



Cotiviti  
Healthcare

# Recovery Auditor for CMS

*-RAC Provider Resources-*



cahaba™





## Disclaimer

This resource is not a legal document. This presentation was prepared as a tool to assist our providers. This presentation was current at the time it was created.

Although every reasonable effort has been made to assure accurate information, responsibility for correct claims submission lies with the provider of services.

Reproduction of this material for profit is prohibited.



<p>Who is Cotiviti?</p> <p>Where do we provide services?</p> 	 <p>What are key timeframes in the audit process?</p> 	 <p>What resources does Cotiviti use to help you, the provider community?</p>
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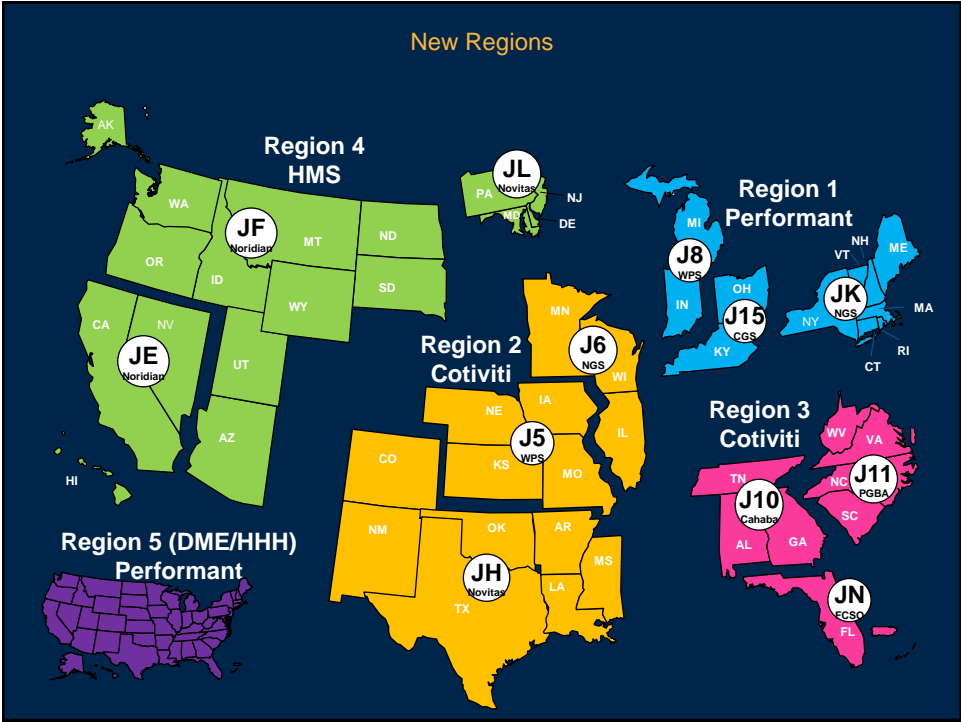
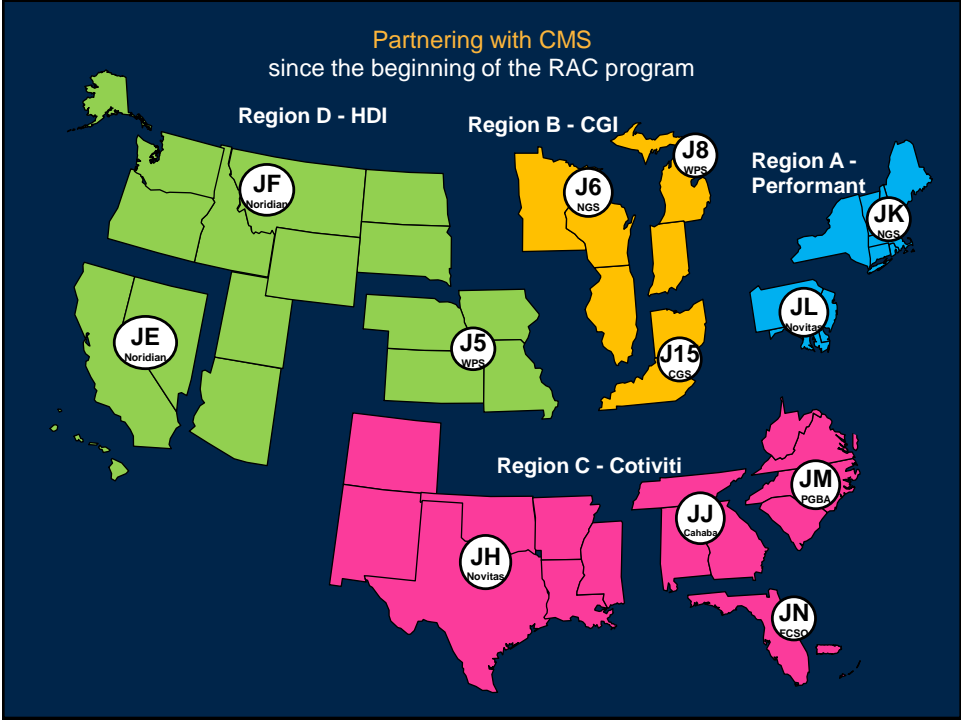
Cotiviti is a healthcare financial services company that provides payment integrity solutions to its government and commercial health plan clients.

