Dear Plan Partners.

This is email serves as a reminder to all Medi-Cal Managed Care Plans that balance billing Medi-Cal beneficiaries is prohibited by federal and state law. Medi-Cal beneficiaries should not pay for physician visits and other medical care when they receive covered services from a provider in their provider network. This means beneficiaries cannot be charged for co-pays, co-insurance, or deductibles. This applies to both Medicare and Medi-Cal providers.

Billing Medi-Cal beneficiaries violates Federal law as outlined in section 1902(n)(3)(B) of the Social Security Act, as modified by section 4714 of the Balanced Budget Act of 1997. This section of the Act is available at:

http://www.ssa.gov/OP_Home/ssact/title19/1902.htm. Protections are also found in California Welfare and Institutions Code section 14019.4.

Thank you for your cooperation,

Blue Shield of California Promise Health Plan

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