



**Tanya E. Schuhmeier**  
Interim Director  
Provider Relations  
California MMIS

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April 9, 2013

**Subject: Resubmission of Claims**

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue causing claims billed with certain CPT-4 codes to erroneously deny with Remittance Advice Details (RAD) code **9877: Policy review pending for code; re-bill using prior year's code.**

This issue affected claims for dates of service from January 1, 2012, through September 24, 2012, for CPT-4 codes 95885, 95886 and 95887.

No action is required on your part. Xerox State Healthcare, LLC, will resubmit the affected claims. These resubmissions will appear on RADs beginning March 28, 2013, with Claim Control Number (CCN) prefix **307455**.

If you disagree with any of these resubmissions, you may submit a *Claims Inquiry Form* (CIF) within six months of the new RAD date. For CIF completion instructions, please refer to the *CIF Completion* and *CIF Special Billing Instructions* sections in the appropriate Part 2 manual or on the Medi-Cal website ([www.medi-cal.ca.gov](http://www.medi-cal.ca.gov)).

If you have questions regarding these resubmissions, please call the Telephone Service Center (TSC) at 1-800-541-5555, option 6 followed by option 5.

Sincerely,

*Tanya E. Schuhmeier*

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Reference Number: P10498