



December 31, 2008

Dear Family PACT Provider,

Subject: Resubmission of Claims

EDS, an HP company, has been made aware of the following issue: The Family PACT (Planning, Access, Care and Treatment) Program Internet transaction screen for client enrollment defaulted to female; therefore, numerous male clients were inadvertently enrolled as female. Claims submitted as male were denied with Remittance Advice Details (RAD) code **9551: The sex code on the claim does not match the sex indicator on the HAP (Health Access Programs) eligibility file.** The screen's default was removed on June 23, 2008.

EDS has resubmitted the claims that were marked as male and denied with reason code 9551 that appeared on RADs dated January 1, 2002 through August 8, 2008. As directed by the Department of Health Care Services (DHCS), these claims have been specially authorized to bypass the gender edit. These resubmitted claims will either be paid or denied for a valid reason on RADs beginning January 2, 2009, with Claim Control Number (CCN) prefix **835055**.

If you disagree with any of these resubmits, you may submit a *Claims Inquiry Form (CIF)* within six months 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 Web site (www.medi-cal.ca.gov).

If you have questions, please call the Telephone Service Center (TSC) at 1-800-541-5555, option 11 followed by option 18.

Sincerely,

A handwritten signature in cursive script that reads "Nona Carpenter".

Nona Carpenter
Provider Relations Director

Reference Numbers: P9444