



KEY:
 MCLA = Medi-Cal
 PS = PASC-SEIU (Formerly IHSS)
 LACC = L.A. Care Covered (Covered CA Exchange)
 LACCD = L.A. Care Covered Direct
 CMC = Cal MediConnect
 DSNP = L.A. Care Medicare Plus

RISK:
SR = Shared Risk Contract
 - PPG at risk for Professional & Diagnostic services, L.A. Care at risk for Inpatient Facility & Lower Level of Care services such as Sub-Acute, SNF, DME, Home Health, etc., in & out of area.
 - DHS is at risk for professional component of services provided at DHS facilities ("In-Network") and Non-DHS facilities ("Out-of-Network"); for OON services, DHS is at risk for MCE members only. DHS is at risk for facility component of services provided at DHS facilities ("In-Network") and Non-DHS facilities ("Out-of-Network") subject to Hospital Shared Risk Pool. L.A. Care is at risk for Lower Level of Care services such as Sub-Acute, SNF, DME, Home Health, etc.
DR = Dual Risk Contract
 - PPG at risk for Professional & Diagnostic services, Capitated Hospital at risk for Inpatient Facility & Lower Level of Care services such as Sub-Acute, SNF, DME, Home Health, etc., in & out of area.
 - DHS is at risk for MCLA professional and facility components of services provided at DHS facilities ("In-Network") and Non-DHS facilities ("Out-of-Network"); for OON services, DHS is at risk for MCE members only. DHS is at risk for PASC professional and facility components of services provided at DHS facilities ("In-Network") and Non-DHS facilities ("Out-of-Network"). L.A. Care is at risk for Lower Level of Care services such as Sub-Acute, SNF, DME, Home Health, etc.
FR - Full Risk Contract = PPG at risk for all Professional, Diagnostic, Inpatient Facility & Lower Level of Care services such as Sub-Acute, SNF, DME, Home Health, etc., in & out of area.
FFS - Fee for Service = L.A. Care is at risk for all services

Authorizations:
 Standard = PPG responsible for PPG risk only & L.A. Care responsible for Hospital Shared Risk Services. L.A. Care authorizes and follows for Out of Area Authorizations.
 Extended = PPG responsible for PPG & Hospital Shared Risk services. L.A. Care authorizes and follows for Out of Area Authorizations.
 Standard (DHS) = DHS is responsible for providing Prior Authorization for services provided at DHS facilities only ("In-Network Services"). L.A. Care is responsible for providing Prior Authorization when services is provided outside of DHS facilities ("Out-of-Network").

General Overview:
 For specific questions regarding contracted services, authorizations, or DOFR's, please reach out to the PPG/MO at phone number provided.

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 1/1/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing Prior Authorization and Claims Payments functions when services are provided outside of DHS facilities ("Out-of-Network"). | | | | | |
|--------------|--|--|--|--------------|-------------------|------------------------------|----|-----------------------|---|-------------------------------|--|--|---|---|--|----------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # | |
| AHPN | Adventist Health Care Network, Inc. EFFECTIVE - 8/1/2022 fka Adventist Health Physicians Network | MedPOINT Management New MSO Effective 2/1/2021 | P.O. Box 7020-07 Tarzana, CA 91357 | 818-702-0100 | Extended | | | SR | SR Termed 12/31/2022 | | PPG | 747-287-0119 | Member's Capitated Hospital: Adventist Health White Memorial | Adventist Health Managed Care Claim PO Box 16237 Portland, OR 97292 | (503) 261-6032 | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| AHF | AIDS HealthCare Foundation | | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 888-238-7463 | N/A | | | | FFS Termed 12/31/2022 | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | |
| APIA | Allied Physicians dba Allied Pacific IPA | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 626-282-0288 | Extended | | | SR | DR Termed 12/31/2022 | | PPG | 626-943-6382 | Member's Capitated Hospital: Alhambra Hospital Medical Center | 100 N. Stoneman Avenue #202 Alhambra, CA 91801 | (626) 570-1606 | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Member's Capitated Hospital: Alhambra Hospital Medical Center | 100 N. Stoneman Avenue #202 Alhambra, CA 91801 | (626) 570-1606 |
