

Important Information about EDS Claims and HealthChoice Providers

As you probably know, Oklahoma State Education Employees Group Insurance Board (OSEEGIB) changed to EDS, the new claims administrator, on January 1, 2009. Since this time, several claims have become backlogged and errors in Explanations of Benefits (EOBs) statements have occurred. Recent news reports have addressed the frequent and extended delays with EDS' reimbursing the healthcare providers. As a result, some providers have begun to require up-front payments from individuals.

All providers of HealthChoice agree to the following when they sign up each year to remain on the provider listing:

HealthChoice network providers are required by the contract to accept the allowed amounts that have been designated for a particular procedure or service that is dictated by the fee schedule. The provider has agreed to accept the HealthChoice fee schedule as the full payment of billed charges. The provider can bill the patient for any copayments, deductibles or coinsurance that is appropriate. Ideally, the provider would need to calculate these amounts through the information available on an Explanation of Benefits or Remittance Advice so that they are accurate in their billing and the member does not make any overpayments to the provider. The provider must refund the member within 30 days from the day of discovery for any overpayments.

If a provider does not agree to accept the co-pay and deductible amount, please report information directly to HealthChoice Provider Relations at 800-752-9475. Provider Relations will contact the provider and remind them of the signed agreement.

For claim information you may call EDS at 800-782-5218 or registrar on line at www.healthchoiceok.com.