

Section	Question	Answer
General Information	Who is Cotiviti?	Cotiviti is under contract with the Veterans Health Administration Office of Community Care (OCC) as a Recovery Audit Contractor.
General Information	What is Recovery Audit Contract (RAC)?	Recovery Audit Contract, or RAC, is an audit performed to review payments made by the Office of Community Care (OCC) to determine the accuracy and recover improper payments.
General Information	II egal Allthority for Recovery	Public Law No: 116-117 (03/02/2020), Payment Integrity Information Act of 2019
General Process	Who do I contact if the Recovery Audit Contractor identifies an improper payment that has previously been collected?	If a Provider receives a Notice of Indebtedness (NOI) on an overpayment previously collected or reimbursed, please contact Cotiviti Provider Service at 855-287-1667 Monday – Friday between the hours of 9:00 am - 8:00 pm EST Providers will be asked to provide evidence of a previously reimbursed debt such as a copy of the cancelled check.
General Process	How will I be notified if the Recovery Audit Contractor identifies an improper payment?	The provider will receive a Notice of Indebtedness (NOI) directly from the VA. The NOI will contain a Notice of Rights and Responsibilities (NRR). Providers should read both documents carefully and thoroughly as they contain important information regarding repayment of the debt.
General Process	Am I able to dispute a Notice of Indebtedness (NOI)?	Yes. Providers will receive instruction via the Notice of Indebtedness (NOI)/Notice of Rights and Responsibilities (NRR) letters on how to initiate a dispute of findings.
General Process	Do I have the right to an appeal based on a 1 st level dispute decision?	Yes. Once a 1 st level dispute has been decided, Providers will receive written notification of the decision which will contain information on how to initiate the 2 nd level appeal, if they are still in disagreement with the findings.
General Process	What is a clinical review?	A clinical review is an assessment by a qualified clinician of supporting medical documentation to evaluate the validity and accuracy of claims submitted by a provider.
General Process	What does a provider do if they receive another provider's medical documentation request letter?	Cotiviti makes every effort to ensure medical documentation requests are sent to the appropriate provider. If a provider received a request for medical documentation addressed to another provider, they should contact Cotiviti Provider Services at 855-287-1667 Monday – Friday between the hours of 9:00 am - 8:00 pm EST.
Review Type	What is the "look-back" time frame for the recovery audit?	The Recovery Audit Contract (RAC) will review claims paid by the Office of Community Care from FY18 (10/1/2017-9/30/2018) through FY23 (10/1/2022-9/30/2023).
Review Type	Will the recovery audit contract (RAC) identify underpayments?	During reviews, if an underpayment is identified by Cotiviti, the information will be handed over to the VA for further review and appropriate action.
Review Type	Who do I contact if I have been underpaid or have questions about the status of a payment?	If a provider feels they have been underpaid on a claim, or has questions regarding the status of a payment, they should contact the Office of Community Care (OCC) Customer Service Center. For questions related to Veteran Care in the Community contact 877-881-7618, Monday — Friday, between the hours of 8:00 am - 9:00 pm EST. For questions related to CHAMPVA contact 800-733-8387, Monday — Friday, between the hours of 8:05 am - 7:30 pm EST.



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	What types of recovery audit contract (RAC) reviews are there?	 Cotiviti may perform different types of reviews to identify potential overpayments, including: Automated Reviews - Used when improper payments can be clearly and unambiguously identified from claim data elements and established policies and regulations, without examining medical records. Complex Reviews - Used when data analysis identifies a potential improper payment that cannot be validated through data elements and established policy and regulations alone. This type of review requires the examination of medical records and may have medical record or other information requests associated with them.
Data and Claim Reviews	What types of improper payments will Cotiviti be identifying?	Cotiviti will review paid claim data received from the Office of Community Care (OCC) for overpayments. The review will include, for example, claim reimbursement rates, reimbursement of non-covered or unauthorized services, incorrectly coded services, and duplicate services.
Data and Claim Reviews	What determines whether an automated or complex review is performed?	The type of review is determined by the claim type and audit plan. All audit plans Cotiviti develops must first be approved by the Office of Community Care and will be posted on Cotiviti's Recovery Audit Contract (RAC) provider website (www.cotiviti.com/varac) for a 30-day comment period. Once the audit plan receives final approval, it will be posted to www.cotiviti.com/varac prior to Cotiviti initiating an audit.
Letters	What do I do when I receive a letter from Cotiviti?	Providers are strongly encouraged to respond to any correspondence timely by submitting all supporting documentation or requested information within 30 days of receipt of a letter.
Letters	Who do I contact if I have a question or concern on a recovery audit contract (RAC) improper payment finding?	All questions regarding improper payment findings should be directed to Cotiviti Provider Services at 855-287-1667 Monday – Friday between the hours of 9:00 am - 8:00 pm EST.
Medical Records	How long does Cotiviti have	In virtually all circumstances, Cotiviti will complete review of medical records or additional information within 45 days.
	Will I be reimbursed for the cost of producing or mailing the medical records or other request information?	Providers will not be reimbursed any costs associated with the production or mailing of medical records or other requested information.
Medical Records	What are my options for sending medical records or other requested information?	Currently, all requested documents must be sent via first class US mail or commercial carrier (e.g., FedEx) to Cotiviti at the address listed on the letter you received. Cotiviti and the VA are working to establish the capability to upload medical documentation or other requested information through the Provider Portal. Providers will not be reimbursed for any expenses related to production or mailing of medical records.
Medical Records	What happens if I do not submit the requested medical records?	Providers are strongly encouraged to provide all requested medical documentation or other information within 30 days from date of receipt of the letter. Failure to supply the requested medical documentation or other information may result in a finding of unsubstantiated services resulting in a recommendation to recoup the payment.



