



April 10, 2008

Dear Provider,

Subject: Duplicate Claims Paid

EDS has identified a processing error that resulted in the erroneous payment of duplicate claims that had different TAR Control Numbers (TCNs). This error was in place until date of processing June 2007.

No action is required on your part. Affected claims that appeared on *Remittance Advice Details* (RADs) since January 1, 2005 will appear as voids on RADs beginning May 1, 2008, with RAD code **887: Void of duplicate claims**.

This recovery is authorized under the provisions of *Welfare and Institutions Code* (W&I Code), Sections 14176 and 14177, and *California Code of Regulations* (CCR), 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 void RAD date. Please refer to the *Appeal Form Completion* section in the appropriate Part 2 manual or on the Medi-Cal Web site (www.medi-cal.ca.gov) for instructions about submitting an appeal.

If you have any 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: P8126

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