

Adjustments for Qualis Health Retrospective Review Findings

As indicated in [KMAP General Bulletin 17159](#) published in June 2017, the Kansas Department of Health and Environment (KDHE) awarded Qualis Health the fee-for-service (FFS) Utilization Review services contract.

Qualis Health has been requesting records and conducting retrospective utilization reviews of inpatient hospital, inpatient psychiatric hospital, and ambulatory surgical center claims since August 2017.

Providers began receiving denial notifications in September and October 2017 and technical denial notifications from Qualis Health beginning in December 2017. To date, the adjustments for partial denials, denials, and technical denials have not processed in MMIS.

The KDHE fiscal agent, DXC Technology, will begin performing the claim adjustments for all denials identified by Qualis Health from September 2017 to present. Once these are completed, adjustments will be performed on a current basis. Providers will begin seeing these adjustments reflected on the remittance advices.

As a reminder, once the technical denial is final (90 days after issued) those claims are not eligible for a state fair hearing. The timely filing for state fair hearings has expired on the majority of the adjustments and denials that providers will see processed in the near future.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday