TIPS FOR PROMPT PAYMENT 100c

Prompt payment of claims on Standard and Head Start/State Preschool forms is dependent on how accurately the forms are filled out. Make sure that:

1. The PM 160 is filled out in black ink or typed. **DO NOT** use pencil or red ink. Press hard so all four (4) copies are legible. **DO NOT** use "white out" or any liquid correcting fluid.
2. The PM 160 is signed by the provider or designated representative. **DO NOT** use a signature stamp.
3. The PM 160 is completely filled out for the type of assessment provided (Complete, Partial, or Recheck).
4. All the required check marks (√), code numbers, and fees are entered.
5. The Provider Number is accurate. (Claims are automatically paid to the Provider Number entered on the PM 160 when payment is requested.)
6. The Medi-Cal Identification Number (see pages 115.1 and 115.2 of the PM 160 Instruction Manual) entered on the PM 160 belongs to that individual, and also make sure that (s)he was eligible for Medi-Cal in the month services were provided.
7. A "CHDP Eligibility Information" form (DHS 4073) is attached, when required.
8. BOTH the county name and its code number for the patient's residence are entered.
9. All comments, concerns, or problems are entered in COMMENTS/PROBLEMS area.
10. Answers to "Tobacco Use" questions are documented.
11. No staples are placed through the bar patch on the claim form.
12. The provider's name and return address are on the outside of the envelope and legible.

A section to enter ICD 9 codes for diagnoses made is found in the "Comments/Problems" area. Please see Appendix 9 (PM 160 Instruction Manual) for the list of the most commonly used codes for children as compiled by the Academy of Pediatrics.

(Information copied from PM 160 Instruction Manual page 100.2)