

DATE: July 12, 2010

TO: Alcohol & Other Drug (AOD) Medi-Cal Providers

FROM: Lisa Moore
Provider Relations Manager

SUBJECT: AOD Supplemental June 2010 Medi-Cal Claim and PSP 131 Report

As in the past, we plan to submit a Supplemental June 2010 Medi-Cal claim that will include all eligible services provided in Fiscal Year 2009-10 not previously claimed.

The schedule for running the Supplemental Claim is:

Month of Service	Year of Service	Completion of Data Entry Due Date	RUN DATES		Cert. Form Due Date for ACBHCS Finance	Final Claim
			1st Test Claim	2nd Test Claim		
Supp. June	2010	7/30/2010	7/31/2010	8/7/2010	8/12/2010	8/14/2010

Please remember that you must complete the Good Cause Form 6065A or 6065B for the delay reason codes on the REAL claim and transmit the form(s) to Fiscal Finance immediately after the REAL claim is created.

A final PSP 131 Report will run and incorporate the amounts on the Supplemental Claim. This report should be available on your printer by Monday, August 23. The PSP 131 Report will be needed to prepare the Year-End Cost Report. Further information will be sent regarding the Cost Report.

If you have any questions or need any assistance, please call Provider Relations at 1-800-878-1313.

