

Medi-cal Transaction Types Updated 3/26/2018



		Timeliness Constraints		Additional Billing Requirements	
Type of Transaction	Purpose	DMH	ADP	DMH	ADP
Initial	Initial Claim for Service	12 months from the date of service	6 months from the date of service starting 1/1/18	In certain circumstances, claims can be submitted after the 12 month deadline. See delay reason codes.	In certain circumstances, claims can be submitted after the 6 month deadline. See delay reason codes.
Void	To "Void" a previously claimed service	None	None	1 - The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the void transaction. Claims that have not been finalized cannot be voided. 2 - Billing Provider EIN and Beneficiary CIN must match the original claim. In addition, two or more of the following elements must match the original claim: Procedure Code, Date of Service, Place of Service, and Provider ID. 3 - An original claim can be successfully voided only once. 4- Only previously approved claims can be voided.	1 - The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the void transaction. Claims that have not been finalized cannot be voided. 2 - An original claim can be successfully voided only once.
Replacement	To "Replace" a previously Approved or Denied Claim'	15 months from the month of service	Within 6 months of the original date of denial	1 - The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the void transaction. Claims that have not been finalized cannot be voided. 2 - Billing Provider EIN and Beneficiary CIN must match the original claim. In addition, two or more of the following elements must match the original claim: Procedure Code, Date of Service, Place of Service, and Provider ID	The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the replacement transaction.