## DEPARTMENT OF HEALTH SERVICES

714 / 744 P STREET P.O. BOX 942732 SACRAMENTO, CA 94234-7320 (916) 327-1400



February 6, 2002

CHDP Program Letter No: 02-02

TO: ALL COUNTY CHILD HEALTH AND DISABILITY PREVENTION (CHDP)

PROGRAM DIRECTORS, DEPUTY DIRECTORS, MEDICAL

CONSULTANTS, STATE CHILDREN'S MEDICAL SERVICES (CMS)

BRANCH STAFF AND REGIONAL OFFICE STAFF

SUBJECT: REVISION OF CONFIDENTIAL SCREENING/BILLING REPORT FORM

(PM 160)

Enclosed is the CHDP Program Information Notice 02-02, which notifies providers of revisions made to the Confidential Screening/ Billing Report form (PM160).

It is the responsibility of the local CHDP programs to complete a Provider Forms Reorder Request (gray card) to enable your providers to receive the new PM160s from Electronic Data Systems (EDS), which will begin processing the revised PM160 effective February 15, 2002. However, EDS will be able to simultaneously process the new and old versions of the PM160 and will continue to accept the old version of the PM160 through September 1, 2002. The format and processing for Computer Media Claims will remain unchanged and are excluded from the September 1, 2002, cutoff date.

Please distribute the Provider Information Notice enclosure without any revisions to providers in your local program area and complete and return the enclosed "Report of Distribution."

Original Signed by Maridee Gregory, M.D.

Maridee A. Gregory, M.D., Chief Children's Medical Services Branch

Enclosures