

Avoid Post-Payment Collection: Make Sure Medi-Cal is the Payer of Last Resort

Use our enhanced eligibility report to get other health coverage (OHC) information

Other health coverage (OHC) information will be available on the October 2021 Medi-Cal eligibility reports. Please use the eligibility reports to identify if there is OHC and process claims accordingly. Health Net*, CalViva Health and its capitated/delegated participating physician groups (PPGs) and hospitals are required to be the payer of last resort for services when a member has OHC.

Refer to the table on page two for a list of the new OHC fields. If a member does not currently have OHC, we will report their most recent OHC information within the previous 180 days.

Prepare your systems for new OHC fields

Please modify your current systems to accommodate the new OHC fields. As a result of the change, the file size is increasing from the current 400 bytes to 512 bytes. You will see the new fields in the October 2021 eligibility reports.

Revised guidelines per All Plan Letter (APL) 21-002

Below are revised guidelines for OHC. To view the entire APL 21-002, visit www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-002.pdf.

OHC reporting requirements

Starting January 1, 2022, when a claim is denied due to the presence of OHC, the minimum OHC information in your notifications to providers must include, but is not limited to:

- The name of the OHC provider (COB Carrier Name on the eligibility report)
- Contact or billing information

Cost avoidance

Do not process claims for a member whose Medi-Cal eligibility report indicates OHC, other than an OHC code of A or N, unless there is proof that all sources of payment

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

PROVIDER SERVICES

888-893-1569
www.healthnet.com

Go to the online COVID-19 alerts page for info about COVID-19 vaccines!

At provider.healthnet.com > **COVID-19 Updates** > **Health Net Alerts**, you will find information about COVID-19 vaccines. This includes COVID-19 vaccine coverage details, how to enroll to administer the COVID-19 vaccine, and COVID-19 vaccine reporting and coding requirements. Also, access key tips you can use to help talk with and answer questions from your patients about the COVID-19 vaccine, especially those who are hesitant to receive it.

have been exhausted, or the provided service meets the requirement for billing Medi-Cal directly. The eligibility report will show OHC codes for the current month and the past six months.

OHC information on eligibility reports

Below are the new OHC fields on the monthly eligibility reports. To see the full Eligibility Report (ACE 42) layout, refer to the provider operations manuals in the Provider Library at providerlibrary.healthnetcalifornia.com.

New OHC Fields	Description
OHC Policy ID 401-415 X(15)	Policy ID for Other Health Coverage
Filler 416-416 X(1)	Blank Space
OHC Effective Date 417-424 X(8)	Effective Date of Other Health Coverage
Filler 425-425 X(1)	Blank Space
OHC Expiration Date 426-433 X(8)	Expiration Date of Other Health Coverage
Filler 434-434 X(1)	Blank Space
OHC Code Curr Month 435-435 X(1)	Other Health Coverage Code from 834 file A - Pay and chase (applies to any carrier) C - Military benefits comprehensive D - Medicare Part D prescription drug coverage E - Vision plans F - Medicare Part C health plan G - Medical parolee H - Multiple plans comprehensive I - Institutionalized K - Kaiser L - Dental only policies N - No OHC P - Preferred Provider Organization/Prepaid Health Plan/Health Maintenance Organization/Exclusive Provider Organization or not otherwise specified Q - Commercial pharmacy plans V - Any carrier other than the above (includes multiple coverage) W - Multiple plans non-comprehensive
OHC Code 1 month ago 436-436 X(1)	OHC Code in effect for previous month
OHC Code 2 months ago 437-437 X(1)	OHC Code in effect two months ago
OHC Code 3 months ago 438-438 X(1)	OHC Code in effect three months ago
OHC Code 4 months ago 439-439 X(1)	OHC Code in effect four months ago
OHC Code 5 months ago 440-440 X(1)	OHC Code in effect five months ago
OHC Code 6 months ago 441-441 X(1)	OHC Code in effect six months ago
OHC_Address_1 040-064 X(25)	OHC_Address_1
OHC_Address_2 065-089 X(25)	OHC_Address_2
OHC_City 090-106 X(17)	OHC_City
OHC_State 107-108 X(02)	OHC_State
OHC_ZIP_Code 109-119 X(11)	OHC_ZIP Code
OHC_Carrier Phone 1 120-134 X(15)	OHC_Carrier_Phone 1
OHC_Carrier Phone 2 135-149 X(15)	OHC_Carrier_Phone 2
OHC_Carrier Phone 3 150-164 X(15)	OHC_Carrier_Phone 3
OHC_Remark 1 165-214 X(50)	OHC_Remark 1
OHC_Remark 2 215-264 X(50)	OHC_Remark 2

Located at the end of the Detail Record header.

Located in the COB Record header.

For monthly reports, log into provider.healthnet.com under *Provider Reports > Available Reports*. Providers can also access and view file layouts under *Provider Reports > Data File Record Layouts*.

Relevant sections of the provider operations manuals have been revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library, located on the provider website at provider.healthnet.com.

If you have questions regarding the information contained in this update, contact CalViva Health at 888-893-1569.