



Activ News

May 8, 2023

ActivHealthCare has received the following Provider Notification from Absolute Total Care regarding Ambetter:



Healthy Connections 

Absolute Total Care Provider Notification

Absolute Total Care is committed to continuously improving its overall payment integrity solutions to prevent overpayments due to waste or abuse. This is a notification that we will begin performing additional prepayment claim reviews on **6/1/2023** using Optum's Comprehensive Payment Integrity (CPI) tool. As a result of these prepayment claim reviews, providers may be asked for medical records and billing documents that support the charges billed.

Absolute Total Care utilizes widely acknowledged national guidelines for billing practices and supports the concept of uniform billing for all payers. These prepayment claim reviews will look for overutilization of services or other practices that directly or indirectly result in unnecessary costs. A provider's order must be present in the medical record to support all charges, along with clinical documentation to support the diagnosis and services or supplies billed.

The provider will receive detailed instructions about how to submit the requested documentation. Providers who do not submit the requested documentation may receive a technical denial, which will result in the claim being denied until the information required to adjudicate the claim is received.

If it is determined that a coding and/or payment adjustment is applicable, the provider will receive the appropriate claim adjudication. Providers retain their right to dispute results of reviews.

Please contact your Provider Services representative if you have any questions.

Thank you for your partnership.

Sincerely,
Absolute Total Care

From ActivHealthCare:

Because Ambetter is a national product, this Provider Notification may apply to more than just South Carolina, therefore, we are notifying all Providers in our network.

ActivHealthCare is not familiar with the CPI tool being implemented. We have asked for clarification on how this will be applied and were told the reviews will be random and will not happen on every claim. We have also been told it will apply to all medical specialties, not just chiropractors.

The language in all insurance plans limits coverage to services, which are medically necessary for the treatment of an injury or illness. The contracts between insurance companies, patients and network providers give the insurance payors the right to request medical records to determine only medically necessary services were rendered.

This announcement does not implement prior authorization changes, it is simply a formal notification to our members that Ambetter will be using Optum's CPI tool as of June 1st to review claims. As a result of this change, you may receive requests for medical records on patients covered under Ambetter plans.

The best course of action for Providers is to be sure you are documenting your services properly in your treatment notes, be sure your claims are correct and make sure the diagnosis pointers on the claim forms are correct. In other words, just keep doing things right like you have been.

If you have any questions, please feel free to reach out to ActivHealthCare. The best way to contact us is through the Contact Us option at www.ActivHealthCare.com.

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