Connolly



iHealth Technologies





## Program Enhancements

- Complex review timeframe reduced to 30 days.
- 30 day waiting period before sending the claim for adjustment.
- Confirm receipt of Discussion Request or other correspondence within 3 days.
- Broaden review topics to all provider types.
- Required review on CMS referrals.
- RACs required to maintain:
  - Accuracy rate of at least 95%
  - Appeal overturn rate of less than 10% at the first level
  - Includes incentive fee options

## Program Enhancements

(continued)

### Request Limits

- Revised Additional Documentation Request (ADR) Limits for institutional providers.
- CMS calculates the limits – not the RACs.
- Diversified proportionally across all claim types of a facility (e.g., inpatient, outpatient).
- Incrementally applied limits for providers new to RAC reviews.

## Program Enhancements

(continued)

- Adjusted based on a provider's compliance with Medicare rules.
- Low denial rates = lower ADR limits; High denial rates = higher ADR limits.
- Denial rate is reset with new contracts; CMS may grant exceptions.
- RACs can choose limited or extended look-back period.

## New Contract Implementation

### Administrative

- Joint Operating Agreements, Security testing, Data transmission.

### CMS Issue Approval

- More comprehensive approvals across RACs.
- CMS and RACs will post an approval list.

### Provider Outreach

- In progress.

### Review timeline will vary

- RACs will provide notice.

## Additional Program Detail

### RAC Program website:

[Go.cms.gov/RAC](http://Go.cms.gov/RAC)

### RAC Program email:

[RAC@cms.hhs.gov](mailto:RAC@cms.hhs.gov)

### Cotiviti Provider Service:

[Cotiviti.com/RAC](http://Cotiviti.com/RAC)

RACInfo@Cotiviti.com

866-360-2507



CMS RAC  
Provider  
Resources

[www.Cotiviti.com/RAC](http://www.Cotiviti.com/RAC)

**Cotiviti**

[Cotiviti Healthcare](#)
[Connolly](#)
[About Cotiviti](#)
[Investors](#)
[Careers](#)
[Contact us](#)

CMS RAC  
Provider  
Resources

**Provider Portal Login**

With the provider portal you can:

- Check your claim review status [a.a/?](#)
- View results
- Update Contact Information
- Export data



**NEW TO WORKING WITH COTIVITI?**  
Visit our [Welcome page](#).

**HOW TO**

- [Use the Provider Portal  
Logging in & navigation](#)
- [Submit Documentation  
Methods & formatting requirements](#)
- [Submit a Discussion Request or Peer-to-Peer Review  
Fillable Discussion Request Form](#)

**CONTRACT UPDATES**

**Most recent update: 11/18/2016**  
**CMS has awarded the new Recovery Audit Contractor (RAC) contracts.**  
Cotiviti was awarded 2 regions - Region 2 which includes the following states: IL, MN, WI, NE, IA, KS, MO, CO, NM, TX, OK, AR, LA, and MS; and Region 3 which includes the states of AL, FL, GA, NC, SC, TN, VA, WV, Puerto Rico and U.S. Virgin Islands. [Click here](#) to see the actual CMS publication. Cotiviti will perform post-payment review to identify and

CMS RAC  
Provider  
Resources

**Provider Portal Login**

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Cotiviti is a leading provider of healthcare solutions and will continue to be focused on our core business day or less.

