



November 23, 2009

Dear Provider,

Subject: Void and Resubmission of Part-B Crossover Claims

The Department of Health Care Services (DHCS) and EDS, an HP company, have discovered a system error that resulted in the incorrect reimbursement of certain Medicare Part B crossover claims. These claims should have utilized the Medi-Cal maximum allowable rate instead of the Medicare allowable for the service and modifier combination billed. The system was fixed on October 28, 2009.

EDS is reprocessing the affected Part B crossover claims with *Remittance Advice Details* (RAD) dates beginning April 1, 2009, through October 29, 2009, to correct the paid amount, which will result in a recovery in most cases. However, some of the claims may be paid more than the original reimbursement due to the multiple services billed on Part B claims. Some of these services are subject to other system changes incorporated during this billing period.

No action is required on your part. EDS will reprocess the affected claims to price correctly. Voids will appear on RADs beginning the week of December 7, 2009, with RAD code **819: Void and resubmission of claims processed in error**). Resubmits will appear on RADs beginning the week of December 14, 2009, with Claim Control Number (CCN) prefixes **933988** and **934088**.

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 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.

Providers have three options to offset the negative accounts receivable balance: 1) Send a check for the accounts receivable balance to EDS Cash Control. 2) Do nothing and allow the recovery process to withhold 100 percent of the weekly Medi-Cal checkwrite until the balance is paid in full. However, if the balance due is not recovered within 90 days, the account may be subject to collection. 3) Make repayment arrangements for a lower withhold percentage rate so that the balance due is recovered within 90 days of the Erroneous Payment Correction (EPC) implementation date. These arrangements can be made through the Telephone Service Center (TSC) at the number below.

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

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

If you have any questions regarding this adjustment, please call the TSC at 1-800-541-5555, option 11, followed by option 18.

Sincerely,

A handwritten signature in black ink that reads "Nona Carpenter". The signature is written in a cursive style with a light gray background behind it.

Nona Carpenter
Provider Relations Director

Reference Number: P10982

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