



May 11, 2009

Dear Outpatient Hospital Provider,

Subject: Overpaid Claims for CPT-4 Code 90774

EDS, an HP company, has discovered a system error that resulted in the overpayment of claims for procedure code 90774 (therapeutic, prophylactic or diagnostic injection intravenous push, single or initial substance/drug).

Under the terms of a settlement agreement effective July 1, 2001, if there is a Medi-Cal rate in effect for June 30, 2001, outpatient hospital claims are priced at that rate plus a percentage (30 to 43.44 percent). The definition/meaning of code 90774 has changed. The new definition became a Medi-Cal benefit on February 1, 2007. Outpatient hospital claims were erroneously priced at the June 30, 2001 rate left over from the old definition, plus a percentage, rather than at the new rate, with no added percentage. This error was corrected February 13, 2009.

EDS is adjusting the affected claims. These adjustments will appear on *Remittance Advice Details* (RADs) beginning June 4, 2009 with RAD code **0898: Retroactive price correction ortho settlement**.

This recovery is authorized under the provisions of the *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, subject to any repayment agreements. Providers may choose to repay their overpayment balance by check, sent to:

EDS, an HP Company
Attn: Cash Control
P.O. Box 13029
Sacramento, CA 95813-4029

If you disagree with any of these adjustments, you may submit a *Claims Inquiry Form* (CIF) within six months from the new RAD date. For CIF completion instructions, please refer to the *CIF Completion* section and *CIF Special Billing Instructions* section 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: P11080

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