

**PARTNERSHIP HEALTHPLAN OF CALIFORNIA
MEDI-CAL PROVIDER MANUAL
CLAIMS DEPARTMENT**

IV.A. Encounter Data Submission from PHC Capitated Entities

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