



Tanya E. Schuhmeier
Interim Director
Provider Relations
California MMIS

Xerox State Healthcare, LLC
820 Stillwater Road
West Sacramento, CA 95605

www.xerox.com/govhealthcare

April 12, 2013

Subject: Resubmission of Claims

Dear Provider:

The Department of Health Care Service has instructed Xerox State Healthcare, LLC, to resubmit paper claims for dates of service from March 1, 2010, through May 18, 2011, that were denied for timeliness with Remittance Advice Details (RAD) code **0021: This claim was received after the one-year maximum billing limitation.**

No action is required on your part. Xerox State Healthcare, LLC will resubmit the affected claims. These resubmissions will be paid or denied for a valid reason and should appear on RADs beginning April 2013, with Claim Control Number (CCN) prefix **307955**.

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).

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

Sincerely,

Tanya E. Schuhmeier

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Reference Number: P10761