



March 5, 2009

Dear Provider,

Subject: Resubmission of Claims

EDS, an HP company, has discovered two system problems affecting claims from National Provider Identifiers (NPIs), which contain multiple provider types. The claims were often assigned incorrect provider types, and were denied for various reasons. The following reasons were most common:

**0248: Rural health clinics must bill per-visit codes only (01 – 05) for non-CMSP recipients.**

**0008: The provider of service is not eligible for the type of services billed.**

**0031: The provider was not eligible for the services billed on the date of service.**

**0255: Rendering provider not on provider master file or not a clinical lab.**

The problem affecting service codes covered by the Cancer Detection Program: Every Woman Counts (CDP: EWC) was fixed on October 13, 2008. The problem causing other denial '248' was fixed on October 21, 2008.

No action is required on your part. EDS has resubmitted the affected claims. These resubmits will be paid, or denied for a valid reason, on RADs beginning March 5, 2009, with CCN prefix **904855** or **905855**.

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](http://www.medi-cal.ca.gov)).

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

Sincerely,

A handwritten signature in black ink that reads 'Nona Carpenter'.

Nona Carpenter  
Provider Relations Director

Reference Numbers: P9551/P10502