800-541-5555
	Obstetrics or the Comprehensive Perinatal Services Program	1-800-541-5555
	Out-of-State & In-State Provider Billing	916-636-1200
Medicare Buy-In		1-800-952-5294 (Notices of oversayment)
Out-of State Authorization for Treatment	California Department of Health Services (DHS) Field Services Section P.O. Box 193704 San Francisco, CA 94119-3704	(Notices of overpayment) 415-904-9600
Provider Enrollment (DHS)	Payment Systems Division (PSD), Provider Services Information Unit (Including out-of-state providers)	916-323-1945