



**Tanya E. Schuhmeier**  
Director, Provider Relations  
California MMIS

Xerox State Healthcare, LLC  
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April 22, 2015

**Subject: Resubmission of Erroneously Denied Claims with RAD Code 095**

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue causing some claims to erroneously deny with Remittance Advice Details (RAD) code **095: This service is not payable due to a procedure, or procedure and modifier, previously reimbursed.** The issue affected claims for dates of service from January 1, 2014, through October 20, 2014.

No action is required on your part. Xerox State Healthcare, LLC (Xerox) will resubmit the affected claims. These resubmissions will appear on RAD forms beginning April 30, 2015.

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](http://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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Reference Number: P25538