

# Clinical Chart Validation (CCV) Retrospective Clinical Audits (RCA)

## Provider Frequently Asked Questions ("FAQs")

**Prepared for: Jefferson Health Plans**

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**Frequently Asked Questions (FAQ) for Provider Inquiries  
Cotiviti Clinical Chart Validation (CCV) and Retrospective Clinical Audits (RCA)**

Provider Inquiries	Answers
<b>1. General Information</b>	
1.1 What is Cotiviti?	Cotiviti is a nationwide healthcare payment accuracy company specializing in the review of inpatient facility claims. Jefferson Health Plans has contracted with Cotiviti to provide post-payment DRG (Diagnosis Related Group) validation with medical record review and Observation Short stay (OBV/OBS/SS) reviews and Retrospective Claims Audits (RCA) Incl. Data Mining and Coordination of Benefits.
1.2 If I have questions about the <b>CCV</b> or <b>RCA</b> audits, who do I call?	For CCV please contact Cotiviti Provider Services at 1-770-379 - 2019 - Monday through Friday from 8:00 am to 5:00 pm EST.  For RCA please contact Cotiviti Provider Services at 1-470-857-7984 - Monday through Friday from 8:00 am to 5:00 pm EST.
1.3 I did not receive a copy of the <b>CCV</b> or <b>RCA</b> audit correspondence, or it has been misplaced. How can I obtain a copy?	For CCV please contact Cotiviti Provider Services at 1-770-379 - 2019 and they will mail you a copy of the correspondence via US Mail.  For RCA please contact Cotiviti Provider Services at 1-470-857-7984 - Monday through Friday from 8:00 am to 5:00 pm EST.
<b>2. Medical Record Requests</b>	
2.1 How will I receive medical record requests from Cotiviti?	Fax or US Mail
2.2 How can I submit medical records to Cotiviti?	CCV Records may be submitted to Cotiviti via multiple channels: Provider Portal ( <a href="https://Providerconnection.cotiviti.com/">https://Providerconnection.cotiviti.com/</a> ) using the request ID (RID) on the letter – preferred Fax US Mail/UPS/FedEx  Per your initial Provider Outreach letter RCA records can be sent via <a href="http://www.submitrecords.com">www.submitrecords.com</a> , secure fax or US Postal service, otherwise follow the direction on your letter.
2.3 Can I mail medical records to Cotiviti?	Records may be mailed via United States Postal Service, UPS, or FedEx. <b>Cotiviti or Jefferson Health Plans will <u>not</u> reimburse the cost of expedited mailing services.</b>
2.4 Can I fax medical records?	You may fax the medical records for CCV to 1-800-273-9095. This fax is in a HIPAA-secure location.  You may fax medical records for RCA to 1-800-355-6234. This fax is in a HIPAA-secure location.
2.5 Can I send medical records on a CD/DVD?	Yes, Cotiviti accepts Medical Records on a CD/DVD or on paper. If the CD is encrypted and password protected (recommended) please contact Cotiviti Retrieval Operations Center at 1-833-931-1789 to provide the password.

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<p>2.6 Will Cotiviti accept medical records via a document management clearinghouse?</p>	<p>Yes, if contracted with a clearinghouse that sends records to approved Business Associates, Cotiviti is authorized by Jefferson Health Plans to accept records from that entity.</p>
<p>2.7 Where do I mail <u>medical records</u> for CCV?</p>	<p>Cotiviti- 6440            10701 S Riverfront Pkwy            Box 12017            South Jordan, Utah 84095            Or            Cotiviti- 6440            731 Arbor Way            Box 12017            Blue Bell, PA 19422</p>
<p>2.7b Where do I mail <u>medical records</u> for RCA?</p>	<p><u>Medical records</u> should be sent to one of the Cotiviti mail centers at:            Cotiviti - Suite # 7025            731 Arbor Way, Box 12019            Blue Bell, PA 19422            Or            Cotiviti - Suite # 7025            66 E. Wadsworth Park Dr., Box 12019            Draper, UT 84020</p>
<p>2.8a Do I need to send the entire medical record for a claim for <b>CCV</b>?</p>	<p>Cotiviti requests medical record documents needed for accurate reviews:</p> <ol style="list-style-type: none"> <li>1. DRG Coding Summary</li> <li>2. Discharge Summary and Instructions</li> <li>3. History and Physical</li> <li>4. Progress Notes and Doctor's Orders</li> <li>5. Consult Notes</li> <li>6. Lab Records</li> <li>7. Radiology Records</li> <li>8. Vital Sign Flowsheet</li> <li>9. Medication Administration Record (MAR)</li> <li>10. Emergency Department Physician Record</li> <li>11. Physician Queries</li> <li>12. Operative Report</li> <li>13. Ventilator Record</li> <li>14. Observation Records</li> <li>15. Case Management/Social Worker/Utilization Review Notes</li> <li>16. Authorization</li> </ol> <p>However, if the requested information does not support reimbursement for the claim, please send any additional information necessary to support the claim as originally submitted.</p>

