

PROGRAM INTEGRITY UPDATES

February 23 & 24 2022

What is Fraud?

Knowingly deceiving, concealing, misrepresenting or obtaining money or property from a health care benefit program.

What is Waste?

Overuse of services or other practices that directly or indirectly result in unnecessary costs to any healthcare benefit program.

What is Abuse?

When health care providers or suppliers perform actions that directly or indirectly result in unnecessary costs to any health care benefit program. This includes any practice that doesn't provide patients with medically necessary services or meet professionally recognized standards.

The difference between fraud, waste & abuse depends on circumstances, intent and knowledge.

FRAUD, WASTE & ABUSE

2021 PROVIDER FRAUD SUMMARY

- 32 New provider fraud cases opened in 2021
- 142 Claims paid not supported across nine provider IDs
- \$25,600 PIU recoveries
- 22 Current open cases

MEDICAID FRAUD CONTROL UNIT - MFCU

- The North Dakota Medicaid Fraud Control Unit (MFCU) investigates and prosecutes health care providers who defraud the ND Medicaid Program and providers who abuse, neglect, or financially exploit a patient in any facility that accepts Medicaid funds. The MFCU has statewide jurisdiction to prosecute offenders criminally or file civil actions.
- ND MFCU office is part of the Attorney General's office and is independent of ND Medicaid.
- MFCU staff includes a prosecutor, auditors, a nurse and other law enforcement officials.

JOINT PIU/MFCU INVESTIGATIONS

- PIU/FWA staff initiates an investigation, gathers information, requests documentation, review case.
- Regularly consults with MFCU staff to discuss open cases.
- Once a credible allegation of fraud is determined, the case is referred to MFCU.
- PIU referred four (4) ND Medicaid providers to the MFCU in 2021 for investigation of suspicious billing activity, practices and suspicion of fraud.
- Currently six (6) ND Medicaid provider cases under investigation with MFCU.
- During an investigation, MFCU serves subpoenas, reviews records, interviews providers and staff, at times uses surveillance of provider location.

PIU/MFCU CASE EXAMPLES

- Psych provider – Undocumented times, unsigned records
 - Unbundled services performed on same date, billed on separate dates
 - Billed for services performed by a technician
 - Billed while out of the country
 - Billed without a prior authorization
 - 100% error rate
 - Settlement discussions pending with provider
- Dental provider
 - Poor documentation, questionable billing times and patients, poor care
 - Review showed 100% error rate, high dollar recovery
 - Investigation still in progress

PIU/MFCU CASE EXAMPLES, CONT.

- Qualified Service Provider (QSP)
- Audited by ND Medicaid QSP staff
 - Failed to submit service records
- Second audit performed by PIU staff for entire enrollment period
 - Failed to submit service records
- Provider terminated
- QSP billed for more than 24 hours in a day
- PIU determined provider owes more than \$75,000
- Pled guilty to Medicaid Fraud; restitution order is pending from court

PROVIDER ENROLLMENT



PROVIDER ENROLLMENT UPDATES

- Updating contact information
 - The ability for providers to go into MMIS and directly add contact information has been temporarily disabled. Any updates needed shall be emailed to NDMedicaidEnrollment@Noridian.com.
- Noridian processing times are posted online and updated weekly
- The SFN 615 Medicaid Provider Agreement was updated again this month to reflect the new timely filing policy and to mirror 42 CFR specific to the number of days required to report ownership changes. We had 30 days it has been changed to 35.

PROVIDER ENROLLMENT UPDATES

Revalidation notices are changing (sent via email only)

- Initial Notice subject line:
 - North Dakota Medicaid - Initial Revalidation Notice
- 2nd Notice subject line:
 - North Dakota Medicaid - Provider SUSPENDED for No Revalidation in 7 Days
- Suspended Notice subject line:
 - North Dakota Medicaid - Provider SUSPENDED for No Revalidation
- Termed Notice subject line:
 - North Dakota Medicaid - Provider TERMINATED for No Revalidation

Updated provider enrollment forms

<http://www.nd.gov/dhs/services/medicalserv/medicaid/provider-updates.html>

Revalidations- current and backlogged

<http://www.nd.gov/dhs/info/mmis/revalidation.html>

Noridian Healthcare Solutions

Attn: ND Medicaid Provider Enrollment

PO Box 6055

Fargo, ND 58108-6055

Phone: (701) 277-6999

Fax: (701) 433-5956

Email: NDMedicaidEnrollment@noridian.com

SURVEILLANCE, UTILIZATION AND REVIEW SECTION (SURS)

SFN 615 MEDICAID PROGRAM PROVIDER AGREEMENT GENERAL INFORMATION

- **5. Record Keeping:** The Provider agrees to document each item or service for which Medicaid reimbursement is claimed, at the time it is provided, in compliance with documentation requirements of the Department, applicable rules, and this agreement. Such records shall be maintained according to 42 CFR 424.516 (f) for at least seven years after the date of service or as required by rule. Upon reasonable request, the Department, the U.S. Department of Health and Human Services (DHHS) or their agencies, shall be given immediate access to and permitted to review and copy all records relied on by the Provider in support of services billed to Medicaid. Copies will be furnished at the Providers expense. The Provider agrees to follow applicable state and federal laws and regulations related to maintaining confidentiality of records.
- **7. Overpayment:** the Provider agrees that in any event it receives payment for services or goods in an amount in excess of payment permitted by the Department, that such overpayments may be deducted from future payments otherwise payable to the Provider. The Provider acknowledges that such remedy is not the only or exclusive remedy available to the Department. It is the Providers responsibility to inform the Department of any Medicaid overpayments discovered.

