















## **Cross-coder Outpatient Facility CTA Claims**

July 1, 2024

Dear Providers,

Thank you for your continued partnership with SilverSummit Healthplan. As you know, we are committed to continuously evaluating and improving overall Payment Integrity solutions as required by State and Federal governing entities. As a reminder, we have partnered with Optum who is supporting us in performing prepayment claim review. The purpose of our review is to verify the extent and nature of the services rendered for the patient's condition and that the claim is coded correctly for the services billed.

For claims received on or after \*8/5/2024\*, providers my experience a slight increase in written requests for medical record submission prior to payment based on the areas outlined below. These requests will come from Optum and will contain instructions for providing the documentation. Should the requested documents not be returned, the claim(s) will be denied. Providers will have the ability to dispute findings through Optum directly in the event of a disagreement.

Editing Area	Description	Lines of Business
Cross-coder Outpatient Facility CTA Claims	The review ensures the facility claim is appropriately coded based on documentation and what is submitted on the professional claim.  Currently facilities are billing claims that have the same patient and same date of service, but the procedure codes do not match the referenced provider claims for a CT/CTA exam. This review will identify procedure code mismatches for CT/CTA exams on the same patient with the same date of service.	Medicaid, Medicare, Marketplace

Associa Code fo	Description
EXbo	DENY: MEDICAL RECORDS AND/OR OTHER SERVICE
	DOCUMENTATION REQUIRED

Thank you for your continued participation and cooperation in our ongoing efforts to render quality health care to our members. We look forward to helping you provide the highest quality of care for our members.

Thank you,

SilverSummit Healthplan