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<p>2.8b Do I need to send the entire medical record for a claim <b>for RCA?</b></p>	<p>Cotiviti requests the minimal records needed for review:</p> <ol style="list-style-type: none"> <li>1. Physician and nursing orders and progress notes</li> <li>2. Treatment administration record</li> <li>3. Procedure and surgical report(s)</li> <li>4. All ancillary reports and records (lab, radiology, operative, pathology, anesthesia, etc.)</li> <li>6. Medication record</li> <li>7. Copy of the Uniform Billing Form (UB 92 or UB04)</li> <li>8. Line itemized bill detail supporting billed charges to</li> <li>9. include procedure, revenue code nomenclature, date of</li> <li>10. service, units of service and charges</li> <li>11. Medication Administration Record (MAR)</li> <li>12. Detailed written order, Proof of Delivery</li> <li>13. Dispensing Records (amount of medication/supplies</li> <li>14. sent out to patient/home infusion therapy per-diem</li> <li>15. visits)</li> <li>16. Delivery Tickets</li> <li>17. Nuclear Medicine Flow Sheet – Radiology Report –Nuclear Procedure Report</li> <li>18. Hyperbaric Records</li> <li>19. Transfusion Records</li> <li>20. Wholesalers Invoice</li> </ol> <p>However, if the requested information does not support reimbursement for the claim, please send any additional information necessary to support the claim as originally submitted.</p>
<p>2.9 What if I need more time to send the requested medical records?</p>	<p>For CCV - If there are extenuating circumstances, please contact Cotiviti Provider Services at 1-770-379-2019 Monday thru Friday from 8:00 am to 5:00 pm EST or email <a href="mailto:iCRS.Provider@cotiviti.com">iCRS.Provider@cotiviti.com</a>. We will review requests for additional time on a case-by-case basis.</p> <p>For RCA - If there are extenuating circumstances, please contact Cotiviti's Retrieval Operations Center at 1-833-931-1789, Monday to Friday from 8:00 am to 8:00 pm EST. We will review requests for additional time on a case-by-case basis.</p>
<p>2.10 What if I miss the deadline for submitting the medical records?</p>	<p>You should send the medical records to Cotiviti even if the deadline has passed, and the audit will be conducted. Failure to submit the requested medical records may result in an administrative claim denial, and recoupment of claim payments.</p>
<p>2.11 What happens to the medical records at Cotiviti?</p>	<p>All Cotiviti medical record handling is HIPAA compliant and secure. Records uploaded to the portal – the image gets attached to the claim. The original paper copies are securely destroyed after 30 days and CDs after 60 days.</p>

