



Network Notification

Notice Date: July 5, 2019
To: All Marketplace Providers
From: CareSource
Subject: Provider Dispute Process
Effective Date: August 5, 2019

CareSource is instituting a new Payment Dispute Process for Marketplace providers effective Aug. 5, 2019.

Providers must utilize the Payment Dispute Process for claim disputes relating to underpayments or overpayments prior to filing an appeal. Providers must submit a payment dispute within ninety (90) calendar days of claim payment.

This process will enable providers to submit claim payment discrepancies to CareSource for review and investigation.

A provider payment dispute is a written notice from a provider that

- Challenges a request for reimbursement for an overpayment or underpayment of a claim.
- Seeks resolution of a billing determination or other monetary dispute.

The following conditions are not considered Payment Disputes:

- Submission of a challenge based on a medical necessity denial of pre-authorization.
- Submission of a challenge based on denial of payment in whole or in part.
- Submission of corrected claims.
- Submission of claims for retro review.

The adjustment request must include sufficient documentation to identify each claim in the request. Documentation must be submitted to support the adjustment request. Incomplete submissions will be returned with no further action taken. Disputes requiring additional information will be returned to the provider with a request to submit the documents within ten (10) calendar days.

CareSource will render a Payment Dispute decision letter within thirty (30) calendar days of receipt. If the decision is to uphold the original claim adjudication, providers may still appeal the determination within thirty (30) days.

Dispute forms can be found on [CareSource.com](https://www.caresource.com) > Provider Overview > Tools & Resources > Forms located under the forms page, and can be submitted to CareSource through the following methods:

- Provider Portal: <https://providerportal.caresource.com>
- Fax: **937-531-2398**
- Mail:
CareSource
Attn: Provider Appeals Department
P.O. Box 2008
Dayton, OH 45401