



HP Enterprise Services
3215 Prospect Park Drive
Rancho Cordova, CA 95670-6017
+1 800.541.5555

May 7, 2010

Dear Provider,

Subject: Reprocessing of OB Claims

HP Enterprise Services has identified a processing error that affected some OB services claims. The impacted claims were either denied in error or, in some cases, erroneously paid beginning April 2009. The system was fixed on April 1, 2010.

No action is required on your part. HP is reprocessing the affected claims. Voids and resubmits will appear on *Remittance Advice Details* (RADs) beginning May 27, 2010. Voids of previously paid claims will display RAD code **826: Claim void due to related claim(s) previously reimbursed** and Claim Control Number (CCN) prefix **013977**. Resubmits will show CCN prefix **013955**.

The recoveries are authorized under the provisions of *Welfare and Institutions Code* (W&I Code), Sections 14176 and 14177, and *California Code of Regulations* (CCR), Title 22, Section 51458.1(a)(1). In addition, the W&I Code sections authorize the Department of Health Care Services (DHCS) to enter into repayment agreements with providers or offset overpayments against amounts due. If the total warrant amount is not sufficient to offset the recovery, the negative balance will be converted to an accounts-receivable transaction and subtracted from future Medi-Cal reimbursements.

If you disagree with any of these adjustments, 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 black ink that reads "Nona Carpenter".

Nona Carpenter
Provider Relations Director

Reference Number: P0013888