Cal MediConnect Contacts



CONTRACTED PROVIDER AUTHORIZATION/BILLING CONTACTS

When L.A. Care is Financially Responsible

DEPARTMENT	CONTACT INFORMATION	ONLINE MATERIALS (links to plan-specific provider materials)
 Authorizations *Only when L.A. Care is responsible Prior authorizations Converting TARs to plan authorizations Continuity of Care (COC) Please note that there are separate	NAME: L.A. Care Utilization Management PHONE: 877-431-2273 Inpatient FAX: 877-314-4957 Outpatient Fax: 213-438-5777 COC Unit PHONE: 1-855-351-9251	Utilization Management Authorization Form: http://www.lacare.org/providers/provider- resources/provider-forms COC Resources: http://www.calmediconnectla.org/continuity- care
individuals to contact regarding prior vs. regular authorizations, or for different types of authorizations (e.g. outpatient vs. inpatient)	COC Unit PHONE: 1-053-531-9251 COC Email: COC@lacare.org HOURS: 24 hours	*Refer to delegation matrix on L.A. Care's website for detailed information regarding the entity responsible for authorizing services. Generally, PPGs/IPAs in the CMC network are responsible for authorizing all services (with the exception of Behavioral Health, Chiropractic, Dental, Transportation, and Vision). Check Eligibility to verify IPA.
Behavioral HealthBH access and care coordination	NAME: Beacon Health Strategies PHONE: 877-344-2858 (24 hours referral) L.A. Care's Behavioral Health	BH Services http://www.lacare.org/providers/behavioral-health/behavioral-health-services
BH provider supportBH education & training	Provider Support Line: 844-858-9940 FAX: 213-438-5093 EMAIL: behavioralhealth@lacare.org HOURS: 8am – 5pm	Specialty BH Services http://www.lacare.org/providers/behavioral-health/specialty-mental-health-services
Cal MediConnect Program Lead	NAME: Maria Lackner PHONE: 213-694-1250 x4010 EMAIL: mlackner@lacare.org	http://www.calmediconnectla.org/
• Make a referral	NAME: L.A Care Case Management PHONE: 1-844-200-0104 FAX: 213-438-5077 EMAIL: cmreferral@lacare.org HOURS: 8 am – 5 pm	Case Management Resources: http://www.lacare.org/providers/provider- resources/provider-faqs

Cal MediConnect Contacts



CONTRACTED PROVIDER AUTHORIZATION/BILLING CONTACTS

When L.A. Care is Financially Responsible (continued)

DEPARTMENT	CONTACT INFORMATION	ONLINE MATERIALS (links to plan-specific provider materials)
Claims/Billing *Only when L.A. Care is responsible • Submitting claims	NAME: L.A. Care Claims Department PHONE: 888-452-2273 ADDRESS: PO BOX 811580 Los	Claims Resource: http://www.lacare.org/providers/claims-and-icd- 10/submitting-claim
Receiving payments	Angeles, CA 90081	* Refer to delegation matrix on Provider Portal for detailed information regarding the entity responsible for paying claims. Generally, PPGs/IPAs in the CMC network are responsible for paying all professional claims. At times, L.A. Care, or the CMC member's capitated hospital (if applicable) is responsible for paying all facility or ancillary provider claims (with the exception of Long Term Care (LTC), Behavioral Health, Chiropractic, Dental, Transportation, and Vision). Check Eligibility to verify IPA
Long-Term Services &	NAME: L.A. Care Managed Long Term	Managed Long Term Services and Support
Supports Providers	Services and Support (MLTSS)	Resources:
LTSS care management	PHONE : 855-427-1223	http://www.lacare.org/members/member-
 LTSS contracting 	FAX : 213-438-4877	services/medi-cal-ltss
 LTSS authorizations 	EMAIL: mltss@lacare.org	
 Converting TARs to 	HOURS : 8 am - 5 pm	
plan authorizations		
Member Services/	NAME: L.A. Care Member Services	Cal MediConnect:
Member Eligibility	PHONE : 1-888-522-1298	http://www.calmediconnectla.org/providers/benefits
Member plan eligibility	TTY : 1-866-522-2731	
 Resources for patients 	FAX: N/A	L.A. Care Medi-Cal
	EMAIL: N/A	http://www.lacare.org/members/member-
	HOURS : 8 am – 5 pm	docs/member-handbooks
Provider Contracting	NAME: Norma Carrillo	Tools and resources for contracted providers are
 Contracts 	PHONE : 213-694-1250 x4233	available on our Provider Portal.
Delegation Information	FAX : 213-438-5016	Join our Network:
	EMAIL: ncarrillo@lacare.org	http://www.lacare.org/providers/join-our-
	HOURS : 7:30 am – 3:30 pm	network/become-a-provider
Provider Relations	NAME: L.A. Care Provider Relations	Provider Relations can provide access to the portal for
 Provider Support 	Department	contracted providers. Please request access via the
	PHONE : 213-694-1250 x4719	Provider Relations email.
	FAX: 213-438-5032	Provider Resources:
	EMAIL:	http://www.lacare.org/providers/provider-
	ProviderRelations@lacare.org	resources/cmc-provider-resources
	HOURS : 8 am – 5 pm	