



## **Network Notification**

**Notice Date:** July 12, 2019  
**To:** Ohio Providers  
**From:** CareSource  
**Subject:** Post-Payment Audit Update

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### **Summary**

As communicated in January via a [network notification](#), CareSource has contracted with third party vendors to conduct periodic reviews of certain inpatient claims to validate diagnosis and procedure coding, subsequent Diagnosis Related Group (DRG) assignment, place of service assignment and payment accuracy. The post-payment audits began May 2019 and we are providing you more details about the audit process.

### **Impact**

Claims that have been selected for an audit will receive a Medical Record Request Letter. The complete medical records are requested for this review and must be supplied within 30 days of the date of this letter.

### **Importance**

Response to a Medical Record Request Letter within 30 days would be greatly appreciated. If we do not hear from you within 20 days, a second request letter could be sent. No response after the second request will lead to recoupment of funds.

Medical records should be sent to the address that is listed on the Medical Record Request notification.

Once the documentation is received and the review is completed, you will receive a determination letter. If an overpayment is identified the letter will outline next steps, including information regarding your appeal rights.

### **Questions?**

For questions about this topic, please contact CareSource Provider Services at **1-800-488-0134**.

OH-SP-0226