

# Special Bulletin

Updated June 13, 2024

For facility providers

May 13, 2024

## Additional Documentation Required for Quality Improvement Organization Audits

The Centers for Medicare and Medicaid Services (CMS) is requiring that insurers, including Highmark, collect additional documentation from facilities for Quality Improvement Organization (QIO) Program audits, **effective January 1, 2024**.

For these audits, facilities will now be required to submit the following forms:

- Notice of Medicare Non-Coverage (NOMNC)
- Detailed Explanation of Non-Coverage (DENC)

**UPDATE:** Completed forms should be faxed to Highmark at this number: **888-740-4318**.

### Background

The QIO Program — one of the largest federal programs dedicated to improving health quality for Medicare beneficiaries — is an integral part of the U.S. Department of Health and Human Services' National Quality Strategy for providing better care and better health at lower cost.

For more information about the QIO Program, go [here](#).

The following entities, which serve the noted regions, are independent licensees of the Blue Cross Blue Shield Association: Western and Northeastern PA: Highmark Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Choice Company, Highmark Health Insurance Company, Highmark Coverage Advantage Inc., Highmark Benefits Group Inc., First Priority Health, First Priority Life or Highmark Senior Health Company. Central and Southeastern PA: Highmark Inc. d/b/a Highmark Blue Shield, Highmark Benefits Group Inc., Highmark Health Insurance Company, Highmark Choice Company, or Highmark Senior Health Company. Delaware: Highmark BCBSD Inc. d/b/a Highmark Blue Cross Blue Shield. West Virginia: Highmark West Virginia Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Health Insurance Company, or Highmark Senior Solutions Company. Western NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield. Northeastern NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Shield.

All references to "Highmark" in this document are references to the Highmark company that is providing the member's health benefits or health benefit administration and/or to one or more of its affiliated Blue companies.