Taken from SFN 615 (Rev 1-2022) page two.

Link: [sfn00615.pdf \(nd.gov\)](#)

FINDING CURRENT DME FEES AND GENERAL INFORMATION

- ND Medicaid has fee schedules located on their website
- You can search by fee schedules
- There are fee schedules for both purchase and rental
- **Things to be aware of:**
 - After a 12-month rental period, the Medicaid member will be deemed to own the item and the DMEPOS provider must transfer ownership of the item to the member. (Page 18 of DME Manual)
 - At the point that total rent paid equals 100 percent of the purchase allowance, the member is considered to own the item, and no further rental payments are made. It is the DMEPOS provider's responsibility to track the number of rental payments and discontinue billing beyond the 100 percent allowance. (Page 19 of DME Manual)

SFN 'HOW TO' VIDEOS

- ND Medicaid receives a lot of state forms that are filled out incorrectly
- In an effort to clarify what needs to be completed on each form and what type of information is accurate we are starting a series of videos
- The videos will be posted on the Medicaid Provider Information page in the section titled: Provider Education/Training

PAYMENT ERROR RATE MEASURE (PERM)

- **MR1 Error:** The provider failed to respond to requests for the medical records or the provider responded that he or she did not have the requested documentation. The provider did not send any documentation related to the sampled payment.
- **MR2 Error:** Provider did respond to initial request but all requested information did not reach PERM or an additional request was not responded to.
- PERM errors will result in recoupments by the state and a state audit.

PERM FAX INFORMATION

- Place PERM cover sheet on top of each record submission
- If your facility receives *more than one* PERM request, each record shall be faxed separately
- Fax documents to the following number: **1-804-515-4220**

PERM MAILING INSTRUCTIONS

- Place PERM cover sheet on top of each record submission.
- All documents must be complete and legible.
- Please do not staple or paper clip any pages together.
- If you choose to send the documentation on USB Flash Drive/CD/DVD, the file(s) must be ***encrypted***. Please submit the password via email to PERMRC_Encryption@nciinc.com and include the PERM ID in the subject line. **Please note that USB flash drives cannot be returned to providers.**
- Mail requested documentation to:

PERM Review Contractor
Attn: Medical Records Manager
CMS PERM Review Contractor, NCI Inc.
1538 E. Parham Road
Henrico, VA 23228

CURRENT AUDITS

- Duplicate Lab Charges
- Critical Care Codes
- Documentation Audit
- Rehab Services Eligibility Self Audit
- Supplies charged separately that should be included in the rental reimbursement

PROVIDER OUTREACH GOALS 2022

- Our goal is to continue to improve communication with providers
- PIU leadership will work with professional organizations to share concerns that may be unique to a specific provider type and attend conferences and meetings as needed.

CONTACT INFORMATION



COMMUNICATIONS

Provider/stakeholder email list

<http://www.nd.gov/dhs/services/medicalserv/medicaid/provider.html> (very top of the page).

Provider update page

<https://www.nd.gov/dhs/services/medicalserv/medicaid/provider-updates.html>

MMIS provider message center: Once you have logged in to MMIS you should see your messages pop up. The messages might be an update, a revalidation that is due, etc. Please make sure to read the messages.

Please encourage your partners and contacts to subscribe to our emails and view provider news and information and MMIS messages for updates.

PROGRAM INTEGRITY TEAM CONTACT INFORMATION

Dawn Mock – Medicaid Program Integrity Administrator

Phone: (701) 328 – 1895 Email: dmock@nd.gov

Steven McNichols – Medicaid Audit Coordinator

Phone: (701) 328 – 4831 Email: smcnichols@nd.gov

Denise Martino - Fraud Waste & Abuse/Managed Care Oversight Administrator

Phone: (701) 328 – 4024 Email: dmmartino@nd.gov

PROGRAM INTEGRITY TEAM CONTACT INFORMATION - CONTINUED

Gale Schuchard – Compliance Technician

Phone: (701) 328 – 2334 Email: gjschuchard@nd.gov

Missy Rosales – SURS Analyst

Phone: (701) 328 – 3507 Email: melrosales@nd.gov

Sarah Schaaf – FWA Analyst

Phone: (701) 328 – 4682 Email: slschaaf@nd.gov

PROGRAM INTEGRITY CONTACT INFORMATION – FRAUD, WASTE AND ABUSE

General fraud email: medicaidfraud@nd.gov

Phone number: 1-701-328-4024 OR 1-800-755-2604 – select option 3 to report
Medicaid fraud

Suspected fraud form (SFN 20) submission link:

<https://apps.nd.gov/itd/recmgmt/rm/stFrm/eforms/Doc/sfn00020.pdf>

PROGRAM INTEGRITY CONTACT INFORMATION – PROVIDER ENROLLMENT

General provider enrollment email: NDMedicaidEnrollment@Noridian.com

PROGRAM INTEGRITY CONTACT INFORMATION – PROVIDER AUDIT

General audit email: auditresponse@nd.gov

PERM CONTACT INFORMATION

Should you require additional information or have questions, please call:

- Customer service representatives at (800) 393-3068
- Allison Keeley, our Medical Records Manager, at (804) 249-1746

CLOSING

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FUTURE DATES

June 2022: the 22nd at 2:30-3:30 PM and the 23rd at 9:30-10:30 AM

Additional 2022 dates are scheduled:

- Oct 26 from 2:30 to 3:30
- Oct 27 from 9:30 to 10:30

AS WE CLOSE...

- Questions
- Comments
- Ideas for potential future topics

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