



January 22, 2009

Dear LEA Provider,

Subject: Resubmission of Claims

The Department of Health Care Services (DHCS) has identified a system error that resulted in the erroneous denial of Targeted Case Management (TCM) claims (HCPCS codes T1017, X4970, X4975 and X4980) with Remittance Advice Details (RAD) code **008: The provider of service is not eligible for the type of services billed**. The correction of the error was completed on October 23, 2008.

No action is required on your part. EDS, an HP company has resubmitted the outstanding claims affected for dates of service on or after January 1, 2007. These resubmits will be paid, or denied for a valid reason if a different error is found. These resubmits appear on RADs beginning January 29, 2008 with CCN prefix **901255**.

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 Number: P9166

EDS
3215 Prospect Park Drive
Rancho Cordova, CA 95670-6017