



Tanya E. Schuhmeier
Director, Provider Relations
California MMIS

Xerox State Healthcare, LLC
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September 2, 2015

Subject: Resubmission of Erroneously Denied Claims for Molecular Pathology Codes

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue causing some claims for CPT-4 codes 81206, 81207 and 81208 to erroneously deny with Remittance Advice Details (RAD) code **394: This is a treatment period procedure that requires "from-through" billing**. The issue affected claims for dates of service from October 1, 2012, through April 28, 2015.

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 September 10, 2015, with Claim Control Number (CCN) prefix **523955**.

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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Reference Number: P28344