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Proposition 56 Directed Payments for Private Reproductive Services

Dear provider,

The Health Plan of San Mateo (HPSM) issues occasional notifications regarding Proposition 56 payments to ensure compliance with regulatory requirements.

Through Prop 56, HPSM is required to render payment to providers who offer family planning services such as pregnancy termination to members. HPSM is required to report these services to the Department of Health Care Services (DHCS) in Encounter Data and ensure that the data is complete, accurate, reasonable, and timely.

The directed payments vary by procedure code:

Procedure Code	Description	Minimum Fee Schedule Amount
59840	Induced abortion (by dilation and curettage)	\$400.00
59841	Induced abortion (by dilation and evacuation)	\$700.00

HPSM automatically identifies eligible claims and distributes the Prop 56 additional payment by adjusting the original claim the following month. Prop 56 payments are assigned claim message 8078 in the remittance advice to assist with identification.

To learn more about how to properly file a claim, responsible payer, or more, please review our Provider Manual: <https://www.hpsm.org/provider/resources/manual/claims>

Providers may file provider payment dispute resolutions (PDRs) for payment through our standard process. Learn more here: <https://www.hpsm.org/provider/claims/disputes-and-appeals>

Learn more about additional payments through Prop 56 here:
<https://www.dhcs.ca.gov/provgovpart/Prop-56/Pages/default.aspx>

For questions, contact the HPSM Provider Services department at PSInquiries@hpsm.org.

The Health Plan of San Mateo