



United HealthCare Insurance Company of New York
13 Cornell Road 2nd Floor, Latham NY 12110

March 20, 2019

Office of the State Comptroller
Division of State Government Accountability
Attn: Andrea Inman
110 State Street
Albany, NY 12236

Dear Ms. Inman:

This letter will respond to the Office of the State Comptroller's (OSC) Report entitled Out of Network Providers Upcoding Selected Evaluation and Management Services (2017-S-34).

United Healthcare (UHC) will take the following recommendations from OSC under advisement where UHC is in agreeance with OSC:

1. Improve the monitoring of claims submitted for out-of-network E/M services by supplementing the current peer-to-peer review with an assessment of out-of-network providers who routinely bill the majority of their claims at a higher-level E/M CPT code (such as above 90 percent in an individual E/M category). Conduct reviews of these out-of-network providers to ensure payments reflect the services actually performed and recovery any overpayments identified.
2. Assess the results of our review of the nine out-of-network provider and, where warranted, expand the review of each provider to identify and recover other overpayments, in addition to the \$28,731 identified by our audit.

Recommendation 2 references the review of nine providers, however Table 3 in the report demonstrates that four providers had no financial finding as the services billed were supported. One of the remaining five providers appears to no longer be in business. The remaining four providers were forwarded to Optum for pre-adjudication review.

Please note, UHC continues to disagree with OSC regarding information relevant to table 3 pertaining to provider A. The report references Provider A's ten claims as upcoded. UHC provided detailed industry standard coding information to support the level of service billed by provider A. The coding guidelines and claims in question were reviewed by UHC utilizing Certified Professional Coders (CPC's), one of whom is a Registered Nurse (RN, BSN, CPC, CPMA). OSC provided no supportive documentation that would discredit the industry standard guidelines or how UHC CPC's utilized the information to support the consideration of the claims in question from Provider A as billed.

UHC's position was shared under separate cover prior to the release of OSC's report dated December 31, 2018, which related to the specific cases and findings along with the supporting documentation. UHC understands that OSC did not utilize CPC's to review the records provided by practitioners. The report indicated that OSC conducts their performance audit in accordance with GAGUS. UHC would draw attention to 6.12 (d) from the Yellow Book:

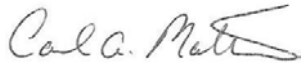
6.12 During planning, auditors should also

d. assign sufficient staff and specialists with adequate collective professional competence and identify other resources needed to perform the audit;

In regard to the above excerpt, CPC's are utilized within the health insurance industry to perform appropriate coding of medical billing, and additionally utilized to determine the accuracy of billing, yet OSC performed their audit in absence of a CPC.

Thank you for providing us with the opportunity to review and respond to OSC's report regarding the above noted Audit.

Sincerely,



Carl A. Mattson
Vice President, Empire Plan
United Healthcare National Accounts

CC:

Richard M. Maloney, UHC