| | | | | | | | | | | | | | L.A. CARE | Member's Capitated Hospital: Alhambra Hospital Medical Center | 100 N. Stoneman Avenue #202 Alhambra, CA 91801 | (626) 570-1606 |
| APWM | Allied Physicians - White Memorial TERMINATED - 1/31/2021 | | | | | | | | DR Termed 1/31/2021 | | L.A. CARE | Member's Capitated Hospital: White Memorial Medical Center | Adventist Health Managed Care Claim PO Box 16237 Portland, OR 97292 | (503) 261-6032 | | |
| ACFC | Allied Pacific - Community Family Care EFFECTIVE - 7/1/2024 (formally known as Community Family Care) | Astrana Health Management, Inc. fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 626-282-0288 | Extended | | | SR Effective 7/1/2024 | | SR Effective 7/1/2024 | PPG | 626-943-6382 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| ACFA | Allied Pacific - Community Family Care AV EFFECTIVE - 7/1/2024 (formally known as Community Family Care - Antelope Valley) | Astrana Health Management, Inc. fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 626-282-0288 | Extended | | | SR Effective 7/1/2024 | | SR Effective 7/1/2024 | PPG | 626-943-6382 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 1/1/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing <u>Prior Authorization</u> and <u>Claims Payments</u> functions when services are provided <u>outside</u> of DHS facilities ("Out-of-Network"). | | | | |
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| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO CLAIMS ADDRESS | PAYOR CLAIMS PHONE # |
| APCV | Allied Physicians Citrus Valley EFFECTIVE 8/1/2023 SEE EIPA - EMANATE HEALTH IPA | Astrans Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 626-282-0288 | Extended | DR Termed 5/31/2023 | | | | | PPG | 626-943-6382 | Member's Capitated Hospital: Citrus Valley Medical Center | PO Box 840147 Los Angeles, CA 90084-0147 | (626) 814-2504 |
| | | | | | | | SR Termed 5/31/2023 | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | DR Termed 12/31/2022 | | | | | | Member's Capitated Hospital: Citrus Valley Medical Center | PO Box 840147 Los Angeles, CA 90084-0147 |
| AMHS | AltaMed Health Services Corporation | Altura Management Services | P.O. Box 7280 Los Angeles, CA 90022 | 866-880-7805 | Extended | | | | | | PPG | 323-720-5602 | | PO Box 840147 Los Angeles, CA 90084-0147 | (626) 814-2504 |
| | | | | | | | SR Termed 12/31/2022 | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| AMHN | AltaMed Health Network, Inc. | | | 866-880-7805 | Extended | FR | | | | PPG | 323-720-5602 | PPG | Office Ally Payor Code = ALTMA or P.O. Box 7280 Los Angeles, CA 90022-7280 | (855) 848-5252 | |
| OMGA | Omnicare Medical Group - AMHN | | | 866-880-7805 | Extended | FR | | | | PPG | 323-720-5602 | PPG | Office Ally Payor Code = ALTMA or P.O. Box 7280 Los Angeles, CA 90022-7280 | (855) 848-5253 | |
| OMNI | Omnicare Medical Group | Altura Management Services New MSO Effective 2/1/2021 | P.O. Box 7280 Los Angeles, CA 90022 | 866-880-7805 | Extended | | | SR | | | PPG | 323-720-5602 | | PO Box 840147 Los Angeles, CA 90084-0147 | (626) 814-2504 |
| | | | | | | | | SR Termed 12/31/2022 | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| AIPA | Angeles IPA | HealthSmart Management Services Organization, Inc. | P.O. Box 6301 Cypress, CA 90630 - 0018 | 714-947-8600 | Extended | DR Effective 5/1/2022 | | | | | PPG | 714-947-8782 | Member's Capitated Hospitals: ALTA Los Angeles Community Hospital | ALTA Los Angeles Community Hospital Cypress, CA 90630-0018 | (714) 947-8600 |
