Important Provider Notice

HIGHMARK WHOLECARE

Date: May 2023

Cotiviti Claims Pattern Review (CPR)

Dear Provider:

In the coming weeks, Highmark Wholecare will enhance its existing claim editing program to broaden the overall accuracy and integrity of our claims processing. Please review the information below regarding upcoming changes.

To enhance the accuracy and timeliness of claims processing, Cotiviti Claims Pattern Review (CPR) will be implemented. CPR will enable efficient Payment Policy Management and review of claims while utilizing "real time" analytics. CPR will have the ability to pause claims processing and enable Cotiviti CPR experts to review claims for proper validation prior to payment.

As part of this process, registered nurses with coding certifications will review claim data in conjunction with patient claim history to validate appropriate claims processing. Guidelines and policies will be utilized to ensure correct coding and payment accuracy. Payment validation determinations will be consistent with the American Medical Association (AMA) Current Procedural Terminology (CPT), Coding with Modifiers manuals (published by the American Medical Association), ICD 10, HCPCS, and the Correct Coding Initiative (CCI), CMS claims processing manuals (published by the Centers for Medicare & Medicaid Services) and other state and federal regulations.

Highmark Wholecare is committed to assisting you navigate through this new process. Further information regarding the program will be made available prior to implementation. Upon the implementation of this enhanced editing process, appeals will be accepted and considered with appropriate medical records and documentation. If you have any questions, please do not hesitate to contact customer service. Thank you.

Health benefits or health benefit administration may be provided by or through Highmark Wholecare, coverage by Gateway Health Plan, an independent licensee of the Blue Cross Blue Shield Association ("Highmark Wholecare")