



Tanya E. Schuhmeier
Director, Provider Relations
California MMIS

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November 6, 2014

Subject: Resubmission of Erroneously Denied Claims for HCPCS Code X1522

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue causing claims for HCPCS code X1522 to erroneously deny with Remittance Advice Details (RAD) code **9898: HCPCS Qualifier and NDC (National Drug Code)/UPN (Universal Product Number) is invalid**. The issue affected claims for dates of service from July 1, 2009, through October 29, 2013.

No action is required on your part. Xerox State Healthcare, LLC (Xerox), will resubmit the affected claims until the erroneous denials are cleared. These resubmissions will appear on RADs beginning November 13, 2014.

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 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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Reference Number: P16212