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<p>2.12 We would like medical record requests sent to a different name or address at our organization. How do we request this?</p>	<p>For address changes, it is preferred that it be submitted in writing via fax or US mail. Please see the last page for the Template for Medical Records and Determination Letter Address Update Requests. However, a call to Cotiviti's retrieval operation center at 1-833-931-1789, is acceptable as well.</p>
<p><b>3. Audit Determinations</b></p>	
<p>3.1 What happens after Cotiviti receives our medical records?</p>	<p>Cotiviti reviews the claim and the medical records to assess the coding and DRG assignment, Observation visit. An Audit Determination Letter is mailed to the Provider after the requested medical records are received and the audit results in a change finding.</p>
<p>3.2 What coding references are used for Cotiviti audit determinations?</p>	<p>Cotiviti audits are based upon national correct coding standards in the ICD-10-CM/PCS Official Guidelines for Coding and Reporting. These guidelines have been approved by the organizations that make up the Cooperating Parties for ICD-10-CM/PCS: the American Hospital Association (AHA), the American Health Information Management Association (AHIMA), The Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). These guidelines are interpreted in the ICD-10-CM/PCS Coding Clinic published by the AHA. Medical necessity reviews reference nationally recognized guidelines such as InterQual® Guidelines for Acute Care: Adult and Pediatrics and MCG (previously known as Milliman Care Guidelines).</p>
<p>3.3 When does Cotiviti inform Jefferson Health Plans of the audit results?</p>	<p>Jefferson Health Plans is notified of new audit results on a weekly basis.</p>
<p>3.4 What if I disagree with the audit determination?</p>	<p>If you disagree with the determination, you may submit a Request for Appeal or request for reconsideration to Cotiviti, following the instructions in the audit letter received. Appeals or reconsiderations must be submitted to Cotiviti in writing via fax or US mail, <u>with additional documentation</u> to support the request.</p>
<p>3.5 If a claim was not correctly coded and I agree with the audit determination, should I send a refund or corrected claim to Cotiviti?</p>	<p>If Provider agrees with the audit determination, sign, and return the audit determination letter to Cotiviti. Jefferson Health Plans will be notified of your agreement and will apply a payment adjustment in accordance with the audit results.</p>
<p>3.6 What if I do not respond to a change determination?</p>	<p>If no response is received, Jefferson Health Plans assumes you agree with the audit determination and applies a payment adjustment.</p>
<p>3.8 We would like Audit Determinations sent to a different name or address at our organization. How do we request this?</p>	<p>All address changes must be submitted in writing via email or US mail. Cotiviti will verify the information with Jefferson Health Plans and will then make corrections in the Cotiviti system. Please see the last page for the Template for Medical Records and Determination Letter Address Update Requests.</p> <p>However, for CCV a call to Cotiviti's Provider Services on 1-770-379-2019 is acceptable. For RCA call 1-470-857-7984</p>

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3.9 Inquiry on claim status?	<p>If you would like to inquire on the claim status/audit results, please login and review claim via CCV <a href="#">Cotiviti   Payment Clarity</a> or contact Cotiviti Provider Services at 1-770-379 -2019.</p> <p>For RCA inquiries call 1-470-857-7984</p>
<b>4. Requests for Appeal (Appeal)</b>	
4.1 Does Cotiviti handle <u>Appeal</u> or <u>RFR's</u> ?	<p>Yes, Cotiviti handles CCV Appeals and RFR's (Requests for Reconsideration) for Jefferson Health Plans. Appeals should be sent to:</p> <p style="text-align: center;">Cotiviti C/O Cotiviti- 6440 731 Arbor Way Box 12017 Blue Bell, PA 19422</p>
4.2 Can I fax an <u>Appeal</u> to Cotiviti?	<p>Yes, for CCV you may fax your Appeal <u>with supporting documentation</u> to 1-203-423-1874. This fax is in a HIPAA-secure location.</p> <p>For RCA you may fax your Appeal or RFR <u>with supporting documentation</u> to 1-800-355-6234. This fax is in a HIPAA-secure location.</p>
4.3 What is the time frame for appeal to be submitted?	Jefferson Health Plans policy requires a written Appeal with supporting documentation within 30 days of the audit determination letter. Cotiviti will respond with an Appeal response.
4.4 What happens if I do not submit an Appeal or RFR within the specified time frame?	If you do not submit an Appeal within the specified time frame, Jefferson Health Plans assumes you agree with the audit determination and will adjust the claim payment. If an Appeal is received after the specified time frame, the original audit determination is upheld.
4.5 What if I disagree with the Appeal determination?	<p>Jefferson Health Plans allows for a second Appeal. If you disagree with the first Appeal, please follow instructions for second Appeal as outlined in the first Appeal response letter. Cotiviti will issue a decision within 30 calendar days after the date they receive your request. Unfavorable decisions will have a clinical peer review between the Medical Directors of Cotiviti and the Provider</p> <p>No further review will be accepted by Cotiviti. However, if you disagree with the second appeal response you may submit an appeal to Jefferson Health Plans within 30 days for IRO review.</p>


