



**Office of the
Medicaid Inspector General**

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



VIA HAND DELIVERY

April 3, 2017

Senator Bill Sample
Arkansas Legislative Council
Room 315, State Capitol Building
Little Rock, AR 72201

Dear Senator Sample:

Enclosed please find a copy of the Office of Medicaid Inspector General's March 2017 Quarterly Report. This report provides a statistical profile of the agency's activities for the current fiscal year.

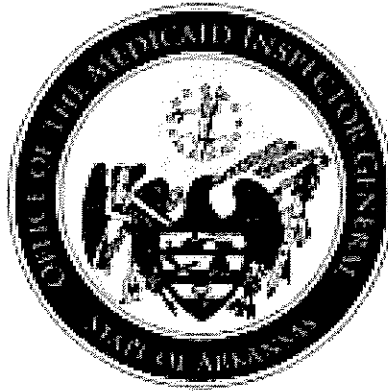
If you have any questions please feel free to contact us.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Smith", is written over the printed name.

Elizabeth Smith, Medicaid Inspector General
501-682-8349

enc.



Office of Medicaid Inspector General

Quarterly Report April 2017

Elizabeth Smith, Medicaid Inspector General

Quarterly Report Statistics and Information

This quarterly report, submitted April 1, 2017, 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 2017 (July 1, 2016 to March 31, 2017).

For the purposes of this report, the information is divided in the following manner: July 1, 2016 through September 30, 2016; October 1, 2016 through December 31, 2016; and January 1, 2017 through March 31, 2017.

Recoveries/Recoupments/Initiatives

July 1, 2016 to September 30, 2016 recoveries and 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.

\$856,871.96

October 1, 2016 to December 31, 2016 recoveries and 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.

\$934,033.07

January 1, 2017 to March 31, 2017 recoveries and 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.

\$858,296.63

Fiscal Year 2017 recoveries and 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 through March 31, 2017.

\$2,649,201.66

Audits and Investigations

July 1, 2016 to September 30, 2016 Audits/Reviews

Onsite Audits/Reviews	27
Desk Audits	86
Provider Self Audit Requests	648
Crossover Recoupment Letters	403
	1164

October 1, 2016 to December 31, 2016 Audit/Reviews	
Onsite Audit/Reviews	19
Desk Audits	60
Provider Self Audit Requests	<u>49</u>
	128
January 1, 2017 to March 31, 2017 Audit/Reviews	
Onsite Audit/Reviews	16
Desk Audits	44
Provider Self Audit Requests	18
Recoupment Letters	39
False Claims Act Compliance Reviews	<u>121</u>
	238

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 January 1, 2017 to March 31, 2017, **ten** Medicaid provider investigations have been referred to the Medicaid Fraud Control Unit of the Attorney General's Office.

From January 1, 2017 to March 31, 2017, the Attorney General's Office obtained **five** convictions in which the defendant was ordered to pay restitution.

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 January 1, 2017 to March 31, 2017, **nineteen** Medicaid recipients were referred to the appropriate agency for further investigation.