



Claim Audit Change Creates Faster Provider Payments

UnitedHealthcare Community Plan of Wisconsin currently holds claim payments while MedReview, Inc, our medical records review administrator, requests medical records. This has proven to delay claim payments and increased the potential for claims adjustments.

Effective June 6, 2015, MedReview will audit your Diagnosis Related Group (DRG) claims on a retrospective basis. This means MedReview will request and review your claims **after** UnitedHealthcare Community Plan pays the claim. Therefore, you will receive the initial payment faster.

MedReview will request medical records within one month of UnitedHealthcare Community Plan of Wisconsin claim payment. You are required to send the records to MedReview within 47 business days of request receipt. If you do not send the records, you may not have an opportunity to appeal.

MedReview will review the claim then send you an initial determination letter. The determination letter from MedReview will provide appeal directions. You will have 60 calendar days to appeal. UnitedHealthcare Community Plan will adjust the claim **only** after the appeal timeframe has expired **and** if MedReview determines the medical record(s) does not support the submitted DRG.

All DRG reviews by MedReview are performed in accordance with applicable state or federal Medicaid laws or regulations. If you have any questions, please contact your hospital facility advocate. Thank you.