**Connolly Health Technologies Changes Name to Cotiviti**

**HOW TO**

- [Use the Provider Portal  
Logging in & navigation](#)
- [Submit Documentation  
Methods & formatting requirements](#)
- [Submit a Discussion Request or Peer-to-Peer Review  
Fillable Discussion Request Form](#)
- [Update Your Contact Information - Individual Provider  
Address, fax, email, contact of record](#)
- [Update Your Contact Information - Multi-Provider  
Address, fax, email, contact of record](#)

This spreadsheet can be opened using Microsoft Excel or Open Office. For a free download of Open Office [Click Here](#)

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We will continue to post additional information on this site as we work with CMS on the implementation timeline.

[Click here](#) to see a description of your Recovery Audit contract modifications, and their effective date(s).

Review your Contract Information - PDF Download  
Address, fax, email, contact of record

This spreadsheet can be opened using Microsoft Excel or Open Office. For a free download of Open Office Click Here

**KNOWLEDGE BASE**  
[Approved Issues](#) *All CMS-approved reviews by type & state*  


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[RAC Frequently Asked Questions](#) *Thorough answers to quick questions*  


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[Sample ADR](#) *Additional Documentation Request from Cotiviti Healthcare*

PIP Frequently Asked Questions  
For Periodic Interim Payment providers

**Additional Information**  
[CMS Manuals](#)  
[Council for Medicare Integrity](#)  
[Medicare Coverage Database](#)  
[Medicare FAQ](#)  
[Recovery Audit Program Overview](#)

**CONTACT US**  
**Provider Service**  
 (866) 360-2507  
[RACInfo@Cotiviti.com](mailto:RACInfo@Cotiviti.com)  
 (inquiries only, no medical documentation)  
 Provider Service Specialists are available Monday through Friday from 8:00am to 6:30pm EST excluding Federal Holidays  
 Fax: (203) 549-8995

**Mailing Address**  
 Cotiviti - CMS Recovery Audit  
 Spring Mill Corporate Center  
 Suite 6125  
 555 E. North Lane  
 Conshohocken, PA 19381

**Program Oversight**  
 Cotiviti CMS Recovery Audit  
 Recovery Audit Program Overview



**THIS LIST INCLUDES ALL CMS-APPROVED AUDIT ISSUES.** Cotiviti RAC Approved  
 Issues as of 05/19/2016 (PDF Version)

PAGE < 1 2 3 4 5 6 7 ... 86 >

Issue Name	Review Type	Claim Type	Region and States	Date Approved	Details
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Review your Contract Information - PDF Provider  
 Address, fax, email, contact of record


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**KNOWLEDGE BASE**  
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[Sample ADR](#)   
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**Program Oversight**  
 Cotiviti CMS Recovery Audit  
 Program Oversight



Recovery Auditor for CMS



Month DD, YYYY

**Additional Documentation Request**

A B C Provider  
 Attn: Contact  
 Medical Center Drive  
 Po Box 999999  
 Somewhere, WV 26505

Re: A B C Provider – PROV#

Dear Medicare Provider,

The Centers for Medicare & Medicaid Services (CMS) has retained Cotiviti Healthcare to carry out the Recovery Audit Contractor (RAC) program. The RAC program, mandated by Congress, is aimed at identifying Medicare improper payments.

This notice is to request documentation for the claim(s) shown in the enclosure.

In accordance with 42 USC 1320(c) (5) (A) (3) and §1833 of the Social Security Act, you must provide documentation upon request to support claims for Medicare services. This request is in compliance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule, which allows release of information without explicit patient consent for treatment, payment and health care operations.

All documentation should be submitted to Cotiviti according to the enclosed instructions **within 45 days of the date of this request**. Your response is required even if you are unable to locate the requested documentation.

