

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

1700 K STREET
SACRAMENTO, CA 95814-4037
TDD (916) 445-1942
(916) 324-5523

**ADP BULLETIN**

 Title: Rescinding Drug Medi-Cal Co-Payment Requirement		Issue Date:	Issue No.
		Expiration Date: Until Notified	
Acting Assistant Deputy Director Approval	Function:	Supersedes Bulletin/ADP Letter No.	
CARMEN DELGADO Program Operations Division	<input type="checkbox"/> Information Management <input type="checkbox"/> Quality Assurance <input type="checkbox"/> Service Delivery <input checked="" type="checkbox"/> Fiscal <input type="checkbox"/> Administration	Portions of ADP Bulletin #99-39 as specified	

PURPOSE

This bulletin rescinds information regarding co-payments contained in ADP Bulletin #99-39.

All information regarding share of cost (SOC) and notification of the right to a fair hearing in ADP Bulletin #99-39 remains unchanged.

DISCUSSION

Bulletin #99-39 states that the Welfare and Institutions Code (WIC) Section 14134 requires patients who are recipients of Medi-Cal benefits pay a co-payment to the provider at the time services are received. Bulletin #99-39 also stated that Section 14134 applies to all services received under Medi-Cal, including alcohol and other drug (AOD) services under Drug Medi-Cal (DMC).

The reference to Section 14021 of WIC covering Drug Medi-Cal and mental health treatment services does not mention a required co-payment; conversely, Section 14134 requiring a co-payment does not specifically mention Drug Medi-Cal nor AOD services. Therefore, services under the Drug Medi-Cal program do not require any co-payment.

QUESTIONS/MAINTENANCE

Please contact Susan McLeod, Program Analyst, Program and Fiscal Policy Branch, Program Operations Division, at (916) 322-4576 if you have any questions.

ADP Bulletin #
Page Two

EXHIBITS

None

DISTRIBUTION

County Alcohol and Drug Program Administrators
DMC Providers
Wagerman Associates, Inc.
Director's Advisory Council

G:\GROUPS3\Pfp\S T A F F\McLeod\ADP Bulletin Rescind Copayment(7-13-01).doc