### Quick Reference to Cotiviti CCV Audit Letters

Letter Name	Time Frame for Response (calendar days)	Description
Medical Records Request	30 Days	Initial Medical Record Request letter. The Provider has 30 days to send the records to Cotiviti.
Medical Records Request – Second and Final Notice	15 Days	Second and final request for Medical Records. The Provider has an additional 15 days to send the records to Cotiviti.
Audit Determination – Change	30 days	Letter sent to the Provider when Cotiviti determines a change. The Provider has 30 days to agree with the Change or to file a written request for Appeal (Appeal). If the Provider fails to respond after this deadline, Jefferson Health Plans assumes the Provider agrees with the audit determination and adjusts the claim payment.
First Appeal Response - Upheld	30 days	Letter sent to the Provider when Cotiviti upholds the original Audit Determination. If the Provider fails to respond after 30 days, Jefferson Health Plans assumes the Provider agrees with the first Appeal response and adjusts the claim payment. If an Appeal is received late, the request is not considered, and the prior audit determination is upheld.
First Appeal Response - Overturned	30 days	Letter sent to the Provider when Cotiviti overturns the original audit determination and agrees with the coding submitted by the Provider. This typically occurs when the Provider submits additional information with the dispute request. No further action is required by the Provider.
First Appeal Response - New Determination	30 days	Letter sent to the Provider when Cotiviti makes a new determination based on information submitted by the Provider during the Appeal process. If the Provider fails to respond after 30 days, Jefferson Health Plans assumes the Provider agrees with the response and adjusts the claim payment.
Second Appeal Response - Upheld	30 days	Letter sent to the Provider when Cotiviti upholds the first Appeal response.
Second Appeal Response - Overturned	30 days	Letter sent to the Provider when Cotiviti overturns the first Appeal response and agrees with the coding submitted by the Provider. This typically occurs when the Provider submits additional information with the Appeal. No further action is required by the Provider.
Second Appeal Response - New Determination	30 days	A letter is sent to the Provider when Cotiviti makes a new determination based on information submitted by the Provider during the Appeal process.
Third Appeal	30 Days	For an unfavorable decision on the second appeal request, Providers may submit an appeal to Jefferson Health Plans for IRO review.

Quick Reference to Cotiviti RCA Audit Letters		
Letter Name	Time Frame for Response (calendar or postmark days)	Description
Provider Outreach Request Authorization Letter	30 days	Initial outreach request letter to Provider from Cotiviti to supply medical records.
RCA Audit Determination Offset Only Letter	30 days	Letter sent to the Provider outlining the claims that Cotiviti records indicate have been overpaid.
Cotiviti_RCA_Recon_Overturned	30 days	Letter sent to the Provider when Cotiviti overturns the original overpayment determination.
Cotiviti_RCA_Recon_Upheld_Offset_Only	30 days	Letter sent to the Provider when Cotiviti upholds the overpayment determination after first reconsideration is upheld.

## Provider Contact Information for Cotiviti CCV Audits

Electronic Letters				
<p>For providers to register for electronic letters, please send request to <a href="mailto:ProviderConnectionLetters@cotiviti.com">ProviderConnectionLetters@cotiviti.com</a></p> <p>Please provide the following information on the email:</p> <ol style="list-style-type: none"> <li>1. Provider Name</li> <li>2. NPI Numbers associated with provider</li> <li>3. Name of Health plans associated with: (for example: Wellcare)</li> <li>4. Email address</li> <li>5. Contact Name</li> <li>6. Contact Phone number (including ext. if required)</li> <li>7. Are you using the CCV Provider Connection Portal today? Yes or No (<a href="https://www.providerconnection.cotiviti.com">https://www.providerconnection.cotiviti.com</a>)</li> <li>8. Would you be interested once this is turned on to eventually shut off your paper letters that are sent to you today?</li> </ol>				
Medical Record Request Submissions, Preferred Delivery Method, and Extension Requests				
Submission Option 1	Option 2	Option 3	Option 4	Extension Request
Upload via secure portal: <a href="https://Providerconnection.cotiviti.com/">https://Providerconnection.cotiviti.com/</a>	Fax: 1-800-273-9095	Cotiviti- 6440 10701 S Riverfront Pkwy Box 12017 South Jordan, Utah 84095 Or Cotiviti- 6440 731 Arbor Way Box 12017 Blue Bell, PA 19422	Call for other options: 1-833-931-1789	Call: 1-770-379-2019