You will be reimbursed for the cost of providing copies of the additional documentation for inpatient hospital claims only. Payment will be issued to you within 45 days of Cotiviti receiving the requested documentation. It will be in the amount of

SAMPLE



Recovery Auditor for CMS



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**SUBMISSION INSTRUCTIONS**

Please submit the following applicable components of the medical record and/or other documentation you deem appropriate to support payment of the claim(s) listed below.

- Face sheet
- Discharge summary
- History & Physical
- Emergency Room records
- All nursing notes
- ER nursing notes
- Consultations
- Physician orders
- Therapy Treatment Plans

- Physician progress notes
- Laboratory reports
- Radiology reports

SAMPLE

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**MAIL**

Cotiviti recommends the use of a trackable method of mail submission, and accepts deliveries from all carrier services. To avoid unnecessary denials based on non-receipt of documentation, please follow these instructions:

- No staples. However, you may use paperclips and/or rubber bands to organize the record(s).
- A copy of this letter should be the first document in your submission.
- If there are multiple claims in the request, a separator must be used in between the documentation for each. The following are the instructions for that separator:
  - Use the appropriate page from the claim listing as a separator.
  - Simply copy the page, place an 'X' in the empty box in the left margin that corresponds with the claim number, and use that as a coversheet for that claim's documentation.
  - If you are submitting one record that applies to multiple claims in this request, you may place an 'X' in multiple boxes for the corresponding claim numbers.

**Cotiviti Healthcare**  
 Spring Mill Corporate Center; Suite 6125  
 555 E. North Lane  
 Conshohocken, PA 19428



	Claim ID#	Medicare	Plan ID#	Medicaid	Member	Print COI#	Med. List Num
<input type="checkbox"/>	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

**REMINDER:** A copy of this request letter must be submitted as the first page accompanying your documentation. If the request is for multiple claims, simply place an 'X' in the empty box in the left margin that corresponds with the claim number, and use that as a separator/coversheet for that claim's documentation. See instructions on Page 2 for more detail.

This screenshot shows the CMS RAC Provider Resources page. A green arrow points from the 'REVIEW BASE' section to a white contact information box on the right. The contact box contains the following text:

**CONTACT US**  
**Provider Service**  
(866) 360-2507  
[RACInfo@Cotiviti.com](mailto:RACInfo@Cotiviti.com)  
(inquiries only, no medical documentation)

Provider Service Specialists are available Monday through Friday from 8:00am to 6:30pm EST excluding Federal Holidays

