



New York State Office of Medicaid Inspector General

## Compliance Alert

2011 - 07



BUREAU OF COMPLIANCE ANNOUNCED EFFECTIVENESS REVIEW PROCESS

July 11, 2011

New York State Social Services Law Section 363-d and 18 NYCRR Part 521 require certain healthcare providers to have reasonably effective compliance programs in order to participate in the New York State medical assistance (Medicaid) program. The New York State Legislature determined that requiring Medicaid providers to have reasonably effective compliance programs is the most effective way to control fraud, waste and abuse in the Medicaid program. The New York State Office of the Medicaid Inspector General's (OMIG's) Bureau of Compliance conducts Effectiveness Reviews (ERs) of Medicaid providers to assess if Medicaid providers have reasonably effective compliance programs.

### **Purpose of this Compliance Alert**

In order to make the Effectiveness Review process more efficient for OMIG's the Bureau of Compliance and for Medicaid providers who become the subjects of the Bureau's Effectiveness Reviews, OMIG has developed an Announced Effectiveness Review process that is outlined in this *Compliance Alert*. Please note that the process or procedure used by the Bureau of Compliance as it pursues Effectiveness Reviews may be different based upon the uniqueness of providers, even within the same provider type. As a result, some documents and information reviewed by the Bureau, as well as individuals who may be interviewed as part of the Effectiveness Review process, may be different from what is set out on the attachments to this *Compliance Alert*.

### General time line:

1. Documents 1, 2, 3 and 4 are issued approximately three to four weeks prior to the scheduled date of the Effectiveness Review.
2. Responses to the questions posed in documents 2 (Document Request), 3 (Focused Review Form) and 4 (Service Bureau Survey) are due one to two weeks prior to the scheduled date of the Effectiveness Review.
3. Document 5 (Announced Visit Confirmation Letter) is issued upon receipt of the responses to the questions posed in documents 2, 3 and 4,
4. Document 6 (Documentation Review Checklist) outlines some of the documentation that will be reviewed during the Effectiveness Review.
5. Document 7 (Effectiveness Review Report) is issued approximately 60 days after the conclusion of the site visit and any post-site visit inquiries are completed.

7. A customer service site visit survey will be issued after the conclusion of the site visit to obtain feedback from the provider on how the Bureau of Compliance can improve its process and procedure. This is an important component of the process, and OMIG is hopeful that providers will offer input on their individual experience. This is expected to commence during the third quarter of 2011.

If you have any questions, please contact the Bureau of Compliance at [compliance@omig.ny.gov](mailto:compliance@omig.ny.gov).

Attachments:

- Document 1 – Letter from the Medicaid Inspector General Announcing the Effectiveness Review
- Document 2 – Document and Information Request for Effectiveness Review
- Document 3 – Compliance Program Assessment Tool – Focused Reviews
- Document 4 – Service Bureau/Third-Party Billing Survey
- Document 5 – Bureau of Compliance’s Confirmation Letter
- Document 6 – Bureau of Compliance’s Documentation Review Checklist
- Document 7 – Bureau of Compliance’s Effectiveness Review Report