

Alameda County Behavioral Health Care Services

Alcohol and Drug Program Medi-Cal Claim Schedule for:

1 Fiscal Year 2016-2017 Services and:

2 Supplemental Fiscal Year 2015-2016 Services with Other Health Coverage (AKA "Supplemental June 2016" Claims)

FY 2016-2017 CLAIMS				RUN DATES			RUN DATES
1	2	3	4	5	6	7	8
Service Month	Service Year	Completion of Data Entry & Medi-Cal Eligibility Match	Supplemental June 2016 Claims with Other Health Coverage	1st Test Claim	2nd Test Claim	Cert Form Due Dates for ACBHCS Finance	Real Claim
July	2016	8/3/2016	Supplemental #1	8/6/2016	8/13/2016	8/18/2016	8/20/2016
August	2016	9/6/2016	Supplemental #2	9/10/2016	9/17/2016	9/22/2016	9/24/2016
September	2016	10/5/2016	Supplemental #3	10/8/2016	10/15/2016	10/20/2016	10/22/2016
October	2016	11/3/2016	Supplemental #4	11/5/2016	11/12/2016	11/17/2016	11/19/2016
November	2016	12/5/2016	Supplemental #5	12/10/2016	12/17/2016	12/22/2016	12/24/2016
December	2016	1/5/2017	Supplemental #6	1/7/2017	1/14/2017	1/19/2017	1/21/2017
January	2017	2/3/2017	Supplemental #7	2/4/2017	2/11/2017	2/16/2017	2/18/2017
February	2017	3/3/2017	Supplemental #8	3/4/2017	3/11/2017	3/16/2017	3/18/2017
March	2017	4/5/2017	Supplemental #9	4/8/2017	4/15/2017	4/20/2017	4/22/2017
April	2017	5/3/2017	Supplemental #10	5/6/2017	5/13/2017	5/18/2017	5/20/2017
May	2017	6/5/2017	Supplemental #11	6/10/2017	6/17/2017	6/22/2017	6/24/2017
June	2017	7/6/2017	Not Applicable	7/8/2017	7/15/2017	7/20/2017	7/22/2017