



Tanya E. Schuhmeier
Director, Provider Relations
California MMIS

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

www.xerox.com/govhealthcare

March 16, 2015

Subject: Void and Resubmission of Claims for Etonogestrel HCPCS Code J7307

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue causing claims for etonogestrel HCPCS code J7307 to erroneously pay. The issue affected certain claims processed from September 23, 2013, through November 6, 2014

No action is required on your part. Xerox State Healthcare, LLC (Xerox) will void and resubmit the affected claims until the erroneous payments are cleared. The voids will appear on *Remittance Advise Details* (RAD) forms beginning April 2, 2015, with RAD code **0819: Void and resubmit of claims processed in error**. Corresponding resubmissions will appear on RAD forms beginning April 16, 2015.

The recoveries are authorized under the provisions of *Welfare and Institutions Code* (W&I Code), Sections 14176 and 14177, and *California Code of Regulations* (CCR), Title 22, Section 51458.1(a)(1). In addition, the W&I Code sections authorize DHCS to enter into repayment agreements with providers or offset overpayments against amounts due. If the total warrant amount is not sufficient to offset the recovery, the negative balance will be converted to an accounts receivable transaction and subtracted from future Medi-Cal reimbursements.

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

Tanya E. Schuhmeier
Director, Provider Relations
California MMIS
Xerox State Healthcare, LLC

Reference Number: P26146