

Office of the Medicaid inspector General

323 Center Street Little Rock, AR 72201 501-682-8349 Fax: 501-682-8350



VIA HAND DELIVERY

July 1, 2016

Senator Bill Sample, Co-Chair Representative David L. Branscum, Co-Chair Arkansas Legislative Council Room 315, State Capitol Building Little Rock, AR 72201

Dear Senator Sample and Representative Branscum:

Enclosed please find a copy of the Office of Medicaid Inspector General's July 2016 Quarterly Report. This report provides a statistical profile of the agency's activities for the current fiscal year.

If you have any questions please feel free to contact us.

Sincerely,

Elizabeth Smith, Medicaid Inspector General

501-682-8349

enc.



Office of Medicaid Inspector General

Quarterly Report July 2016

Elizabeth Smith, Medicaid Inspector General

Quarterly Report Statistics and Information

This quarterly report, submitted July 1, 2016, contains a statistical profile of the Medicaid fraud referrals, audits, investigations, recoveries, and initiatives from the Office of the Medicaid Inspector General (OMIG) for the Fiscal Year 2016 (July 1, 2015 to June 30, 2016).

For the purposes of this report, the information is divided in the following manner: July 1, 2015 through September 30, 2015; October 1, 2015 through December 31, 2015; January 1, 2016 through March 31, 2016, and April 1, 2016 through June 30, 2016.

Recoveries/Recoupments/Initiatives

July 1, 2015 to September 30, 2015 recoveries by OMIG and recoupments sent to DHS Accounts Receivable for collection.

\$516,210.15

October 1, 2015 to December 31, 2015 recoveries by OMIG, recoupments sent to DHS Accounts receivable for collection, and OMIG Initiatives where overpayments were identified and reported to the Division of Medical Services and Hewlett Packard Enterprises.

\$649,237.56

January 1, 2016 to March 31, 2016 recoveries by OMIG, recoupments and restitution sent to DHS Accounts receivable for collection, and OMIG Initiatives where overpayments were identified and reported to the Division of Medical Services and Hewlett Packard Enterprises.

\$427,528.79

April 1, 2016 to June 30, 2016 recoveries by OMIG, recoupments and restitution sent to DHS Accounts receivable for collection, and OMIG Initiatives where overpayments were identified and reported to the Division of Medical Services and Hewlett Packard Enterprises.

\$1,169,317.20

Total Fiscal Year 2016 recoveries by OMIG, recoupments and restitution sent to DHS Accounts receivable for collection, and OMIG Initiatives where overpayments were identified and reported to the Division of Medical Services and Hewlett Packard Enterprises.

\$2,697,074.40

Audits and Investigations

July 1, 2015 to September 30, 2015 Audits/Reviews	
Onsite Audits/Reviews	19
Desk Audits	38
Medicaid Integrity Contractor Reviews	_2
	59
October 1, 2015 to December 31, 2015 Audit/Reviews	
Onsite Audit/Reviews	15
Desk Audits	_51
	66
January 1, 2016 to March 31, 2016 Audit/Reviews	
Onsite Audit/Reviews	22
Desk Audits	48
Provider Self Audit Requests	30
False Claims Act Compliance Reviews	<u>124</u>
	224
April 1, 2016 to June 30, 2016 Audit/Reviews	
Onsite Audit/Reviews	22
Desk Audits	100
Provider Self Audit Requests	12
Crossover Recoupment Letters	<u>1033</u>
	1167
Fiscal Year 2016 Total Audit Reviews, Requests and Provider Letters	
Onsite Audit/Reviews	78
Desk Audits	237
Medicaid Integrity Contractor Reviews	2
Provider Self Audit Requests	42
False Claims Act Compliance Reviews	124
Crossover Recoupment Letters	<u>1033</u>
	1516

Referrals of Fraud and Prosecutions

A. Arkansas Attorney General's Medicaid Fraud Control Unit

Pursuant to Ark. Code Ann. §20-77-2506, the Medicaid Inspector General shall work with the Medicaid Fraud Control Unit (MFCU), of the Office of the Arkansas Attorney General, prosecuting attorneys and law enforcement agencies. The Medicaid Inspector General refers audit investigations to MFCU when there is a credible allegation of fraud. See 42 CFR §455.23.

From April 1, 2016 to June 30, 2016, **twenty-eight** Medicaid provider investigations have been referred to the Medicaid Fraud Control Unit of the Attorney General's Office.

In Fiscal Year 2016, **fifty-one** Medicaid provider investigations have been referred to the Medicaid Fraud Control Unit of the Attorney General's Office.

From April 1, 2016 to June 30, 2016, the Attorney General's Office obtained three convictions in which the defendant was ordered to pay restitution.

In Fiscal Year 2016, twelve convictions were obtained for Medicaid Fraud by the Arkansas Attorney General's Medicaid Fraud Control Unit.

B. Other Suspected Fraud Referrals

In addition to referrals of suspected fraud to the Arkansas Attorney General's Office, OMIG shall also make referrals and coordinate efforts with other federal, state and local law enforcement agencies. See Ark. Code Ann. §20-77-2506(2).

From April 1, 2016 to June 30, 2016, **two** Medicaid provider investigations have been referred to federal law enforcement.

In Fiscal Year 2016, four Medicaid provider investigations have been referred to other law enforcement agencies.

From April 1, 2016 to June 30, 2016, six Medicaid recipients were referred to the appropriate agency for further investigation.

In Fiscal Year 2016 thirty-eight Medicaid recipient investigations were referred to the appropriate agency for further investigation.