

CLOSED AUDIT

Date: <MM/DD/CCYY>

ATTN: <Title>
ATTN: <Dept.>
<PROVIDER NAME>
<ADDRESS1>
<ADDRESS2>
<CITY ST ZIP>

Dear <Provider Name>,

The Department of Veterans Affairs (VA) has retained Cotiviti to reviews claims paid by VA for health care services to ensure the integrity of the payments, including coding validation, reimbursement accuracy, compliance with regulations, policies, contractual requirements, authorizations and utilization standards. The information in this letter is CONFIDENTIAL and may contain protected health information that may only be re-disclosed in accordance with the 45 CFR Parts 160, 162, and 164 (Standards for Privacy of Individually Identifiable Health Information).

This letter is to notify you that the claims on the attached listing, and their associated files, have been closed and the overpayment amount is \$0.00.

If you have any questions, please contact Provider Services at 855-287-1667, Monday through Friday between 6:00 a.m. and 5:00 p.m. PST.

Sincerely,

Cotiviti

Enclosure: Audit Detail