



February 15, 2008

Dear FQHC/RHC Provider,

Subject: Family PACT Claims Paid

EDS has identified a system error that resulted in the erroneous payment of Federally Qualified Health Center (FQHC)/Rural Health Clinic (RHC) per-visit claims for Family PACT (Planning, Access, Care and Treatment) recipients. FQHC/RHC per-visit codes are not benefits of the Family PACT Program. For the dates of service billed, claims for Family PACT recipients should be billed under the Health Access Programs (HAP) provider number (other than FQHC/RHC) with a standard procedure code.

No action is required on your part. These claims will appear as voids on *Remittance Advice Details* (RADs) beginning March 6, 2008, with RAD code **953: Void of claim; service is not a Family PACT benefit.**

This recovery is authorized under the provisions of *Welfare and Institutions Code* (W&I code), Sections 14176 and 14177, and *California Code of Regulations*, Title 22, Section 51458.1(a)(1). In addition, the W&I Code sections authorize the Department of Health Care Services (DHCS) to enter into repayment agreements with providers or offset overpayments against amounts due. If your total warrant amount is not sufficient to offset the recovery, the negative balance will be converted to an accounts receivable transaction and subtracted from future Medi-Cal payments.

If you disagree with any of these voids, you may submit an appeal within 90 days of the RAD date. Please refer to the *Appeal Form Completion* section in a Part 2 Medi-Cal provider manual (or on the Medi-Cal Web site at [www.medi-cal.ca.gov](http://www.medi-cal.ca.gov)) for instructions to submit an appeal.

If you have questions regarding this adjustment, please call the Telephone Service Center (TSC) at 1-800-541-5555, option 11 then 18.

Sincerely,

A handwritten signature in cursive script that reads "Nona Carpenter".

Nona Carpenter  
Provider Relations Director

Reference Number: P8231

**EDS**  
3215 Prospect Park Drive  
Rancho Cordova, CA 95670-6017