

February 01, 2023

Overpayment, appeal letters going paperless on May 5

Last modified: March 8, 2023.

Updates: Article was updated to clarify this change applies to medical health care professionals.

Beginning May 5, we'll no longer mail overpayment and appeal decision letters sent directly by UnitedHealthcare* to network medical health care professionals (primary and ancillary) and facilities in the following states:

- Florida
- Kentucky
- Maryland
- Massachusetts
- Minnesota
- Missouri
- New Jersey
- New York
- North Carolina
- Ohio
- Pennsylvania
- Rhode Island
- Texas
- Washington, D.C.

This change applies to UnitedHealthcare Community Plans. Instead, you'll be able to view them digitally 24/7.

Note: Overpayment and appeal letters will continue to be mailed to behavioral health professionals and facilities and home and community based services.

Please share the following changes and digital workflow options with those who are affected, including outside vendors such as revenue cycle management companies.

View overpayment and appeal decision letters 1 of 2 ways

1. **Document Library** in the UnitedHealthcare Provider Portal:

- From any page on UHCprovider.com > Sign In
- Sign in to the portal with your One Healthcare ID and password
 - If you don't have a One Healthcare ID, visit UHCprovider.com/access to get started
- In the menu, select Documents & Reporting > Document Library. Then select one of the following folders:
 - Overpayment Documents folder – Use Advanced Search and search by Check ID or Claim No.
 - Appeals and Disputes folder – Use Advanced Search and search by Member Name, Case ID or Claim No. For letters available after June 30, 2022, you can also search by

Case ID or Claim No. For letters available after June 30, 2022, you can also search by Member ID.

- **Notifications:** When new letters are available in Document Library, an email notification will be sent to the address on file, which is typically the Primary Access Administrator
- **Need to notify multiple staff members?** Document Library notifications are limited to 1 email address per letter type. If multiple staff members require notification, the Primary Access Administrator can consider using a group email address.

[Explore Document Library](#) 

You can also check out the [Paperless Delivery Options Interactive Guide](#)  for information on updating your email notification preferences.

2. Application Programming Interface (API): Consider retrieving overpayment and appeal decision letters through API by automating system-to-system transactions. Data can be distributed to your practice management system or any application you prefer. API requires technical programming between your organization and UnitedHealthcare.

[Learn about API](#)

[Schedule a demo](#)

You can also enroll in Direct Connect to view overpayment letters: This free tool, available in the portal, helps you review and resolve overpaid claims quickly and easily. Use Direct Connect to reduce letters and calls from UnitedHealthcare and additional work with third-party vendors.

Here's how it works:

- All initial overpayment notification letters will post to Document Library
- Subsequent communications, including reminder notifications and disagreements with overpayment findings, will be done via Direct Connect. You can also use the tool to submit refunds.
- To enroll, email directconnectaccess@optum.com. Please include the requestor's name, as well as the organization's tax ID number (TIN), physical address and mailing address.

What's ahead in paperless

We'll continue to transition more claim-related communications to digital in 2023 and 2024.

All required paperless transitions will be announced in [Network News](#) at least 90 days prior to the change. We encourage you to explore our digital solutions and review your workflows so your team is prepared. Review the most up-to-date information, exclusions and schedule at UHCprovider.com/digital.

Questions?

Please contact UnitedHealthcare Provider Services at **877-842-3210**, TTY/RTT **711**, 7 a.m.–5 p.m. CT, Monday–Friday.

* These changes include the following overpayment letters:

- Overpayment identified – Notifying you that UnitedHealthcare paid too much on a processed claim
- Overpayment reconsideration requests – Acknowledging UnitedHealthcare received your request to review our overpayment determination

- Overpayment reconsideration decision – Providing the outcome of the reconsideration review and outlining what happens next

This change includes letters sent by Optum for payment accuracy reviews they perform on behalf of UnitedHealthcare. It does not include overpayment letters sent by any other vendor. Those letters will continue to be mailed. Most will include both the vendor and UnitedHealthcare logos, and explain their review was done on our behalf.

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