Fax: (203) 529-2995

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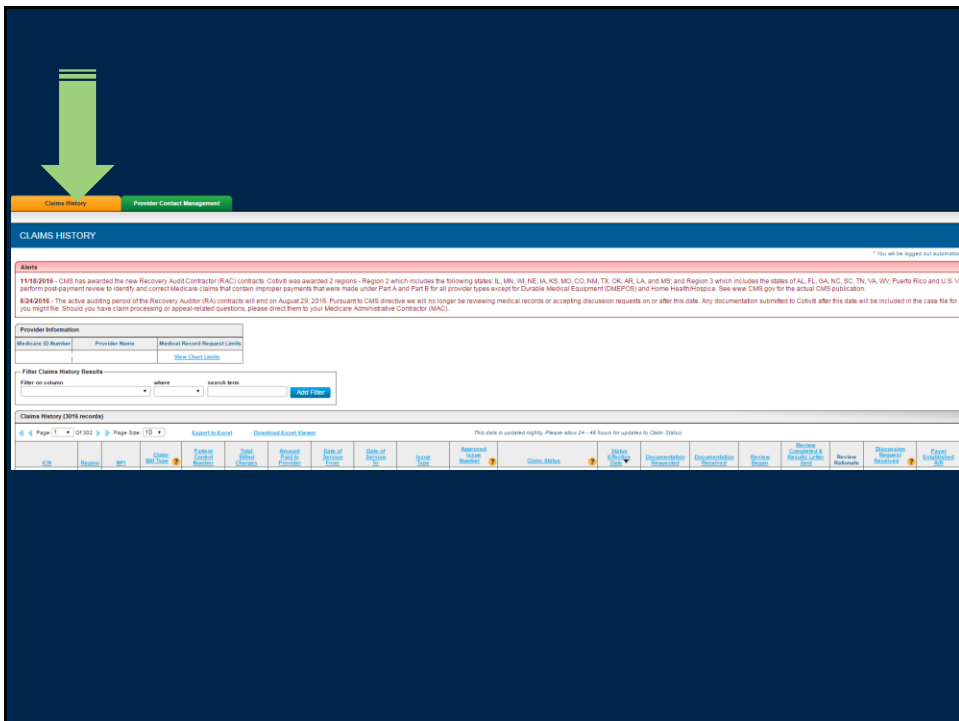
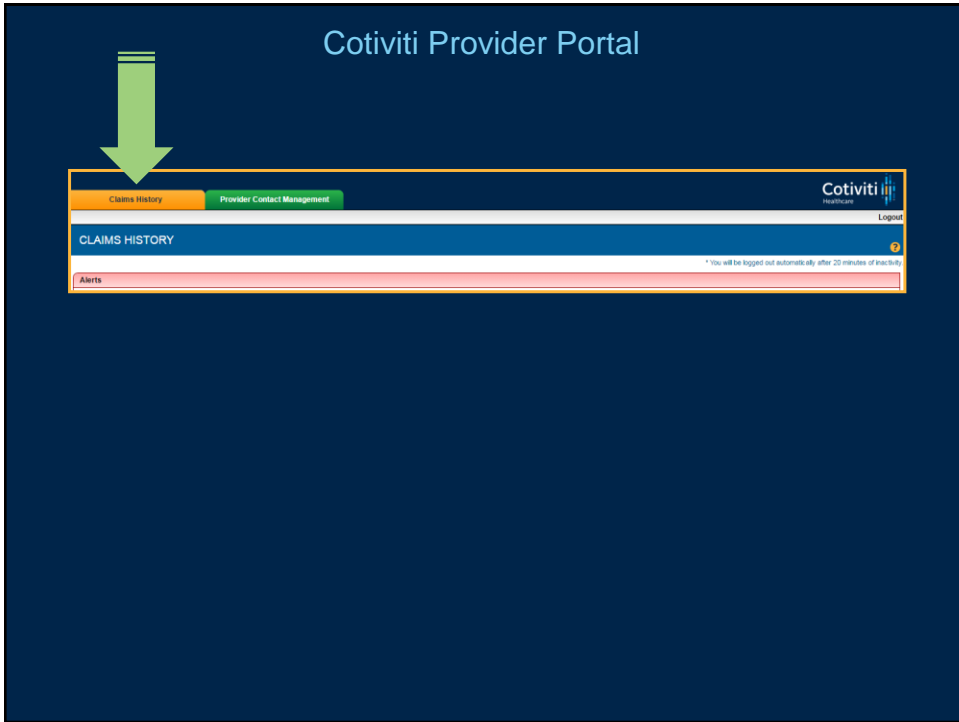
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**Program Oversight**  
Cotiviti CMS Recovery Audit  
Program Director - Region 2  
Kenneth Turturro  
Vice President  
[kturturro@cotiviti.com](mailto:kturturro@cotiviti.com)

The main page content includes sections for 'REVIEW BASE' (CMS-approved reviews by type & state), 'GETTING HELP' (Help, My Questions, Answers to quick questions), 'SUBMIT DOCUMENTATION' (Request from Cotiviti Healthcare, Answered Questions, Payment providers), 'CLAIMS INFORMATION' (Tracking, My Claims, My Claims History), and 'CONTACT US' (Phone, Email, Fax).

This screenshot shows the CMS RAC Provider Resources page with a large green '24/7 x 365' overlay. The page features the following sections:

- Provider Portal Login** (highlighted in orange):
  - With the provider portal you can:
    - Check your claim review status 24/7
    - View results
    - Update Contact Information
    - Export data
- ALERTS AND NEWS**: Includes a section for 'CMS RAC Provider Resources that are active 24/7 x 365' and a link for 'Release of information for CMS Recovery Audit'.
- HOW TO**: Includes links for 'Use the Provider Portal', 'Logging in & navigation', 'Submit Documentation', 'Methods & formatting requirements', and 'Submit a Dispute/Request'.



