Self-Disclosure: The Importance and Process for Providers

Office of the Medicaid Inspector General
Self-Disclosure Unit
October 23, 2014

Mission Statement

Our mission is to enhance the integrity of the New York State Medicaid program by preventing and detecting fraudulent, abusive, and wasteful practices within the Medicaid program and recovering improperly expended Medicaid funds while promoting high-quality patient care.

Background

Providers who identify Medicaid over-payments are obligated to return those funds.

- □ Patient Protection and Affordable Care Act (ACA) Section 6402 of PPACA
- □ 18 NYCRR 515.2

No other state agency has authority to process Medicaid self-disclosures (Public Health Law §§ 30, 31, and 32(18))

Background (Continued)

□ Failure to self-disclose when finding a problem may expose the "person" to liability under the False Claims Act, including whistleblower actions, treble (i.e., three times the amount) damages, and penalties.

Why Self-Disclose?

- □ Obligated by law
- □ Claims covered by self-disclosure will not be audited again for same issue and dates of service.
- □ Six-year look-back period
- ☐ Provider performs the audit, not OMIG
 - Less disruptive to provider

Why Self-Disclose? (Continued)

- □ Extended repayment terms possible for demonstrated financial hardship
- No penalties or sanctions

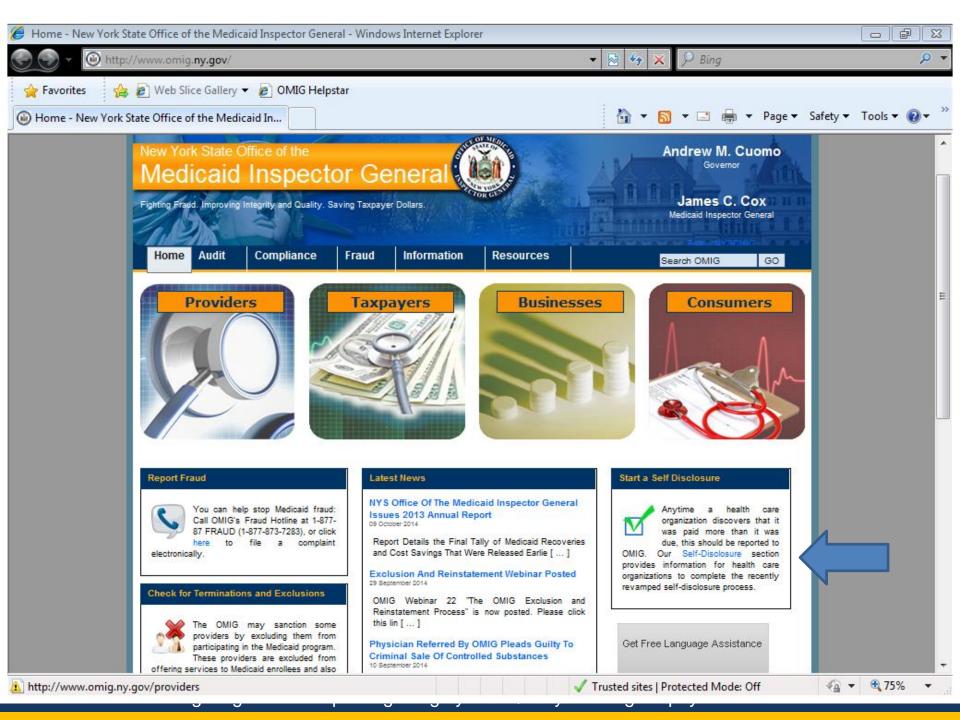
Who Files the Self Disclosure?

Possibilities:

- ☐ The president, CEO, or CFO of the company
- □ Attorney representing the provider
- ☐ The corporate compliance officer

When to Disclose

- ☐ Under ACA, Medicaid overpayments should be reported and returned to OMIG:
 - by the later of:
 - (a) the date which is 60 days after the date on which the overpayment was identified; or
 - (b) the date any corresponding cost report is due, if applicable.



Everything you need is on this page. Start with the checklist: refer to guide to provider overpayment reporting and data request from providers.



Fighting Fraud. Improving Integrity and Quality. Saving Taxpayer Dollars.