| | | | | | | | | SR | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | SR Termed 12/31/2022 | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| AMGS | Optum Care Network - LA Family Community (fka Apple Care Medical Group, St. Francis, Inc) | AppleCare Medical Management, LLC dba Optum | P.O. Box 6099 Torrance, CA, 90504 | 800-460-5051 | Extended | SR | | | | PPG | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| APPL | Optum Care Network - Apple Care Select (fka Apple Care Medical Group, Inc.) | AppleCare Medical Management, LLC dba Optum | P.O. Box 6099 Torrance, CA, 90504 | 800-460-5051 | Extended | | | | | | PPG | 714-676-0785 714-676-0786 714-676-0787 714-676-0789 | | PO Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | SR Termed 12/31/2022 | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| AXMG | Axminster Medical Group | | P.O. Box 9605 Mission Hills, CA 91346 | 310-6755370 | Extended | SR | | | | PPG | 310-303-6983 | | PO Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| BVMG | Bella Vista IPA | MedPOINT Management | P.O. Box 572066 Tarzana, CA 91357 | 818-702-0100 | Extended | | | | | | PPG | 818-444-1209 | | PO Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | SR | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | SR Termed 12/31/2022 | | | | | Office Ally & Change Healthcare Payor Code = LACAR or Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| CMHP | Caremore Health Plan TERMINATED - 12/31/2022 | Caremore Health Plan | 12900 Park Plaza Drive Suite 150 Cerritos, CA 90703 | 562-622-2800 | Extended | | | | FR Termed 12/31/2022 | SR | PPG | 888-426-5087 | PPG | Caremore Health Plan P.O. Box 366 Artesia, CA 90702-0366 | (888)291-1358 |

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|--------------|--|--|--|------------------------------|-------------------|------------------------------|----|--------------|--|-------------------------------------|---|--|--|--|---|---------------------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # | |
| CVPG | Citrus Valley Physician Group | Physicians Data Trust, Inc | P.O. Box 4939 Oceanside, CA 92052 | 562-860-8771 | Extended | | | | | | PPG | 760-477-2951 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | Member's Capitated Hospital: Citrus Valley Medical Center | PO Box 840147 Los Angeles, CA 90084-0147 | (626) 814-2504 | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| CFC | Community Family Care TERMINATED - 9/30/2024 See ACFC - Allied Pacific - Community Family Care | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | | PPG | 626-521-6144 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
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| | | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| CFCA | Community Family Care - Antelope Valley TERMINATED - 9/30/2024 See ACFA - Allied Pacific - Community Family Care - AV | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | | PPG | 626-521-6144 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
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| CFCE | Community Family Care - East Los Angeles Doctors Hospital TERMINATED - 6/30/2023 | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | PPG | 626-521-6144 | Member's Capitated Hospital: East Los Angeles Doctor's Hospital Effective 1/1/2021 Terminated 6/30/2023 | Conifer P.O. Box 260890 Encino, CA 91436 | (818) 461-5000 | |
| CFCM | Community Family Care - Memorial Hospital of Gardena TERMINATED - 6/30/2023 | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | PPG | 626-521-6144 | Member's Capitated Hospital: Memorial Hospital of Gardena Effective 1/1/2021 Terminated 6/30/2023 | Conifer P.O. Box 260890 Encino, CA 91436 | (818) 461-5000 | |
| CFCV | Community Family Care - Valley Presbyterian Hospital TERMINATED - 6/30/2024 | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | PPG | 626-521-6144 | Member's Capitated Hospital: Valley Presbyterian Hospital Effective 1/1/2021 Terminated 6/30/2023 | Valley Presbyterian Hospital HCLA P.O. Box 7020-09 Tarzana, CA 91357 Office Ally Payor Code = NPM53 | (818) 702-0100 | |
| CFCL | Community Family Care Health Plan - Metropolitan | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | PPG | 626-521-6144 | FR Effective 7/1/2023 | Office Ally & Emdeon Payor Code = NMM05 1600 Corporate Center Dr., Ste 107 Monterey Park, CA 91754 | (855) 888-4232 | |
