PROVIDER BULLETIN PROVIDER INFORMATION



December 12, 2017

Cotiviti to Perform Inpatient Claim Reviews

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) has engaged Cotiviti Healthcare (Cotiviti) to verify the accuracy of DRG payments as a supplementary review for our contracted facilities on inpatient claims. This verification will ensure high accuracy in claims processing and assure payments were applied in accordance with national correct coding standard rules.

Cotiviti will utilize Blue Cross's post-payment provider claim data to perform the reviews and in some cases, medical records will be requested from providers to complete the reviews.

If claims are selected for review, a letter will be sent from Cotiviti requesting medical records on behalf of Blue Cross.

Cotiviti reviews use industry standard ICD-10 coding references, as well as evidence based clinical literature to validate the accuracy of the conditions and procedures coded on a hospital claim.

The review of selected claims and associated medical record is anticipated to commence March 1, 2018.

Questions?

If you have questions, please contact provider services at (651) 662-5200 or 1-800-262-0820.