Overpayments Identified by Unified Program Integrity Contractor (UPIC)/ZPIC (Zone Program Integrity Contractor)

1. What are the responsibilities of UPIC/ZPIC?

* An overview of the responsibilities of the UPIC/ZPIC is located in the [Unified Program Integrity Contractor and /Zone Program Integrity Contractors](http://www.novitas-solutions.com/webcenter/portal/MedicareJH/pagebyid?contentId=00008240) document on our website.

1. What are the responsibilities of the Novitas Solutions related to UPIC/ZPIC overpayment activities?
2. Novitas Solutions, a MAC (Medicare Administrative Contractor), performs the non- UPIC/ZPIC Medicare functions such as:

* Completion of claims processing activity to reflect UPIC/ZPIC decisions.
* Generation of overpayment demand letter and accounts receivable functions.
* Completion of redetermination request or first-level appeal on overpayments identified by the UPIC/ZPIC.
* Preparation of case files necessary for a reconsideration or second-level appeal on a previous redetermination involving a UPIC/ZPIC identified overpayment.

1. Why do I receive two separate letters with on overpayment amount? Which letter contains the actual overpayment amount?

* The UPIC/ZPIC generates a letter to the provider detailing the specific findings of their review and the "calculated" overpayment amount. Novitas Solutions generates the demand letter with the valid overpayment amount, repayment information and appeal rights. The provider has 120 days from the date of the demand letter sent by Novitas Solutions to submit a redetermination request.

1. What is the difference between a UPIC/ZPIC claim-by-claim overpayment and an overpayment based on a Statistically Valid Random Sample (SVRS)?

* The UPIC/ZPIC determines based on the audit findings if the overpayment is limited to a claim-by-claim review or a SVRS (Statistically Valid Random Sample). A claim-by-claim overpayment is specific to only the claims reviewed during the audit. A SVRS overpayment is based on an extrapolation of services over an extended period of time, or claim universe, which mirrors the audit findings of claims reviewed during the audit. Details of the SVRS calculation are provided by the UPIC/ZPIC.

1. What should I include with my redetermination request?

* Consistent with the Medicare appeal process the redetermination request should include:
* [Part A Redetermination Request Form (1000)](http://novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName:00004472)
* [Part B Redetermination Request Form (4579)](http://novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName:00008291)
* Appointment of Representative Form (CMS 1696) when the provider is choosing to appoint an attorney as their representative.
* Copy of the demand letter issued by Novitas Solutions.
* Copy of the UPIC/ZPIC letter which includes the case file number (CMM #), calculated overpayment and spreadsheet listing the services involved with the overpayment. Please be sure to indicate the services in question.
* Additional documentation which has not been supplied to the UPIC/ZPIC. Novitas Solutions will request documentation the UPIC/ZPIC used during the initial review. Providers do not need to resubmit medical records previously supplied to the UPIC/ZPIC.

1. Are overpayments identified by the UPIC/ZPIC subject to the limitation of recoupment process?

* Yes, overpayments identified by the UPIC/ZPIC are subject to the limitation of recoupment process. Please refer to [Medicare Overpayments](ddocname:00008243) for more detailed information regarding the way Medicare recoups overpayments.

1. Who should I contact regarding the UPIC/ZPIC audit?

* Questions regarding the UPIC/ZPIC audit should be directed to the individual referenced in the letter from the UPIC/ZPIC.