

**Date: 5/22/2019**

**Medi-Cal**

**Important Provider Notice: #353**

**Subject: Long Term Care (LTC) ICF-DD N Rate Changes Effective 8/1/18**

The State of California Medi-Cal has issued the final 2018 reimbursement rates for ICF-DD N's for dates of service on or after 8/1/18. The change for each ICF-DD N's will be updated in the Partnership HealthPlan of California (PHC) system as of 4/26/19. LTC claims submitted to PHC on or after 4/26/19 will be reimbursed at the adjusted 8/1/18 rate.

If your Medi-Cal rate decreased in 2018 from your PHC 2017 rate you will continue to receive the current rate. We will maintain your facilities' present rate in the event of a decrease. This will become your 2018 PHC rate.

Please do not submit CIF's for the 8/1/18 rate adjustment to PHC. PHC will not make the rate adjustments through the CIF process. For those LTC facilities affected by the rate change, PHC will notify and provide you with a report of the claims impacted by the rate adjustment.

### **What do you need to do when you receive your rate adjustment report?**

PHC has entered the **"New Charge Amount"**. Please review this amount and if you agree with this amount, enter a **"Y"** in the **"Accepted"** box. If you do not agree with this amount, enter an **"N"** in the box and indicate your new billed amount in the last column. Complete the **"SOC Amt"** box. If the SOC amount is zero, enter 0.00 in the SOC Amt box. Do not leave this box blank. For hospice, please fill in the column as to what facility (full facility name) the patient is residing in.

You have six (6) months from the date of the spreadsheet to return it completed to PHC. Please note that PHC will not accept the spreadsheet or the claims listed therein for payment consideration if it is received after six (6) months.

If you receive an additional retro rate change notice from the State, please forward this immediately to PHC so that our system can be updated in a timely manner.

For further information regarding this process or your rate change, please contact the PHC Claims Department at (707) 863-4130.