Information on OMIG Web Site

- □ OMIG Self-Disclosure Program
- Submission Checklist
- ☐ Guidelines for Provider Overpayment Reporting
- ☐ Provider Universe and Sample Request

Self-Disclosure Checklist (Partial) from OMIG Web Site

Self-Disclosure Submission Guidelines

A self-disclosure submission requires both a letter and a claim file(s) of impacted Medicaid claims.

□ Submission Letter

Complete description of circumstances surrounding the disclosure including:

- Provider name
- Medicaid MMIS ID and NPI number of the billing provider
- ☐ The error that occurred
- □ How the error was found
- □ Any relevant facts including total amount billed and amount of overpayment by Medicaid

Self-Disclosure Checklist (Partial) from OMIG Web Site (Continued)

Identify:

- ☐ The time period the claims error encompasses
- □ Actions taken to stop the error and prevent recurrence
- □ Personnel involved in the error occurrences, those who discovered the problem, and those involved in
- ☐ Rectifying the problem
- ☐ Legal and Medicaid program rules implicated
- □ Disclosure contact person name, phone number, and both correspondence and email addresses

How to Disclose

Contact the OMIG Self Disclosure Unit by letter to:

NYS Office of Medicaid Inspector General

Self-Disclosure Unit

800 North Pearl Street

Albany, New York 12204-1822

E-mail: <u>selfdisclosures@omig.ny.gov</u>

How to Disclose (Continued)

Through OMIG's Recovery Audit Contractor (RAC):

HMS PORTal

https://ecenter.hmsy.com/shr/controller

How to Disclose (Continued)

- ☐ For assistance filing a disclosure
 - See the OMIG Web site
 - Reference the Self-Disclosure submission documents
 - Call for advice: 518-402-7030, ask for Self-Disclosure

Examples of What to Disclose

- □Claims billed in error
- □Billing software error
- □ Duplicate billing
- □Excluded individual
- □ Forged documentation
- □Fraudulent time billed

Examples of What to Disclose

(Continued)

- □Inadequate credentials
- □Incorrect rate code used
- □Services billed not performed
- □Deficient service plan
- □Support documentation deficient/missing
- □Treatment plans deficient/missing

Examples of What to Disclose

(Continued)

Remember:

Payment for any service ordered by, or provided by, an excluded person is an overpayment requiring disclosure.

What to Submit

- ☐ Letter or secure e-mail describing the overpayment
- □ Excel file of the overpayment claims billed to Medicaid on a CD or in electronic format
- ☐ Statistical sampling:
 - Method must be submitted for review to OMIG
 - Can be requested from OMIG
- Underpayments must be re-billed to eMedNY

Note: Do not submit a check with your self-disclosure

Method of Submission

- □ Submissions containing protected health information (PHI) should be sent by:
 - Secure e-mail, courier (Fed Ex, UPS, etc.), certified mail or
 - HMS Portal https://ecenter.hmsy.com/shr/controller

Method of Submission

- □ E-mail may be used for the initial disclosure notification to OMIG and subsequent **informal** exchanges.
- □ Direct e-mail to the Self-Disclosure Unit: selfdisclosures@omig.ny.gov

The Process

- □ Receive Disclosure
 - Review the disclosure for completeness
- □ Validate Provider Disclosure
 - Submitted claims will be verified against the Medicaid database for accuracy and current payment amount

The Process (Continued)

- □ Confirm Findings with Provider
 - Our staff will work with the provider to resolve any issues.
- ☐ Finalize Disclosure
 - Upon completion, a final letter will be sent to the provider indicating completion of the case, the overpayment amount confirmed by OMIG, and the repayment requirements.

Repayment

□ Repayment instructions are included in the final letter.

We Want to Hear from YOU

- □ Our new, improved Web site: <u>www.omig.ny.gov</u>
- □ Join our Listserv
- ☐ Follow us on Twitter: @NYSOMIG
- "Like" us on Facebook
- ☐ Dedicated e-mail: <u>information@omig.ny.gov</u>
- ☐ More than 4,500 final audit reports
- ☐ Audit protocols
- □ And much, much more!

How You Can Work With Us

Self-Disclosure





selfdisclosures@omig.ny.gov or https://ecenter.hmsy.com/shr/controller



Thank You

- □ For listening to OMIG's Webinar presentation today
- ☐ For serving Medicaid consumers
- □ For your commitment to integrity and quality in the Medicaid program

Contact Information

Self-Disclosure Unit

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