Claims History    Provider Contact Management

### CLAIMS HISTORY

\*This will be triggered and submitted

**Alerts**

11/18/2016 - CMS has awarded the new Recovery Audit Contractor (RAC) contracts. Cobv8 was awarded 2 regions - Region 2 which includes the following states: IL, MN, WI, NE, IA, KS, MO, CO, NM, TX, OK, AR, LA, and MS, and Region 3 which includes the states of AL, FL, GA, NC, SC, TN, VA, WV, Puerto Rico and U.S. VI perform post-payment review to identify and correct Medicare claims that contain improper payments that were made under Part A and Part B for all provider types except for Durable Medical Equipment (DMEPOS) and Home Health/Hospice. See www.CMS.gov for the actual CMS publication.

8/24/2016 - The active auditing period of the Recovery Auditor (RA) contracts will end on August 29, 2016. Pursuant to CMS directive we will no longer be reviewing medical records or accepting discussion requests on or after this date. Any documentation submitted to Cobv8 after this date will be included in the case file for you might file. Should you have claim processing or appeal-related questions, please direct them to your Medicare Administrative Contractor (MAC).

**Provider Information**

Medicare ID Number:    Provider Name:    Medical Record Request: [View Chart Links](#)

**Filter Claims History Results**

Filter on columns:    where:    search:    [Add Filter](#)

**Claims History (2016 records)**

This data is updated nightly. Please allow 24-48 hours for updates to Claim Status.

