



**Tanya E. Schuhmeier**  
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August 7, 2015

**Subject: Adjustment of Inpatient Claims Due to Retroactive Rate Updates**

Dear Provider:

The Department of Health Care Services (DHCS) has updated reimbursement rates for the accommodation codes listed below, effective retroactively:

Accommodation Code(s)	Corrected Rate per Day	Effective Date	Fiscal Year
124 PA and 204 PA	\$1,150	July 1, 2013	2013 – 2014
124 PB and 204 PB	\$1,100	July 1, 2013	2013 – 2014
124 PA and 204 PA	\$1,208	July 1, 2014	2014 – 2015
124 PB and 204 PB	\$1,155	July 1, 2014	2014 – 2015

No action is required on your part. Xerox State Healthcare, LLC (Xerox) will adjust the affected claims for dates of service on or after July 1, 2013, or July 1, 2014, depending upon the accommodation code. These adjustments will appear on *Remittance Advice Details* (RAD) forms beginning August 27, 2015, with RAD code **0899: Inpatient Retroactive Rate Adjustment**.

If you disagree with any of these adjustments, 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 adjustments, please call the Telephone Service Center at 1-800-541-5555, option 5 followed by option 6

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