



**Tanya E. Schuhmeier**  
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December 19, 2013

**Subject: Resubmission of Claims Denied for RAD Codes 9897 and 9898**

Dear Provider:

Based on a system error, paper claims for medical supplies processed between October 8, 2011, and May 19, 2012, were erroneously denied with Remittance Advice Details (RAD) codes **9897: HCPCS Qualifier and NDC (National Drug Code)/UPN (Universal Product Number) is missing** and **9898: HCPCS Qualifier and NDC (National Drug Code)/UPN (Universal Product Number) is invalid**.

No action is required on your part. Xerox State Healthcare, LLC will resubmit the impacted claims. These resubmissions will be paid or denied for a valid reason and will start appearing on RADs on January 2, 2014, with Claim Control Number (CCN) prefix **335055**.

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 adjustments, 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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Director, Provider Relations  
California MMIS  
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