

**THIS CA UPDATE HAS BEEN  
SENT TO THE FOLLOWING:****COUNTIES:**

- ☒ Imperial
- ☒ Riverside/San Bernardino
- ☒ Los Angeles
- ☒ Orange
- ☐ Sacramento
- ☒ San Diego

**LINES OF BUSINESS:**

- ☐ Molina Medi-Cal  
Managed Care
- ☐ Molina Medicare  
Options Plus
- ☐ Molina Dual Options Cal  
MediConnect Plan  
(Medicare-Medicaid Plan)
- ☒ Molina Marketplace  
(Covered CA)

**PROVIDER TYPES:**☒ **Medical Group/  
IPA/MSO****Primary Care**

- ☐ IPA/MSO
- ☐ Directs

**Specialists**

- ☐ Directs
- ☐ IPA

☐ **Hospitals****Ancillary**

- ☐ CBAS
- ☐ SNF/LTC
- ☐ DME
- ☐ Home Health
- ☐ Other

**FOR QUESTIONS CALL  
PROVIDER SERVICES:**

(855) 322-4075, Extension:

**Los Angeles/Orange  
Counties**X111113 X123071  
X127657**Riverside/San  
Bernardino Counties**

X127684 X120618

**Sacramento County**

X121360

**San Diego County**X121805 X121401  
X127709 X121413  
X123006 X121599**Imperial County**

X125682 X125666

## All Plan Letter 19-012 (OFR) Filing Requirements Under Health and Safety Code Section 1300.71.31: Methodology for Determining Average Contracted Rate; Default Reimbursement Rate

This is an advisory notification to Molina Healthcare of California (MHC) network providers. The Department of Managed Health Care (DMHC) has issued an All Plan Letter (APL) 19-012 regarding filing requirements under Health and Safety Code Section 1300.71.31: Methodology for Determining Average Contracted Rate; Default Reimbursement Rate to remind health care services plans and certain delegated entities of the Knox-Keene Health Care Service Plan Act of 1975's (the Knox-Keene Act) requirement to file the policies and procedures used to determine the average contracted rate.

Please review the APL at:

<https://www.dmhc.ca.gov/LicensingReporting/HealthPlanLicensing/AllPlanLetters.aspx>

### **REQUIREMENTS**

By August 15, 2019, and thereafter when the policies and procedures are amended, health care service plans or their delegated entity(ies) that has/have the responsibility for payment of a claim for health care services subject to Section 1371.9 shall file with the Department the policies and procedures used to determine the average contracted rate. The methodology for determining the average contracted rate is described in Rule 1300.71.31, subdivision (c).

### **FILING INSTRUCTIONS**

Delegated entities that have the responsibility for payment of claims shall submit their policies and procedures used to determine compliance with the average contracted rate (as a Microsoft Word or Adobe PDF attachment) via email to [AB72@dmhc.ca.gov](mailto:AB72@dmhc.ca.gov).

If you have any questions regarding the submission process of the policies and procedures for the average contracted rate, please contact Pritika Dutt by email at [Pritika.Dutt@dmhc.ca.gov](mailto:Pritika.Dutt@dmhc.ca.gov) or phone at (916) 324-8137.

### **QUESTIONS**

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (855) 322-4075. Please refer to the extensions to the left.