

HEALTH INTEGRITY AWARDED CONTRACTS TO IDENTIFY MEDICAID OVERPAYMENTS

Health Integrity, headquartered at 9240 Centreville Road, Easton, MD 21601, has been awarded two contracts by the Centers for Medicare and Medicaid Services (CMS), an agency of the US Department of Health and Human Services, to serve as an Audit Medicaid Integrity Contractor (herein referred to as an Audit MIC). As an Audit MIC, Health Integrity will review claims submitted by all types of Medicaid providers, across all settings of care and types of services, to determine incorrect payments and identify overpayments. Some of the audits will take place on-site at providers' places of business, however most will occur in staff headquarters. The source of these audits will be leads or information provided by the CMS with assistance from the Review Medicaid Integrity Contractor, which will analyze Medicaid claims data to identify aberrant claims and potential billing vulnerabilities. The states and Medicaid programs covered by these two contracts include, the following: Minnesota, Wisconsin, Michigan, Illinois, Indiana, Ohio, Nebraska, Iowa, Kansas, Missouri, Delaware, Maryland, Pennsylvania, Virginia, West Virginia, Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee and the District of Columbia.

The results of these audits are expected to accomplish, the following:

- Identification of potential overpayments to individuals or entities receiving federal Medicaid funds for services or items provided;
- Reduction in the submission, processing and payment of inappropriate, incorrect, or fraudulent Medicaid claims;
- Recommendation of appropriate administrative action as necessary in accordance with laws and regulations to ensure that appropriate and accurate payments for Medicaid items or services are made, which are consistent with Medicaid coverage policy; and
- Reduction in potential fraud, waste, and abuse involving Medicaid providers.

Health Integrity's Audit MIC work will be operational in early November 2009. Health Integrity has partnered with Jackson, Dunham, Sato & Associates, LLC (a professional auditing firm), Clifton Gunderson CPA firm, Chase Consulting for legal services and MatrixPointe, a firm of Medicaid subject matter experts.

The Program Director for these contracts is Jaysen Eisengrein. Mr. Eisengrein came to Health Integrity in February 2009, after retiring as a Special Agent In Charge with the federal inspector general that has oversight of the Medicare and Medicaid programs. He has more than 30 years of healthcare-related anti-fraud experience and may be reached at (410) 822-0697 or via e-mail at eisengreinj@healthintegrity.org. The Audit Manager is Andy Ranck of Clifton Gunderson CPA, and he may be reached at (410) 453-0900 or via e-mail at andy.ranck@cliftocpa.com.