| CFCP | Community Family Care Health Plan - Provincial | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | PPG | 626-521-6144 | FR Effective 7/1/2023 | Office Ally & Emdeon Payor Code = NMM05 1600 Corporate Center Dr., Ste 107 Monterey Park, CA 91754 | (855) 888-4232 | |
| CFCS | Community Family Care Health Plan - Valley | Astrana Health Management, Inc. Effective 2/26/2024 fka Network Medical Management | 1600 Corporate Center Dr Monterey Park, CA 91754 | 818-396-1232 855-888-4232 | Extended | | | | | | PPG | 626-521-6144 | FR Effective 7/1/2023 | Office Ally & Emdeon Payor Code = NMM05 1600 Corporate Center Dr., Ste 107 Monterey Park, CA 91754 | (855) 888-4232 | |
| CRCM | Crown City Medical Group TERMINATED - 5/31/2021 (Crown City purchased by AltaMed Health Network effective 6/1/2021 - see AltaMed for current payor information.) | MedPOINT Management | 6400 Canoga Avenue Suite 163 Woodland Hills CA 91367 | 818-702-0100 | Extended | | | | | | PPG | 818-960-0613 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
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| AVHC | DHS-Antelope Valley Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| BLHC | DHS- Bell Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
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|--------------|--|----------------------------|--|--------------------------|-------------------|------------------------------|----|--------------|--|------------------------------------|---|--|-----------|---|---------------------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # |
| BHC | DHS-Bellflower Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| CTHC | DHS-Curtis Tucker Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| ELHC | DHS-East Los Angeles Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| EMCH | DHS-EI Monte Comprehensive Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| ERCH | DHS-Edward R Roybal Comprehensive Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| GPHC | DHS-Glendale Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HCHC | DHS-H Claude Hudson Comprehensive Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HDHS | DHS-High Desert Regional Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HHHC | DHS-Hubert H Humphrey Comprehensive Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HUMC | DHS-Harbor/UCLA Medical Center (hospital-based clinic) | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HUMF | DHS-Harbor/UCLA Family Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| LACU | DHS-LAC+USC Medical Center (hospital-based clinic) | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 11/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing <u>Prior Authorization</u> and <u>Claims Payments</u> functions when services are provided <u>outside</u> of DHS facilities ("Out-of-Network"). | | | | |
|--------------|--|----------------------------|--|--------------------------|-------------------|------------------------------|----|--------------|--|------------------------------------|---|--|-----------|---|---------------------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # |
| LBCH | DHS-Long Beach Comprehensive Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| LCC | DHS-Little Rock Community Clinic | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| LLAC | DHS-Lake Los Angeles Community Clinic | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| LPHC | DHS-La Puente Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| MLKH | DHS-Martin Luther King Jr. Outpatient Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| OVMV | DHS-Mid-Valley Comprehensive Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| NHC | DHS - Northeast Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| OVMC | DHS-Olive View/UCLA Medical Center (hospital-based clinic) | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| RLAC | DHS-Rancho Los Amigos National Rehabilitation Center (hospital-based clinic) | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| SFHC | DHS-San Fernando Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| SPHC | DHS-South Valley Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| STR | DHS-Star Clinic | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | DR | | | | | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 1/1/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing <u>Prior Authorization</u> and <u>Claims Payments</u> functions when services are provided <u>outside</u> of DHS facilities ("Out-of-Network"). | | | | |
