



Provider Communication

Subject: Community Mental Health Audit Protocol	Priority: High
Date: April 4, 2008	Message ID: ACSBNR04042008_1

Dear CMH Providers,

DCH Policy:
Response to Audits Performed by DHR/MHDDAD
via the External Review Organization

The Department of Community Health (DCH) and its partner, the Department of Human Resources’ Division of Mental Health, Developmental Disabilities and Addictive Diseases (DHR/MHDDAD), are invested in compliance and adherence to standards for the Medicaid Rehabilitation Option. To this end, these Departments contract with an External Review Organization (ERO). The contractor is URAC accredited to do compliance and quality audits of participating behavioral health providers.

Audit Procedures:

Audits provide the Departments with detailed analysis regarding core components of compliance and quality of service delivery within the Medicaid Rehabilitation Option. Audit and scoring procedures are outlined in the ERO policy found at www.apsero.com at the “Downloads” tab.

Notification of Audit Results:

Results of provider audits are simultaneously distributed to DCH, DMHDDAD, and the audited provider by the ERO. The results are also published on the ERO’s website (www.apsero.com) to promote transparency for constituents, consumers, and families. If any audit score is less than 70%, and in accordance with this policy, the DMHDDAD provides a follow-up email to the DCH within one week of the audit posting. DCH policy staff will send a request via email to DCH Program Integrity Unit (PIU) to initiate a review of the provider.

Review Panel:

A review panel (hereafter, the “Panel”) consisting of representatives from the DCH, DMHDDAD, and the ERO shall review audit results as specified in this policy. The Panel will convene in accordance with this policy within 2 weeks of having received the posted audit that is to be reviewed. The Panel shall review all available documentation related to compliance and adherence to standards for the Medicaid Rehabilitation Option and shall recommend a course of action to the PIU and also to the Division of MHDDAD as appropriate. Recommendations made by the Panel will be submitted in writing and shall include supporting documentation as appropriate. The Panel shall, as part of its



review, consider any formal appeal of the audit score from the provider to the ERO. The Audit Appeals Policy and Procedure are specified in the ERO policy found at www.apsero.com at the “Downloads” tab.

Adverse Actions

In addition to any action imposed by the DMHDDAD, the DCH/PIU will make a determination regarding the necessity of any adverse action as defined in Part I, Policies and Procedures for Medicaid/PeachCare for Kids Manual, chapter 400 (hereinafter, “Part I”). The DCH/PIU shall respond and provide documentation of plan of actions in response to the Panel’s recommendation within 2 weeks of the recommendation. Any adverse action taken by the DCH may be appealed in accordance with Part I.

Procedures:

I. Procedures for critical issues found in audits:

1. Audits that reveal the following critical issues will be immediately referred to the DCH Program Integrity Unit (PIU):
 - a. Suspicion of fraud;
 - b. Suspicion of Member endangerment.
2. Audits that reveal the following issues may result in a Panel review to recommend a course of action to DCH PIU and/or the DMHDDAD:
 - a. Unlicensed staff providing services that require the skill of a licensed practitioner;
 - b. 30% or more of records reviewed have no diagnosis by a practitioner authorized by Georgia law to assign a diagnosis;
 - c. Any single component of the audit remains below 70% for 3 consecutive audit cycles.

II. Procedures for findings of unjustified claims:

Any and/or all findings of unjustified claims found during the ERO audit are included in the audit findings and are forwarded to DCH Program Integrity Unit by the ERO. The DCH Program Integrity Unit will make a determination regarding the necessity of any adverse action as defined in Part I.

III. Procedures in response to audit scores below 70%:

1. One score below 70%:
 - a. DMHDDAD will submit a “yellow flag” notice to DMHDDAD Regional Office, DCH Policy Section, and Program Integrity Unit via email notification; and
 - b. The Provider Agency must have one of the following staff members available for the subsequent audit exit interview in the event that the following audit yields a score below 70%: Clinical Director/Designee (at least master’s level clinician) or Executive Officer.
2. Two consecutive scores below 70%:

- a. DMHDDAD will submit a “red flag” notice to the DMHDDAD Regional Office, DCH Policy Section, and Program Integrity Unit via email notification; and
 - b. Mandatory attendance of the provider agency’s Clinical Director/Designee (at least master’s level clinician) or Executive Officer during exit interview; and
 - c. The Panel may review the discrepancies and recommend a course of action to the DCH PIU and/or the DMHDDAD. These recommendations may include:
 - i. The Provider may be placed on Prepayment Review managed by the DCH.
 - ii. DMHDDAD suspension of referrals through the Georgia Crisis and Access Line.
 - iii. DMHDDAD suspension of new members being allowed to access services through the provider agency;
 - iv. Suspension or Termination of the provider number for the services in accordance with Part I;
 - v. Any other recommended course of action the Panel may determine is appropriate.
3. Three consecutive scores below 70%:
- a. DMHDDAD will submit an urgent notice to the DMHDDAD Regional Office, DCH Policy Section, and Program Integrity Unit via email notification; and
 - b. Mandatory attendance of the provider agency’s Clinical Director/Designee (at least master’s level clinician) or Executive Officer during exit interview; and
 - c. The Panel will review the discrepancies and recommend a course of action to the DCH PIU and/or the DMHDDAD. These recommendations may include:
 - i. The Provider may be placed on Prepayment Review managed by the DCH.
 - ii. DMHDDAD suspension of referrals through the Georgia Crisis and Access Line.
 - iii. DMHDDAD suspension of new members being allowed to access services through the provider agency;
 - iv. Suspension or Termination of the provider number for the services in accordance with Part I;
 - v. Any other recommended course of action the Panel may determine is appropriate.
4. The following actions will be taken in response to audit scores below 50%:
- a. DMHDDAD will submit an urgent notice to the DMHDDAD Regional Office, DCH Policy Section and Program Integrity Unit via email notification; and
 - b. The Provider Agency must have one of the following staff members available for the subsequent audit exit interview in the event that the following audit yields a score below 70%: Clinical Director/Designee (at least master’s level clinician) or Executive Officer; and
 - c. The Panel will review the discrepancies and recommend a course of action to the DCH PIU and/or the DMHDDAD. These recommendations may include:
 - i. The Provider may be placed on Prepayment Review managed by the DCH.
 - ii. DMHDDAD suspension of referrals through the Georgia Crisis and Access Line.
 - iii. DMHDDAD suspension of new members being allowed to access services through the provider agency;
 - iv. Suspension or Termination of the provider number for the services in accordance with Part I;
 - v. Any other recommended course of action the Panel may determine is appropriate.