

July 1, 2014

ClaimCheck Version 54 Upgrade Effective August 1, 2014

HealthKeepers, Inc. is upgrading to version 54 of ClaimCheck® 10.1, a nationally recognized code auditing system, for its Medicaid line of business. Changes included in the upgrade are effective **August 1, 2014**. There is no action required on your part. This notification is for your information only.

Background information on ClaimCheck

HealthKeepers, Inc. uses the auditing software product from McKesson to reinforce compliance with standard code edits and rules. Additionally, ClaimCheck increases consistency of payment to providers by ensuring correct coding and billing practices are being followed. Using a sophisticated auditing logic, ClaimCheck determines the appropriate relationship between thousands of medical, surgical, radiology, laboratory, pathology and anesthesia codes and processes those services according to industry standards.

Why are we making this change?

ClaimCheck is updated periodically to conform to changes in coding standards and include new procedure and diagnosis codes.

HealthKeepers, Inc. uses ClaimCheck to analyze outpatient services, including those that are considered:

- Rebundled or unbundled services
- Multichannel services
- Mutually exclusive services
- Incidental procedures
- Inappropriately billed medical visits
- Fragmented billing of pre- and postoperative care
- Diagnosis to procedure mismatch
- Upcoded services

Other procedures and categories that are reviewed include:

- Cosmetic procedures
- Obsolete or unlisted procedures
- Age/sex mismatch procedures
- Investigational or experimental procedures
- Procedures billed with inappropriate modifiers

For more information

If you have questions about this communication, received this fax in error or need assistance with any other item, please contact us at 1-800-901-0020.