

Audits and Reviews of Medicaid Providers in Alaska

DHSS assists providers with several different audits and reviews, requested by different agencies to measure different things. Here is a key to the common reviews that occur in Alaska.

Name of audit/review:	Agency requesting/ Authority	Scope	What is measured by this audit/review:	What is reviewed	Subcontractor conducting audit/review:	Type of provider affected:	Number of providers affected:	Timeline	Other/notes; Contact info
PERM: Payment Error Rate Measurement	CMS: Centers for Medicare and Medicaid Services Improper Payment Information Act	Nation-wide (federal) Medicaid	States' rate of improper Medicaid payments	Review of Provider's Medical and Billing Records, State data processing and recipient eligibility	AdvanceMed is the medical review contractor	All providers that bill Alaska Medicaid	397 claims for Medicaid and 296 claims for Denali Kid Care (DKC).	Each State audited once every 3 years. Alaska's next base year subject to audit is SFY 2020. 7/1/2019 - 6/30/2020.	DHSS Medicaid Program Integrity, 334-2413
Medicaid Integrity Program audits AKA Unified Program Integrity Contractor (UPIC) audits	CMS: Centers for Medicare and Medicaid Services Deficit Reduction Act	Nation-wide (federal) Medicaid	Medicaid Overpayment Identification	Provider claims based on reviews by CMS review contractor	Qlarant	All providers that bill Alaska Medicaid	typically 1-3 audits per year	Annually, generally covering 2-3 years of claims data	DHSS Medicaid Program Integrity 269-0361
Disproportionate Share Hospital Audit (DSH)	CMS: Centers for Medicare and Medicaid Services	Nation-wide (federal) Medicaid	Appropriateness of DSH Payments	States' processes; Provider documentation	Myers and Stauffer	Hospitals receiving state DSH payments	Varies from year to year	Varies	DHSS Office of Rate Review 334-2476
Myers and Stauffer (AS 47.05.200)	Alaska State Legislature, via AS 47.05.200	Statewide Medicaid	Improper Medicaid payments	Medical record documentation supporting Provider claims	Myers and Stauffer	All Alaska providers who bill Medicaid more than \$30,000 annually.	50 per year	Annually covering 1 calendar year	DHSS Medicaid Program Integrity 269-0361
Financial statement and State and Federal Single Audit	Federal through OMB Circular A-133, State of Alaska through 2 AAC 45.010 and DHSS through 7 AAC 78.230	Grantees subject to Single Audit requirement and Home and Community based waiver providers	Compliance with applicable laws, regulations and grant provisions, accuracy of financial reporting.	Revenues and Expenditures including variances between budgeted expenditures and actual expenditures and identification of any questioned cost	Independent CPA firms.	Providers that are grant funded and HCBW Providers	Most grant funded and HCBW providers	Annually if provider meets single audit threshold. Otherwise, biennially.	DHSS Grant Audit Manager, Single Audit Representative. 907-465-3121. Office of Rate Review 334-2644
Cost report audit	Office of Rate Review 7 AAC 150.200	Desk review or field audit. Medicaid	Facility cost and statistics.	Medicare cost report/Medicaid forms.	None	Health Care Facilities including hospitals and nursing homes	All hospitals, nursing homes and FQHC's	1 to 4 year audit cycle.	DHSS Office of Rate Review 334-2476
Credit Balance Audit	DHSS Div of Health Care Services 42 CFR 433 Subpart D	Statewide Medicaid	Medicaid credit balances	Provider financial information including third party payments	HMS:	All Alaska Medicaid providers	All providers have the potential for being selected, no pre-determined number	Annually	DHSS Division of Health Care Services 334-2400
SURS audit	Division of Health Care Services	Statewide Medicaid	Improper Medicaid payments, including over utilization of services; specifics vary by review	Provider medical record documentation supporting claims billed	none	All Alaska Medicaid providers	All providers have the potential for being selected, no pre-determined number	varies	DHSS Division of Health Care Services 334-2400

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Focused review or audit by DHSS Program Integrity	DHSS 7 AAC 160.110	Statewide Medicaid	Improper medicaid payments, including over utilization of services; specifics vary by review	Provider medical record documentation supporting claims billed	None	All Alaska Medicaid providers	All providers have the potential for being selected, no pre-determined number	varies	DHSS Program Integrity 269-0361
Electronic Health Records (E.H.R.) Incentive payment audit	DHSS	Providers receiving E.H.R. incentive payments.	Incentive payment accuracy and eligibility.	Program eligibility and payment accuracy	Myers and Stauffer	All Alaska Medicaid providers receiving E.H.R. incentive ayments	Providers receiving E.H.R. incentive payments	Program participation from January 2011	DHSS Health information exchange 334-4489
Department Program Approval and Quality Assurance	DHSS Behavioral Health 7 AAC 70. 70 AAC 105-165	All Behavioral Health Treatment grantees	Compliance with program requirements	Provider records; patient/staff interviews	None	All Community Behavioral Health Treatment Medicaid providers	Only if applicable	Varies depending on Certification dates	DHSS, Division of Behavioral Health 269-3600
Inspection of Care	DHSS Behavioral Health 7 AAC 140.400-415 42 CFR 483.350 42 CFR 456-600-456.614	All Medicaid enrolled Residential Psychiatric Treatment Centers (RPTC)	Compliance with Federal and State Regulations/Quality of Care	Provider records; patient/staff interviews	None	All enrolled Residential Psychiatric Treatment Centers (RPTC)	Only if applicable	Annually	DHSS, Division of Behavioral Health 269-3600
Various Licensure, Certification, Grant Reviews	DHSS	Facilities & Agencies required to be licensed or certified; all DHSS Grantee agencies	Compliance with program standards	Provider records; patient/staff interviews	None	All Facilities & Agencies required to be licensed or certified; all grant DHSS agencies	Only if applicable	Varies	State of Alaska, DHSS
Provider Self-Audits	DHSS AS 47.05.235 7 AAC 160.115	All Medicaid Providers	To ensure services billed to Medicaid are supported by adequate documenation	Provider medical record documentation supporting claims billed	Providers may choose to contract for the service	All Alaska Medicaid providers	All Alaska Medicaid providers	One audit of a calendar year to be performed every two years. First audit must be completed by 6/7/2020	DHSS Medicaid Program Integrity 269-0361