



Tanya E. Schuhmeier
Director, Provider Relations
California MMIS

Xerox State Healthcare, LLC
820 Stillwater Road
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www.xerox.com/govhealthcare

July 30, 2014

Subject: Resubmission of Erroneously Denied Family PACT Claims

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue that caused claims for aid code 8H of the Family PACT (Planning, Access, Care and Treatment) Program to erroneously deny with Remittance Advice Details (RAD) code **0202: The primary diagnosis code is invalid for the age of recipient** and **0088: secondary diagnosis code is invalid for the age of the recipient**.

The issue affected claims for dates of service from December 30, 2013, through February 19, 2014.

No action is required on your part. Xerox State Healthcare, LLC (Xerox) will resubmit the affected claims. These resubmissions will appear on RADs beginning August 7, 2014, with Claim Control Number (CCN) prefix **420255**.

If you disagree with any of these resubmissions, you may submit a *Claims Inquiry Form* (CIF) within six months of the new RAD date or you may submit an *Appeal Form* within 90 days 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). For *Appeal Form* completion instructions please refer to the *Appeal Form Completion* section in the appropriate Part 2 manual or on the Medi-Cal website.

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

Sincerely,

Tanya E. Schuhmeier

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Reference Number: P19620