



## Integrated System News Bulletin

### AB3632 and Medi-Cal

Attention: SD/Medi-Cal Providers  
Who Can Bill AB3632

#### STOP – Impact to You

DMH has identified an issue when an AB3632 client has Medi-Cal and Other Health Coverage.

#### CAUTION – What You Need to Know

Because Federal and State education laws require that all disabled students receive the services they need as part of a “free, appropriate public education” all services under **AB3632** must be provided at no cost to the student or his/her parents. The courts have ruled that if public agencies bill parents’ private insurance for these educationally mandated services, it constitutes a “cost” to the parents, which is in violation of the law. This same scenario is true when an AB3632 client has Medi-Cal with a Share of Cost (SOC).



This means that providers should NOT bill private insurance before they bill Medi-Cal if the client is AB3632. In addition, claims should not be billed to Medi-Cal for those clients who are AB3632 **AND** who have Medi-Cal with a SOC, unless of course, SOC is cleared.

#### GO – What You Need to Do

To claim AB3632 services, when the client has Medi-Cal and OHC, IS users should ensure the benefits screen carries Medi-Cal and the correct CIN and the private insurance subscriber information (name and subscriber number).

1. The claim must include Medi-Cal and you must check **Yes** to additional payers.
2. In the Services Claim – Outpatient - Insurance screen enter \$0 in the amount paid by the Other Health Insurance. Medi-Cal currently does not edit the subscriber number, so users may enter 1234567 if the number is not available.
3. Users should ensure AB3632 is included as the primary Plan in the claim.

4. If the client also has Healthy Families coverage, ensure HF is the secondary Plan.