SN	Region	MD	Claim #	Claim #/Type	External Contract Number	Top Billing Contract	Payment Period or Period	Date of Service	Date of Service to	Issue Type	Response Status	Claim Status	State Change	Disposition/Resolution	Disposition/Resolution	Review Status	Review Comments	Discussion Request Received	Event/Resolution
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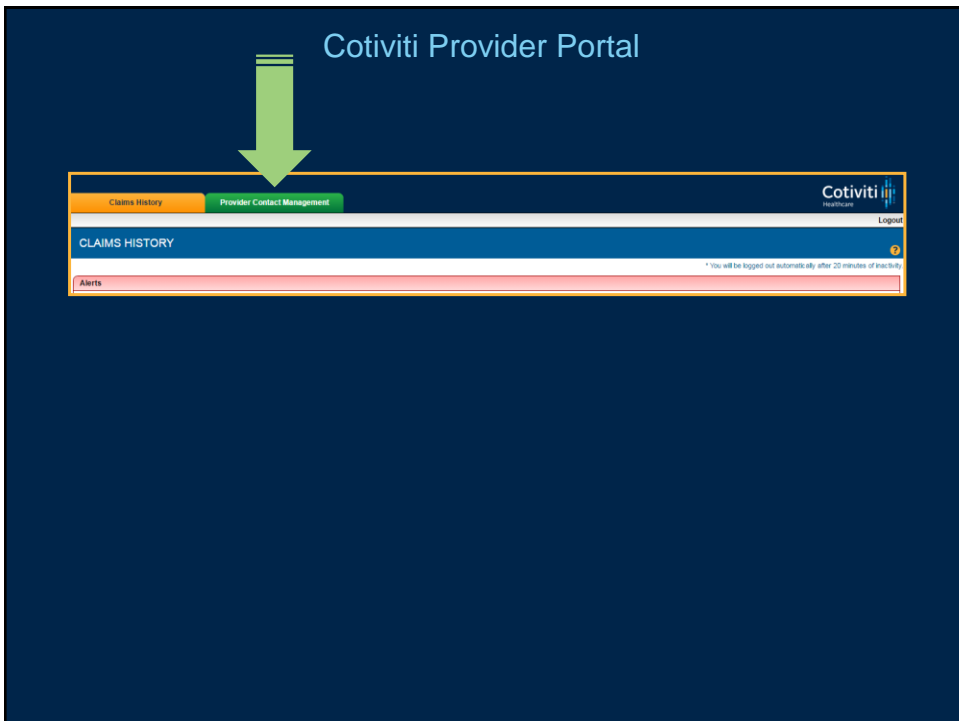
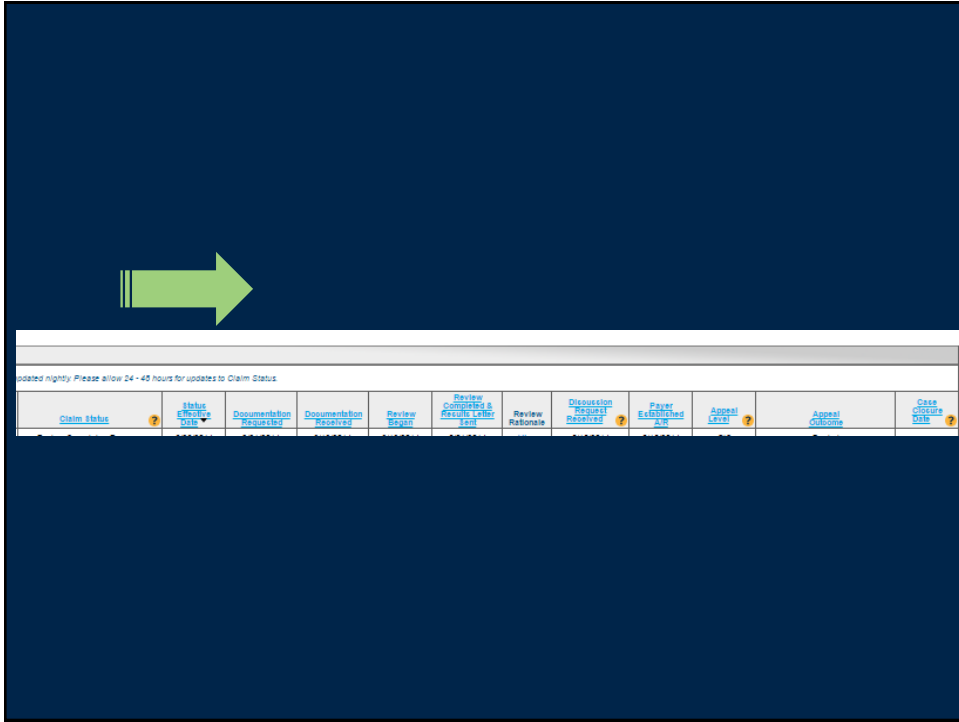
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Claims History Provider Contact Management

### PROVIDER CONTACT MANAGEMENT

**Provider Information**

Medicare ID Number	Provider Name	Medical Record Request Limits
		<a href="#">View Chart Limits</a>

**Address Information**

**Medical Records:** This is where the initial Additional Documentation Request (ADR) is mailed, and the specific contact (if you choose) for that correspondence.  
**Finance:** This is where review results, reimbursement checks, and any other review-related correspondence is mailed.  
**Discussion Response:** This is where the discussion results will be mailed (unless you indicate otherwise on the Discussion Request Form). If a fax transmission fails three times, our Response will be mailed to the Finance address.

**Provider Contact Information**

Type	Name	Title	Address	City	State	Zip Code	Telephone	Fax	Email	Change Status	Act
Medical Record											Act
Finance											Act
Discussion Response											Act

CMS,IMAC,Phosion | RAC Toll Free # 866.360.2507

Claims History Provider Contact Management

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**Provider Information**

Medicare ID Number	Provider Name	Medical Record Request Limits
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**Filter Claims History Results**

Filter on location:  Match on:

**Claims History (2016 records)**

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ID	Status	Act	Claim #/Type	Submit Date/Status	Final Review/Status	Payment Final/Amount	Date of Review/Date	Date of Review/ID	Issue/Type	Response/Status	Claim Status	State/ID	Disposition/Status	Disposition/Status	Recall/Status	Review/Status	Review/Status	Discussion/Status	Payment/Status



Provider Service  
[www.Cotiviti.com/RAC](http://www.Cotiviti.com/RAC)  
866-360-2507