Appeal Submissions and Extension Requests			
Submission Option 1	Option 2	Extension Request Option 1	Option 2
Mail: Cotiviti C/O Cotiviti – 6440 731 Arbor Way, Box 12017 Blue Bell, PA 19422	Fax: 1-203-423-1874	Call: 1-770-379 -2019	Email: <a href="mailto:iCRS.Provider@cotiviti.com">iCRS.Provider@cotiviti.com</a>
Address Updates			
Medical Record Request Letters	Call: 1-833-931-1789	 Address_Update_Sheet.xlsx	
Audit & Appeal Letters	Call: 1-770-379 -2019		
Inquiries for Claim Status/General Questions			
Option 1	Option 2	Option 3	
<a href="#">Cotiviti   Payment Clarity</a>	Phone: 1-770-379 -2019	Email: <a href="mailto:iCRS.Provider@cotiviti.com">iCRS.Provider@cotiviti.com</a>	

## Contact Information for Cotiviti CCV Audits

### VP Audit Operations

**Contact Name: Stephanie Barr**

Phone: 1-203-202-6244

Email: [stephanie.barr@cotiviti.com](mailto:stephanie.barr@cotiviti.com)

### Cotiviti CCV Provider Services

**Hours: Monday – Friday, 8:00 am – 5:00 pm EST**

Phone: 1-770-379 -2019

Fax: 1-203-423-1874

### Cotiviti CCV Retrieval Operations Center

**Hours: Monday – Friday, 8:00 am – 8:00 pm EST**

Phone: 1-833-931-1789

Fax: 1-800-273-9095

### Medical Record Submission

Cotiviti- 6440

10701 S Riverfront Pkwy

Box 12017

South Jordan, Utah 84095

Or

Cotiviti- 6440

731 Arbor Way

Box 12017

Blue Bell, PA 19422

### Requests for Appeal

Cotiviti

C/O Cotiviti- 6440

731 Arbor Way  
Box 12017  
Blue Bell, PA 19422

**CCV Client Services Manager**

**Rhonda Ryan**

Email: [rhonda.ryan@cotiviti.com](mailto:rhonda.ryan@cotiviti.com)

**Contact Information for Cotiviti RCA Audits**

**Director Audit Operations – Pharmacy**

**Contact Name: Paul Saxon**

Phone: 1-203-202-6345

Email: [paul.saxon@cotiviti.com](mailto:paul.saxon@cotiviti.com)

**Director Audit Operations – Data Mining**

**Contact Name: Lindsey Clary**

Phone: 1-203-423-1438

Email: [lindsey.clary@cotiviti.com](mailto:lindsey.clary@cotiviti.com)

**Cotiviti RCA Provider Services**

**Hours: Monday – Friday, 8:00 am – 5:00 pm EST**

Phone: 1-470-857-7984

Fax: 1-203-423-1874

**Cotiviti RCA Retrieval Operations Center**

**Hours: Monday – Friday, 8:00 am – 8:00 pm EST**

Phone: 1-833-931-1789

Fax: 1-800-355-6234

**Medical Record Submission**

Cotiviti - Suite # 7025

731 Arbor Way, Box 12019

Blue Bell, PA 19422

Or

Cotiviti - Suite # 7025

66 E. Wadsworth Park Dr., Box 12019

Draper, UT 84020

**Requests for Appeal**

Cotiviti - Suite # 7025

731 Arbor Way, Box 12019

Blue Bell, PA 19422

**RCA Client Services Manager**

**Jae Pulliam Spencer**

Email: [jae.pulliam@cotiviti.com](mailto:jae.pulliam@cotiviti.com)

**Central Point of Contact, VP Client Engagement Leader**

**Cinda Guagliumi**

Email: [Cinda.Guagliumi@cotiviti.com](mailto:Cinda.Guagliumi@cotiviti.com)