

**PARTNERSHIP HEALTHPLAN OF CALIFORNIA
POLICY / PROCEDURE**

Policy/Procedure Number: CLPM-07		Lead Department: Claims	
Policy/Procedure Title: Encounter Data Submissions		<input checked="" type="checkbox"/> External Policy <input type="checkbox"/> Internal Policy	
Original Date: 9/1/25		Next Review Date: 01/01/2026 Last Review Date:	
Applies to:	<input checked="" type="checkbox"/> Medi-Cal	<input type="checkbox"/> Employees	
Reviewing Entities:	<input type="checkbox"/> IQI	<input type="checkbox"/> P & T	<input type="checkbox"/> QUAC
	<input type="checkbox"/> OPERATIONS	<input type="checkbox"/> EXECUTIVE	<input type="checkbox"/> COMPLIANCE <input checked="" type="checkbox"/> DEPARTMENT
Approving Entities:	<input type="checkbox"/> BOARD	<input type="checkbox"/> COMPLIANCE	<input type="checkbox"/> FINANCE <input type="checkbox"/> PAC
	<input type="checkbox"/> CEO <input type="checkbox"/> COO	<input type="checkbox"/> CREDENTIALING	<input checked="" type="checkbox"/> DEPT. DIRECTOR/OFFICER
Approval Signature: <i>Lisa Malvo</i>		Approval Date: 09/01/2025	

I. RELATED POLICIES:
A. N/A

II. IMPACTED DEPTS:
A. Claims

III. DEFINITIONS:
A. N/A

IV. ATTACHMENTS:
A. N/A

V. PURPOSE:

To provide guidance for encounter data submission for Providers.

VI. POLICY / PROCEDURE:

At a minimum, providers are to submit encounter data to Partnership on a monthly basis following all the normal fee-for-service claims submission guidelines as outlined in their Partnership contract, the State of California Medi-Cal Provider Manual and/or listed within the Partnership Provider Manual. Encounter data must meet the same billing guidelines as fee-for-service claims with the exception of the Partnership one year billing limit, the Partnership authorization requirements and the other coverage information.

VII. REFERENCES:
A. State of California Medi-Cal Provider Manual

VIII. DISTRIBUTION:
A. PARTNERSHIP4ME PowerDMS Policies & Procedures

IX. POSITION RESPONSIBLE FOR IMPLEMENTING PROCEDURE: Senior Director, Claims Department

X. REVISION DATES: 9/1/25