|--------------|---|---|--|--------------------------|-------------------|------------------------------|----|------------------------------|--|-------------------------------------|---|--|--|--|---------------------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # |
| THC | DHS-Torrance Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| WHC | DHS-Wilmington Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| WVCH | DHS-West Valley Health Center | DHS- Managed Care Services | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-832-6334 option 1 | Standard | DR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| EPDB | El Proyecto Del Barrio, Inc. | MedPOINT Management | P.O. Box 571600 Tarzana, CA 91357 | 818-702-0100 | Extended | SR | | | SR Termed 12/31/2022 | | PPG | 818-444-1209 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| EIPA | Emanate Health IPA EFFECTIVE - 6/1/2023 (fka Allied Physicians Citrus Valley) | MedPOINT Management New MSO Effective 1/1/2025 | P.O. Box 7020-18 Tarzana, CA 91357 | 818-702-0100 | Extended | DR | | SR | | | PPG | 888-385-2885 | Member's Capitated Hospital: Emanate Health Queen of the Valley | Office Ally Payor Code = MPM65 Emanate Health/EHIPA PO Box 7020-20 Tarzana, CA 91357 | (626) 814-2504 |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| ECMG | Exceptional Care Medical Group | Conifer Health Solutions | P.O. Box 260830 Encino, CA 91426 | 818-461-5000 | Standard | SR | | SR Effective 12/1/2023 | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| FCS | Family Care Specialists IPA, A Medical Group Inc. | Altas Health Services New MSO Effective 1/1/2025 | P.O. Box 72670 Oakland, CA 94612 | 855-513-4007 | Standard | SR | | SR | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| GCMG | Global Care IPA | MedPOINT Management | P.O. Box 571420 Tarzana, CA 91357 | 818-702-0100 | Extended | DR Effective 8/1/2021 | | SR | | | PPG | 818-702-1730 | Member's Capitated Hospital: Southern California Healthcare System Inc. Effective 8/1/2021 | Office Ally Payor Code = MPM54 Global - Alta P.O. Box 7020-11 Tarzana, CA 91357 | (818) 702-0100 |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HCLA | Health Care LA, IPA | MedPOINT Management | P.O. Box 570590 Tarzana, CA 91357 | 818-702-0100 | Extended | SR | | SR | | SR Termed 12/31/2022 | PPG | 818-702-1722 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HCLV | Health Care LA, IPA - Valley Presbyterian | MedPOINT Management | P.O. Box 570590 Tarzana, CA 91357 | 818-702-0100 | Extended | DR Effective 4/1/2021 | | SR | | | PPG | 818-702-1722 | Member's Capitated Hospital: Valley Presbyterian Hospital Effective 4/1/2021 | Office Ally Payor Code = MPM53 Valley Presbyterian Hospital HCLA P.O. Box 7020-09 Tarzana, CA 91357 | (818) 702-0100 |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 1/1/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing <u>Prior Authorization</u> and <u>Claims Payments</u> functions when services are provided <u>outside</u> of DHS facilities ("Out-of-Network"). | | | | |
|--------------|--|---|---|--------------|-------------------|------------------------------|----------------------------|--------------|--|-------------------------------------|---|--|---|--|---------------------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # |
| HCPM | Optum Health Plan of California (fka HealthCare Partners Medical Group) | | P.O. Box 6099 Torrance, CA. 90504 | 310-793-5412 | Extended | | | SR | SR Termed 12/31/2022 | SR | PPG | REGION 1: 626-254-8215 REGION 2: 213-861-8856 REGION 3: 310-244-8964 REGION 4: 310-224-8962 REGION 5: 818-827-9811 REGION 6: 714-436-4801 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| HD | High Desert Medical Group TERMINATED - 12/31/2023 | Heritage Provider Network | P.O. Box 7014 Lancaster, CA 93539 | 661-945-5984 | Extended | FR Termed 12/31/2023 | FR Termed 12/31/2023 | | FR Termed 12/31/2022 | | PPG | 661-952-3690 | PPG | 43839 N 15th Street West Lancaster, CA 93534 | (661) 945-5984 |
