



Cotiviti and Change Healthcare/TC3 Claims Denial Appeal Form

Instructions

- **Only use this form when appealing denials from Cotiviti and Change Healthcare/TC3.** (Otherwise follow the appeals process outlined in our Billing Manual). Note:
 - Cotiviti pre-paid denials start with "K." Example: K12 – Incorrect modifier.
 - Change Healthcare/TC3 denial codes start with "Y." Example: YK9–The modifier is incorrect.
- **Do not** use this form:
 - If your denial does not meet the above criteria
 - For DRG appeals or denials
 - Medical record request denials
- Appeals submitted 60 days after the denial date (found on remittance advice) may not be accepted due to appeals time frame has expired.*
- Include supporting documentation. For example:
 - Chart or office notes; operative notes or surgery notes
 - Invoices
 - Other clinical documentation related to procedure being appealed
 - Any official polices (CMS articles, LCD, NCD, drug manufacturer inserts, etc.)
 - Corrected claim
 - *Proof that appeal was submitted prior to 60-day deadline

Submitting the form

1. Complete all fields below. Incomplete forms will be returned.
2. Save completed form where you can access it to upload.
3. Submit completed form via our online claims appeal application.
 - a. Log in at **hap.org**; select *Claims*.
 - b. Search for claim(s) to be appealed.
 - c. Check the box next to the appropriate line number.
 - d. Select *Appeal*; click the drop-down arrow and choose **Code Editing**.
 - e. Select *Add Attachment*.
 - f. Add completed form and other supporting documentation (see step 4 above)
 - g. Complete required fields. **In the Notes field, be sure to include a detailed reason for the appeal or attach a separate document.**
 - h. When finished, select *Submit*.

Appeal Submit Date:		Remittance Advice date:	
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Provider Information

Provider Name:			
Contact Name:			
Contact Phone:		Contact Email:	

Member/Claim Information

Member Name:		Member HAP ID#	
Claim #:			
Date(s) of Service:			
Procedure Code:			
Denial Code(s):			
HAP assigned s-case number(s), if available			