



February 25, 2010

Dear Provider,

Subject: Resubmission of Claims

The Department of Health Care Services (DHCS) and EDS, an HP company, have identified a claims processing issue that resulted in the erroneous denials of claims billed for clinic package National Drug Codes (NDCs). Affected claims were denied with Remittance Advice Details (RAD) code message **9897: HCPCS Qualifier and NDC (National Drug Code)/UPN (Universal Product Number) is missing** or **9898: HCPCS Qualifier and NDC (National Drug Code)/UPN (Universal Product Number) is invalid**. The system was corrected on August 27, 2009.

No action is required on your part. EDS is automatically resubmitting the affected claims for dates of service from April 1, 2009, through August 27, 2009. These resubmits will be paid, or denied for a valid reason, and will appear on RADs beginning March 4, 2010, with Claim Control Number (CCN) prefix **004755**.

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, followed by option 18.

Sincerely,

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

Nona Carpenter  
Provider Relations Director  
Reference Number: P12802