

Providing CHIP and Medicaid services to Tarrant, Denton, Parker, Wise, Hood and Johnson

What's Inside

Notice of Recoupment
for an Overpayment
Related to an Electronic
Visit Verification (EVV)
Visit Transaction

Notice of Recoupment
for an Overpayment
Related to an Electronic
Visit Verification (EVV)
Visit Transaction Due to
the Discovery of Fraud
or Abuse

Notice of Recoupment for an Overpayment Related to an Electronic Visit Verification (EVV) Visit Transaction

Effective June 17, 2021 when auditing a Provider or a FMSA, Cook Children's Health Plan will limit the review of EVV visit transactions to those that occurred during the twenty-four (24) months prior to the audit.

If a deficiency is identified the Provider or FMSA will receive written notice of the intent to recoup no later than the 30th day after the date the audit is completed.

The written notice will include:

- A description of the basis for the intended recoupment
 - The specific EVV visit transaction and associated claim
 - The claim for which there is no associated EVV visit transaction
- The specific number of days allowed to correct and explain the deficiency before the health plan begins to collect the overpayment
 - Appeals must be received within thirty (30) days from the date of notice
 - Collections would begin sixty (60) days from the date of notice
- The process to communicate with the health plan
- The option to seek an informal resolution with the health plan
- The health plan's appeal process

The Provider or FMSA may submit an appeal or informal resolution via email to CCHPEVV@cookchildrens.org.

- The following must be included:
 - The subject of the email should be "Recoupment Appeal"
 - The email must include an explanation for each deficiency identified by the health plan
 - All relevant supporting documentation for each audit finding

Note: A corrected deficiency is one that a Provider or FMSA makes by doing one or both of the following:

- Performing visit maintenance to correct an EVV visit transaction in accordance with HHSC EVV policy
- Correcting and resubmitting a claim in accordance with TMHP and CCHP guidelines
 - Corrected claims must be received within 95 days of the date of service and identified as a corrected claim

Cook Children's Health Plan will:

- Recoup an overpayment only if a Provider or FMSA:
 - Does not correct the deficiency
 - Does not appeal the alleged overpayment
 - Appeals the alleged overpayment and the final decision from the appeal is favorable to health plan
- Notify the Provider or FMSA of the decision via email

Notice of Recoupment for an Overpayment Related to an Electronic Visit Verification (EVV) Visit Transaction Due to the Discovery of Fraud or Abuse

Effective June 17, 2021, if Cook Children's Health Plan seeks to recoup payment secondary to a discovery of fraud and abuse the health plan will issue written notice to the Provider or FMSA.

If a deficiency is identified the Provider or FMSA will receive written notice of the intent to recoup no later than the 30th day after the date the audit is completed.

The written notice will include:

- A description of the basis for the intended recoupment
 - The specific claim associated with recoupment
- The process to communicate with the health plan
- The option to seek an informal resolution with the health plan
- The health plan's appeal process

Cook Children's Health Plan will:

- Recoup an overpayment only if a Provider or FMSA:
 - Does not appeal the alleged overpayment
 - Appeals the alleged overpayment and the final decision from the appeal is favorable to health plan
- Notify the Provider or FMSA of the decision via email

The Provider or FMSA may submit an appeal or informal resolution via email to CCHPEVV@cookchildrens.org.

- The following must be included:
 - The subject of the email should be "Recoupment Appeal"
 - The email must include an explanation for each deficiency identified by the health plan
 - All relevant supporting documentation for each audit finding