

|->

Title 22@ Social Security

|->

Division 3@ Health Care Services

|->

Subdivision 1@ California Medical Assistance Program

|->

Chapter 4@ Prepaid Health Plans

|->

Article 7@ Emergency Services Claims Disputes

|->

Section 53698@ Standard of Liability

53698 Standard of Liability

(a)

The plan's financial liability to the provider, if any, shall not exceed the lower of the following rates applicable at the time the services were rendered by the provider:

(1) The usual charges made to the general public by the provider. (2) The fee-for-service rates for similar services under the Medi-Cal program. Upon determination of the plan's liability, if no final rate has been established for a provider for the period and type of services in question, then the applicable interim rate shall be used for final determination of plan liability.

(1)

The usual charges made to the general public by the provider.

(2)

The fee-for-service rates for similar services under the Medi-Cal program. Upon determination of the plan's liability, if no final rate has been established for a provider for the period and type of services in question, then the applicable interim rate shall be used for final determination of plan liability.

(b)

The amount demanded shall be presumed to be correct, and the provider shall be entitled to the full amount demanded in its claim should it prevail, unless the plan files a Notice of Defense, pursuant to Section 53632, which places the amount of the provider's demand for payment in issue.