



Tanya E. Schuhmeier
Director, Provider Relations
California MMIS

Xerox State Healthcare, LLC
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March 31, 2016

Subject: Resubmission of Erroneously Denied Laboratory Services Claims

Dear Provider:

The Department of Health Care Services (DHCS) has identified a claims processing issue causing erroneous denials of some laboratory services claims with Remittance Advice Details (RAD) code **9655: The monthly frequency limits for this procedure have been exceeded. Please appeal with justification for exceeding the frequency limits.** The issue affected claims for dates of service from June 1, 2014, through September 30, 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 April 7, 2016, with Claim Control Number (CCN) roll number **55 (Resubmit)**. The roll number is the 5th and 6th digits of the CCN.

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: P31000