

FAX

To: Test4

Company:

Fax: 9292070142

Phone:

From: RISK ADJUSTMENT

Fax: 330-996-8589

Phone:

E-mail:

NOTES:



SummaCare

P.O. Box 3620 Akron, OH 44308

FAX

To: Dr Stephen Musser West

25043 Lorain Road

North Olmsted, OH 44070

Fax: 4407775922

From: Sam – Risk Adjustment

Fax: 330-996-8589

Phone: 234-475-0065

E-Mail: longsam@summacare.com

Please call or email if you did not receive a complete transmission or have questions.

Comments: See attached request for Medical Records

CONFIDENTIALITY NOTICE: This communication and any attachments may contain confidential and privileged information for the use of the designated recipients. If you are not the intended recipient, you are hereby notified that you have received this communication in error and any review, disclosure, distribution, or copying of it or its contents is prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at 1200 East Market Street, Akron, Ohio, 44305 via the USPS. If this was an email received in error, please notify the sender and delete it.

Request for Medical Records

Dear Provider,

As a Medicare Care Advantage issuer, SummaCare is required to meet Centers for Medicare and Medicaid Services (CMS) standards for data submission and coding accuracy. One of the ways we meet this responsibility is to review member medical records to ensure that the diagnoses that have been submitted to CMS were complete and accurate.

The attached list identifies SummaCare Medicare members who have had claims submitted for **2023 DOS** to SummaCare by your organization. The following required evidence meets criteria. Documentation of

- **Registration page**
- **Provider progress note/and or office visit notes**
- **ER note (if any)**
- **Admit note (if any)**
- **Consult note (if any)**
- **Procedure\OR note (if any)**
- **Discharge summary (if any)**

Please send the requested information, via mail to the address below, email to **longsam@summacare.com**, fax to **330-996-8589**, or if interested, we have a secure portal I can set up and the records can be uploaded to that platform.

SummaCare
Attention: Sam Long
1200 E Market St, Suite 400
Akron, OH 44305

We are permitted to receive the information requested under 42 CFR §164.506 of the Federal Code of Regulations. 42 CFR §164.506 (a) states "...a covered entity may use or disclose protected health information for treatment, payment, or health care operations as set forth in paragraph (c) of this section, provided that such use or disclosure is consistent with other applicable requirements of this subpart." Additionally, 45 CFR §164.506 (c)(4) states "A covered entity may disclose protected health information to another covered entity for health care operations activities of the entity that receives the information, if each entity either has or had a relationship with the individual who is the subject of the protected health information being requested, the protected health information pertains to such relationship, and the disclosure is: ___(ii) For the purpose of health care fraud and abuse detection or compliance."

We appreciate your cooperation and support with our quality initiatives. Please feel free to contact Sam Long at **234-475-0065** or via email at **longsam@summacare.com** if you have any questions.

Sincerely,

Samantha Long
Chart Retrieval Analyst I |Revenue Reconciliation

Member First & Last Name	Date of Birth	Date of Services	Provider First & Last Name
Brian Ross	04/28/1955	02/08/2023	STEPHEN C MUSSER
David Demian	10/25/1957	03/10/2023, 03/24/2023	STEPHEN C MUSSER
Gery Riva	03/18/1952	02/09/2023, 03/15/2023	STEPHEN C MUSSER
James Kozsey	05/02/1951	05/03/2023	STEPHEN C MUSSER
W Draves	09/11/1943	04/27/2023, 07/27/2023	STEPHEN C MUSSER