| | | | | | | | | | | | | | | | |
| LAKE | Lakeside Medical Group TERMINATED - 12/31/2023 | Heritage Provider Network | P.O. Box 371390 Reseda, CA 91337 | 213-355-8988 | Extended | FR Termed 12/31/2023 | FR Termed 12/31/2023 | | FR Termed 12/31/2022 | | PPG | BURBANK/LA: 818-933-0510 SAN FERNANDO VALLEY: 818-933-0538 GLENDALE: 818-396-3479 SAN GABRIEL VALLEY: 626-774-2299 | PPG | P.O. Box 371390 Reseda, CA 91337 | (213) 355-8988 |
| | | | | | | | | | | | | | | | |
| PPN | PIH Health Physicians (fka Pioneer Provider Network) | HealthMed Services, Inc. | P.O. Box 1397 Whittier, CA. 90609 | 562-789-5401 | Extended | SR | | | SR Termed 12/31/2022 | | PPG | FACE SHEET: 562-967-2969 ALL OTHERS: 562-967-2947 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| PVMG | Pomona Valley Medical Group | Prospect Medical Systems/ ProMed Health Network | P.O. Box 11466 Santa Ana, CA. 92711-1466 | 909-932-1045 | Extended | SR | | SR | SR Termed 12/31/2022 | | PPG | PVHMC: 714-941-5210 ALL OTHER FACILITIES: 714-561-7609 DISCHARGE ORDERS: 909-936-3608 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| PIPA | Preferred IPA of California | Thrifty Management Services | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | SR | | SR | SR Termed 12/31/2022 | | PPG | 800-874-2093 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | | | | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| PIPH | Preferred IPA - Hollywood Presbyterian | Thrifty Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 10/1/2022 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: Hollywood Presbyterian Hospital Effective 10/1/2022 | Advanced Medical Management 5000 Airport Plaza Dr., Ste. 150 Long Beach, CA 90815 | (562)766-2000, Option 5 |
| PIPM | Preferred IPA - Monterey Park | Thrifty Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 9/1/2021 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: Monterey Park Hospital Effective 9/1/2021 | HealthSource MSO 100 N. Stoneman Avenue #202 Alhambra, CA 91801 | (626) 570-1606 |
| PIPV | Preferred IPA - Valley Presbyterian | Thrifty Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 3/1/2021 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: Valley Presbyterian Hospital Effective 3/1/2021 | Office Ally Payor Code = MPMS3 Valley Presbyterian Hospital HCLA P.O. Box 7020-09 Tarzana, CA 91357 | (818) 702-0100 |
| PIPW | Preferred IPA - White Memorial | Thrifty Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 5/1/2022 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: Adventist Health White Memorial Effective 5/1/2022 | Adventist Health Managed Care Claim PO Box 16237 Portland, OR 97292 | (503) 261-6032 |
| PIPC | Preferred IPA - California | Thrifty Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 7/1/2024 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: California Hospital Medical Center Effective 7/1/2024 | Office Ally Payor Code = DHM02 Dignity Health MSO PO Box 5366 Oxnard, CA 93031 | (661) 716-8850 |
| PIPG | Preferred IPA - Glendale Memorial | Thrifty Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 7/1/2024 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: Glendale Memorial Hospital & Health Ctr Effective 7/1/2024 | Office Ally Payor Code = DHM02 Dignity Health MSO PO Box 5366 Oxnard, CA 93031 | (661) 716-8850 |

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 1/1/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing <u>Prior Authorization</u> and <u>Claims Payments</u> functions when services are provided <u>outside</u> of DHS facilities ("Out-of-Network"). | | | | | | | | | |
|--------------|--|---|--|--------------|-------------------|------------------------------|----|--------------|--|-------------------------------------|---|---|---|---|---------------------------|--|--|--|--|--|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # | | | | | |
| PIPS | Preferred IPA - St Mary | Thrify Management Services/ Electronic Health Plans | P.O. Box 4449 Chastworth, CA. 91313 | 800-874-2091 | Extended | DR Effective 7/1/2024 | | | | | PPG | 800-874-2093 | Member's Capitated Hospital: St Mary Medical Center Effective 7/1/2024 | Office Ally Payor Code = DHM02 Dignity Health MSO P.O. Box 5369 Oxnard, CA 93031 | (661) 716-8850 | | | | | |
| PROH | Prospect Healthsource Medical Group, Inc. | Medpoint Management | 15301 Ventura Boulevard Bldg D Sherman Oaks, CA 91403 | 818-702-0100 | Extended | SR | | | | | PPG | MCLA: 818-444-1209 ALTA: 714-560-7379 DIGNITY: 714-560-7356 OTHERS: 714-560-7621 OUT OF AREA: 714-560-7622 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | |
| | | Prospect Medical Systems/ ProMed Health Network | P.O. Box 11466 Santa Ana, CA. 92711-1466 | 714-796-5719 | | DR Termed 12/31/2022 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| PROS | Prospect Medical Group Los Angeles, Inc. | Medpoint Management | 15301 Ventura Boulevard Bldg D Sherman Oaks, CA 91403 | 818-702-0100 | Extended | SR | | | | | PPG | MCLA: 818-444-1209 ALTA: 714-560-7379 DIGNITY: 714-560-7356 OTHERS: 714-560-7621 OUT OF AREA: 714-560-7622 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | |
| | | Prospect Medical Systems/ ProMed Health Network | P.O. Box 11466 Santa Ana, CA. 92711-1466 | 714-796-5719 | | DR Termed 12/31/2022 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| PROV | Prospect Medical Group, Inc. | Medpoint Management | 15301 Ventura Boulevard Bldg D Sherman Oaks, CA 91403 | 818-702-0100 | Extended | SR | | | | | PPG | MCLA: 818-444-1209 ALTA: 714-560-7379 DIGNITY: 714-560-7356 OTHERS: 714-560-7621 OUT OF AREA: 714-560-7622 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | |
| | | Prospect Medical Systems/ ProMed Health Network | P.O. Box 11466 Santa Ana, CA. 92711-1466 | 714-796-5719 | | DR Termed 12/31/2022 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| PRON | Prospect Nuestra Familia | Medpoint Management | 15301 Ventura Boulevard Bldg D Sherman Oaks, CA 91403 | 818-702-0100 | Extended | SR | | | | | PPG | MCLA: 818-444-1209 ALTA: 714-560-7379 DIGNITY: 714-560-7356 OTHERS: 714-560-7621 OUT OF AREA: 714-560-7622 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | |
| | | Prospect Medical Systems/ ProMed Health Network | P.O. Box 11466 Santa Ana, CA. 92711-1466 | 714-796-5719 | | DR Termed 12/31/2022 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| PROF | Prospect Professional Care Medical Group, Inc. | Medpoint Management | 15301 Ventura Boulevard Bldg D Sherman Oaks, CA 91403 | 818-702-0100 | Extended | SR | | | | | PPG | MCLA: 818-444-1209 ALTA: 714-560-7379 DIGNITY: 714-560-7356 OTHERS: 714-560-7621 OUT OF AREA: 714-560-7622 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | |
| | | Prospect Medical Systems/ ProMed Health Network | P.O. Box 11466 Santa Ana, CA. 92711-1466 | 714-796-5719 | | DR Termed 12/31/2022 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| REMG | Regal Medical Group TERMINATED - 12/31/2023 | Heritage Provider Network | P.O. Box 371330 Reseda, CA 91337 | 213-355-8988 | Extended | FR Termed 12/31/2023 | | | | | PPG | BURBANK/LA: 818-933-0510 SAN FERNANDO VALLEY: 818-933-0538 GLENDALE: 818-396-3479 SAN GABRIEL VALLEY: 626-774-2299 | P.O. Box 371390 Reseda, CA 91337 | (213) 355-8988 | | | | | | |
| SEA | MemorialCare Select Health Plan (fka Seaside Health Plan) | | P.O. Box 20900 Fountain Valley, CA 92728 | 855-367-7747 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| SHI | Serendib Healthways, Inc. | ProSource MSO/ MHM HealthCare New MSO Effective 12/1/2021 | P.O. Box 10187 San Bernardino, CA. 92423 | 562-484-9144 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |