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	I previously sent the medical	
Medical	documentation to the VA.	Cotiviti will only request medical records when the records are not
Records	Why is it being requested by Cotiviti?	available in the VA system or the available records are incomplete.
	Couvius	The Notice of Indebtedness (NOI) and Notice of Rights and
		Responsibilities (NRR) will contain all the information
		regarding repayment of the debt. Providers should ensure
Payment	How do I make a payment?	that they are remitting payment in accordance with the
ayment	now do i make a payment:	NOI and NRR. Providers should <i>not</i> make payment to the
		local VA Medical Center, the VA Medical Center that
		authorized the care or to Cotiviti.
		The Notice of Rights and Responsibilities (NRR) contains
1		information on alternative repayment options as well as
		the contact phone number to request an alternative
İ	How do payment plans	repayment option. Providers interested in alternative
Payment	work?	payment arrangements should make the request as early
		as possible. Depending on the type of alternative payment
1		option requested, providers will be asked to provider
		documentation (e.g., financial statement).
	What if I disagree with the	Providers are encouraged to read the Notice of Rights and
Payment	outcome of an appeal and	Responsibilities (NRR) and understand the result of non-
	fail to make repayment?	payment of an identified debt.
		The Notice of Indebtedness (NOI) and Notice or Rights and
		Responsibilities (NRR) will contain all necessary information on how to
	Whore do I cond my	remit payment. Providers are strongly encouraged to follow the
Collections	Where do I send my	directions exactly. If there are questions about the remittance process,
	payment?	please contact Cotiviti at 855-287-1667 Monday – Friday between the
		hours of 9:00 am - 8:00 pm EST.
		Cotiviti does not handle collections. Please do not send
		checks to Cotiviti, the local VA Medical Center or to the VA
	Do I need to submit my	Medical Center that authorized the care. The Notice of
Collections	payment to Cotiviti or a copy	Indebtedness (NOI) and Notice of Rights and
	of my payment to Cotiviti?	Responsibilities (NRR) will include all information on how
		and where to remit repayment.
<u> </u>	Can the local VA Medical	and where to remit repayment
	Center or Office of	No. All questions regarding the recovery audit contract
	Community Care (OCC)	(RAC) findings are handled by Cotiviti. Providers with
Collections	Customer Service assist me	questions about the RAC findings should contact Cotiviti
	with questions about the	Provider Service at 855-287-1667 Monday – Friday
	1	between the hours of 9:00 am - 8:00 pm EST.
	findings?	•
Collections	What if I am approved for a	If a provider has been approved for a payment plan, they
	payment plan but have	will be provided with all the information regarding
	issues in making an	amounts due, due dates of payments, and a contact
	installment payment?	number in case of questions.
Miscellaneous	If I have questions about the	No. Any questions about the recovery audit contract (RAC)
	recovery audit contract	should be directed to Cotiviti Provider Services at 855-287-
	(RAC), should I contact the	1667 Monday – Friday between the hours of 9:00 am - 8:00
	local VA Medical Center?	pm EST.



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Miscellaneous	What information can I access in the Cotiviti Provider Portal?	The following information is available in the Cotiviti Provider Portal: Copies of requests for medical records, notifications of receipt of medical records, status of claim reviews, tracking of correspondence received such as additional documentation request letters, dispute letters and appeal letters. Providers are encouraged to familiarize themselves with the Provider Portal as it contains information and resources to assist in the process and answer frequently asked questions.
Miscellaneous	medical documentation is	Cotiviti is required by the VA to send medical documentation or other information requests to the provider address associated with the payment. If a provider does not house medical records in their office, they are responsible for obtaining the medical records or ensuring that the request is forwarded to and processed by office/department that houses medical documentation on your behalf.
Miscellaneous	How do I track the status of the medical records I have sent to Cotiviti?	Providers can check on the status of medical records through the Provider Portal located at www.cotiviti.com/varac, or by calling Cotiviti Provider Services at 855-287-1667 Monday – Friday between the hours of 9:00 am - 8:00 pm EST.
Miscellaneous	web portal?	Issues could be caused by the user browser or user account. Browser issue: The recommended browsers are Google Chrome, Microsoft Edge and Mozilla Firefox. User Account: If a user password is forgotten/invalid, user can choose the 'forgot password' path to initiate a password reset. If the user account/e-mail is no longer valid/not working, the user should contact Cotiviti Provider Services at 855-287-1667 Monday – Friday between the hours of 9:00 am - 8:00 pm EST.
Miscellaneous	How will I know what issues the Recovery Auditor is reviewing?	Cotiviti will receive approval from OCC on the preliminary audit plan. Cotiviti will post the preliminary audit plan on the Provider Portal for no less than 30 days for public review and comment. After the 30-day comment period, Cotiviti and OCC will review and address comments as appropriate. The final audit plan will be posted to the Provider Portal prior to Cotiviti beginning any audit.