To: AmeriHealth Caritas Delaware Providers

Date: November 9, 2026

Subject: **Important Update: Expansion of Optum Claims Review to Include Outpatient Claims**

AmeriHealth Caritas Delaware is updating its claims review process in partnership with Optum to support payment accuracy, appropriate coding practices, and compliance with applicable payment policies.

Effective January 1, 2027, the Optum claims review process will expand to include outpatient claims. As part of this expansion, providers may experience additional claims reviews, including requests for medical records to validate billed services.

As part if this process:

- Professional claims and newly included outpatient claims may be reviewed for coding accuracy, billing compliance, and adherence to applicable payment policies.
- Providers may be required to submit medical records or supporting documentation.
- Claims identified with potential discrepancies may be subject to denial or further review.
- Claims will continue to be processed in accordance with applicable payment policies and provider agreements.

What Providers Need to Know

Providers submitting outpatient claims are encouraged to review their billing practices and ensure that medical records accurately support submitted claims.

AmeriHealth Caritas Delaware remains committed to support accurate claims processing and minimizing administrative burden for our provider network.

We're Here to Help

If you have questions, please contact your Provider Account Executive or the Provider Services department at 1-855-707-5818