| Region Codes | Participating Provider Group (PPG) | Management Company (MSO) | PPG/MSO Claims Address | Phone | Delegation Status | MCLA - Non Institutional Aid | PS | LACC & LACCD | CMC - Non Institutional Aid Category PRODUCT SUNSETTED 12/31/2022 | DSNP NEW PRODUCT EFF 1/1/2023 | For All Lines of Business: Authorization and Payments for Professional and Diagnostic Services are the responsibility of PPG with the exception of Transplant event and Transhealth services which are the Plans risk. See chart below for Authorization and Payment responsibility for Facility & Lower Level of Care services such as Sub-Acute, Skilled Nursing, DME, Home Health, Emergency Transportation, etc. Higher Level of Care (HLOC) cases for Shared Risk PPG's require approval by L.A. Care Health Plan - L.A. Care will authorize and make payment & cap deduct PPG for Professional & Diagnostic services where PPG does not have a direct contract with L.A. Care's contracted HLOC provider. FOR DHS - L.A. Care is responsible for providing <u>Prior Authorization</u> and <u>Claims Payments</u> functions when services are provided <u>outside</u> of DHS facilities ("Out-of-Network"). | | | | |
|--------------|--|---|--|--------------|-------------------|------------------------------|----|-----------------------------|---|---|---|--|---|--|---------------------------|
| | | | | | | | | | | | AUTHORIZATIONS | AUTHORIZATION FAX # | PAYOR | PAYOR ELECTRONIC CLAIM INFO/ CLAIMS ADDRESS | PAYOR CLAIMS PHONE # |
| SCMC | Serra Community Medical Clinic, Inc. | | 9375 San Fernando Road Sun Valley, CA 91352 | 818-768-3000 | Extended | SR | | SR | | | PPG | 818-504-4569 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| SIMG | Sierra Medical Group TERMINATED - 12/31/2023 | Heritage Provider Network | PO Box 7013 Lancaster, CA 93539 | 661-945-9411 | Extended | FR Termed 12/31/2023 | | FR Termed 12/31/2023 | | | PPG | 661-945-8191 | PPG | 10th Street West Lancaster, CA 93534 | (661) 945-9411 |
| SAMG | South Atlantic Medical Group | | 5504 Whittier Blvd Los Angeles, CA 9002 | 323-725-0167 | Extended | SR | | SR Effective 7/1/2023 | | | PPG | 323-724-5061 323-725-1471 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | SR Termed 12/31/2022 | | L.A. CARE | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| | | | | | | | | | | L.A. CARE | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| SVIP | St. Vincents IPA | Physician Data Trust | P.O. Box 5089 Oceanside, CA 92052 | 562-860-8771 | Extended | SR Effective 7/1/2023 | | SR Effective 7/1/2023 | | | PPG | 562-924-1453 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | DR Effective 1/1/2021 | | L.A. CARE | | | Physician Data Trust P.O. Box 4429 Oceanside, CA 92052 | (800) 458-2307 | |
| | | | | | | | | | | L.A. CARE | | | Physician Data Trust P.O. Box 4429 Oceanside, CA 92052 | (800) 458-2307 | |
| SC | Superior Choice Medical Group | All Care To You New MSO Effective 1/1/2025 | P.O. Box 910 La Verne, CA 91750 | 562-888-1415 | Standard | SR | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| | | | | | | | | | | L.A. CARE | | | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) | |
| UCLA | UCLA Medical Group | | Change Healthcare Payor Code = LACAR P.O. Box 811580 Los Angeles, CA 90081 | 800-825-2631 | N/A | FFS | | FFS Termed 12/31/2022 | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| UCMG | Universal Care Medical Group TERMINATED - 12/31/2021 | | 5455 Garden Grove Blvd 5th Floor Westminster, CA 92683 | 866-255-4795 | Standard | SR Termed 12/31/2021 | | | | | L.A. CARE | FACE SHEET: 877-314-4957 CLINICAL REVIEW: 213-438-5063 DISCHARGE ORDER: 213-438-5066 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |
| WHMG | Welcome Health Medical Group | Medpoint Management | Office Ally Payor Code = M.JM57 P.O. Box 7020-13 Tarzana, CA 91357 | 818-702-0100 | Extended | | | | | SR Effective 3/1/2025 | PPG | 818-737-9044 | L.A. CARE | Office Ally & Change Healthcare Payor Code = LACAR or P.O. Box 811580 Los Angeles, CA 90081 | (888) 4LA-Care (452-2273) |

* FOR CVPG PASC only - If the servicing provider is located in the following zip code PPG processes authorizations, if not L.A. Care processes the authorization - 91744, 91736, 91747, 91749, 91750, 90715, 90650, 90651, 90652, 93563, 91767, 91768, 91769, 91766, 91748, 91773, 90670, 91744, 93563, 91788, 91789, 91790, 91791, 91792, 91793, 90601, 90602, 90603, 90604, 90605.