



MICHELLE BAASS
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

PROVIDER NAME
ADDRESS 1
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CITY, STATE ZIP

November 17, 2021
NPI # 123456789

Subject: Resubmission of Erroneously Denied Podiatry Services Claims

Dear Provider:

The Department of Health Care Services (DHCS) identified a claims processing issue affecting certain claims for podiatry service billed with CPT codes 11720 (debridement of nail[s] by any method[s]; one to five) and 11721 (debridement of nail[s] by any method[s]; six or more). This issue caused some claims to erroneously deny with one of the following Remittance Advice Details (RAD) codes:

- **0005: The service billed requires an approved TAR.**
- **0376: Billed procedure code does not match TAR (Treatment Authorization Request) procedure code. New claim and/or TAR is required.**

The issue affected claims for dates of service from January 1, 2020, through September 7, 2021.

No action is required on your part. The California Medicaid Management Information System (MMIS) Fiscal Intermediary (FI) will resubmit the affected claims. These resubmissions will appear on RAD forms beginning November 4, 2021, with Claim Control Number (CCN) prefix **130055**.

If you disagree with any of these resubmissions, you may submit a *Claims Inquiry Form* (CIF) within six months of the new RAD date or you may submit an *Appeal Form* within 90 days of the new RAD date. For CIF completion instructions, refer to the *CIF Completion* and *CIF Special Billing Instructions* sections in the appropriate Part 2 manual or on the Medi-Cal Provider website (www.medi-cal.ca.gov). For *Appeal Form* completion instructions, refer to the *Appeal Form Completion* section in the appropriate Part 2 manual or on the Medi-Cal Provider website.

If you have questions regarding these resubmissions, call the CA-MMIS FI Telephone Service Center at 1-800-541-5555, option 5, followed by option 5 or write to the California MMIS Fiscal Intermediary Correspondence Specialist Unit at P.O. Box 13029, Sacramento, CA 95813-4029.

Sincerely,

Cindy Garrett

Cindy Garrett

Director, Provider & Member Services

Gainwell Technologies, on behalf of

California Department of Health Care Services

Reference Number: P43243