

# PROVIDER Update



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## Medi-Cal Provider Appeals and Disputes

*Use the correct mailing address to submit Medi-Cal provider appeals and disputes for processing*

Health Net\* and CalViva Health require providers to submit Medi-Cal provider appeals and disputes to the following address:

Medi-Cal Provider Appeals Unit  
PO Box 419086  
Rancho Cordova, CA 95741-8096

### ADDITIONAL INFORMATION

Additional information about appeals and disputes, including the form to use for submission, is available in the provider operations manuals. The provider operations manuals are available in the Provider Library on the provider website at [provider.healthnet.com](http://provider.healthnet.com).

Providers are encouraged to access the provider portal online at [provider.healthnet.com](http://provider.healthnet.com) for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact CalViva Health at 1-888-893-1569.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

### PROVIDER SERVICES

1-888-893-1569  
[www.healthnet.com](http://www.healthnet.com)