



## LCU Process for Reviewing Paid Claims

- Each month the local coordinator will receive the available paid claims report from the Data Manager.
- Paid claims are reviewed to make sure that the health care facility/provider has been reimbursed for covered services as are listed on the What's Covered *Women's Way* CPT Code Medicare Part B Rate List and payment has not been made for noncovered services.
- Blue Cross Blue Shield member services should be contacted at 844-363-8457 to request refund of payment for noncovered services if the payment was for more than \$100. For any amount for \$100 or less, a refund should not be requested.
- Check to see if you have an Intake and Visit form, Office Visit report or diagnostic form for all claims paid by *Women's Way*. Also make sure that the client was active during the time the screening or diagnostic services were provided.
  - If you do not have documentation of services or procedures that are listed on paid claims, call the health care provider, or your contact at the health care facility to get the results, or send an Intake and Visit form or Diagnostic form to the health care provider to be completed.
  - For unique circumstances in which a client has a procedure that does not have a covered CPT or diagnosis code but you think the service should be paid for, contact the *Women's Way* state office to see if payment can be provided from another source of payment.
- If you have a question as to why a procedure code was not paid for, refer to the Reject code and Description columns on the Paid Claims report or call Blue Cross Blue Shield member services. If CPT code was a payable code, it could be due to the diagnosis code that was used for the service.