Claim Pattern Review Program for Professional Claims

Effective July 1, 2025, HAP will implement a claim pattern review program to conduct ongoing reviews of specific professional claims. This program will focus on:

- Claims with unusual coding utilization patterns
- Coding mismatches
- Billing activities that deviate from billing patterns of similar specialties

This new program affects claims for the following lines of business: HAP Commercial, HAP Medicare Advantage, ASO, and Alliance Health and Life.

We have partnered with Cotiviti for this program. Cotiviti will send a letter to practices to be included in this review requesting medical records and information to support specific claims, including, but not limited to:

- Office/progress notes/treatment records/procedure notes/surgical notes
- Medication list and administration records
- All clinical documentation by the treating provider that supports diagnosis/condition and CPT/HCPCS code billed
- Provider orders/prescriptions
- All test results/interpretations
- PCP referrals
- Consultation reports
- Patient health history/screening questionnaires
- Clinical Laboratory Improvement Amendments (CLIA) certification for lab tests performed in-office as well as identification of who performed the lab tests
- All documentation to support services billed

Cotiviti will perform a prepayment review to help ensure that the claim coding/billing is appropriate and supported by the medical record and other documentation. Certified coders and nurses will review claim data alongside patient claim history to ensure proper claims processing. To validate coding accuracy and payment integrity, their evaluations will follow industry-standard guidelines, including: AMA CPT codes, ICD-10, HCPCS, CCI, CMS processing manuals, and relevant state and federal regulations.

If requested medical record information is not received within 60 days of Cotiviti's initial request, claims will be denied. Late records will not be reviewed, and the claim will remain denied.

HAP will finalize, and review claims based on Cotiviti's recommendations

If you receive a letter from Cotiviti and have questions regarding the medical record information requested, please contact Cotiviti at **1-833-931-1789**, weekdays, between 8:30 a.m. and 7:30 p.m., Eastern Time.