CP

ClaimParity

Underpayment Recovery Report

Calderwood Health System

All dates – present

Generated September 5, 2026

Part of the SmartCodingAI family of healthcare revenue intelligence tools.

Executive Summary

Total underpayment	$2,015,871
Estimated recoverable (65%)	$1,310,316
Underpaid lines	6,898 of 83,856 matched (8.2%)
Unmatched lines (no contract)	1,144
Denied lines (paid $0)	0

Top findings

• Corion Health Plan pays 47562 at 77 % with modifier RT but only 65 % with modifier LT. Review modifier billing and payer adjudication for this combination.

• Westmark Health Plan pays 99285 at 90 % with modifier (none) but only 63 % with modifier 25. Review modifier billing and payer adjudication for this combination.

• Westmark Health Plan pays 99223 at 90 % with modifier (none) but only 64 % with modifier 25. Review modifier billing and payer adjudication for this combination.

Payer Analysis

Payer	Underpaid	Variance	% total
Calidon Health Plan	3,898	$881,820	44 %
Vantegra Health Plan	1,063	$360,000	18 %
Corion Health Plan	629	$269,351	13 %
Westmark Health Plan	591	$249,989	12 %
Pinehaven Health Plan	552	$215,000	11 %
Medicaid	90	$27,980	1 %
Tricare	40	$9,000	0 %
Medicare	35	$2,732	0 %

CPT Code Analysis

CPT	Underpaid lines	Variance
27447	668	$584,230
47562	598	$373,592
29881	538	$285,552
49505	440	$173,070
19120	411	$125,724
66984	364	$99,844
45378	272	$54,753
72148	234	$40,747
43239	221	$39,566
73721	207	$34,159
99285	275	$28,964
74177	153	$21,659
64483	134	$19,351
99223	181	$14,383
99205	179	$13,707
93306	82	$10,467
99233	138	$10,283
99284	121	$9,131
99215	120	$8,330
99204	106	$6,748

Recommendations

1. Calidon Health Plan accounts for 44 % of total underpayment (¤881,820) — prioritize contract review with this payer.

2. Audit 47562 modifier-LT claims to Corion Health Plan and appeal the short-paid lines.

3. 1,144 service lines had no matching contract — load the missing fee schedules to surface additional recoverable underpayments.

4. Estimated recoverable (¤1,310,316) assumes a 65% recovery rate; adjust to your historical recovery experience.

Methodology

Contract matching. Each remittance service line is matched to a contracted rate by payer, CPT and service date, using a four-pass strategy (exact payer + location, exact payer, normalized payer name, then payer-name containment). Lines with no matching contract are reported as unmatched.

Variance. Variance = paid amount − contracted rate. A line is flagged as underpaid when it falls more than $0.01 below the contracted rate (a one-cent tolerance ignores rounding). Patient responsibility is not deducted — the contracted rate is what the payer owes.

Recovery estimate. Estimated recoverable = total underpayment × 0.65. The 65% rate reflects typical underpayment-recovery program results; adjust to your own historical recovery experience.

Pattern detection. Findings are produced by rule-based aggregation (no AI): systematic short-pay (low-variance underpayment on a payer/CPT), temporal drift (a sustained mid-period drop), location-specific underpayment, and modifier gaps.