
Medicare Program Integrity Manual

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

Transmittal 12

Date: SEPTEMBER 20, 2001

CHANGE REQUEST 1143

<u>CHAPTERS</u>	<u>REVISED SECTIONS</u>	<u>NEW SECTIONS</u>	<u>DELETED SECTIONS</u>
12		1 2	

MANUALIZATION-EFFECTIVE DATE: Not Applicable

Chapter 12, FI, Carrier, DMERC and RHHI Interaction and Coordination with Program Safeguard Contractors (PSCs). This is a new chapter in the Program Integrity Manual.

Chapter 12, Section 1, Introduction: This Section provides background information regarding the workflow interaction between the PSCs and FIs, Carriers, DMERCs and RHHIs.

Chapter 12, Section 2, Program Safeguard Contractors for Corporate Integrity Agreements (PSC-CIA). This Section manualizes Transmittal AB-01-08, dated January 25, 2001, Change Request 1143.

These instructions should be implemented within your current operating budget.

NOTE: Red italicized font identifies new material.

Medicare Program Integrity Manual

Chapter 12 – FI, Carrier, DMERC and RHHI Interaction and Coordination with Program Safeguard Contractors (PSCs)

Table of Contents (Rev. 12, 09-20-01)

1 - Introduction

2. Program Safeguard Contractors for Corporate Integrity Agreements (PSC-CIA)

1 – Introduction (Rev. 12, 09-20-01)

In the spring of 1999, HCFA (now CMS) began awarding Indefinite Delivery, Indefinite Quantity (IDIQ) contracts to Program Safeguard Contractors (PSCs) to perform program integrity and data analysis activities as defined in specific task orders. A PSC can perform one, some, all or any sub-set of the work associated with the following payment safeguard functions: medical review, cost report audit, data analysis, provider education, and fraud detection and prevention. Under the “umbrella” PSC contract, Request for Proposals (RFPs) for selected task orders are competed amongst the PSCs and awarded to one or more depending on the scope of each task order.

The purpose of this chapter is to inform you of the workflow process you are to follow for the PSC interaction and coordination with carriers, FIs, DMERCs, and RHHIs. We want to ensure timely and efficient coordination with the PSC to maximize the successful outcome of this program integrity initiative.

2 - Program Safeguard Contractors for Corporate Integrity Agreements (PSC-CIA) (Rev. 12, 09-20-01)

The PSC-CIA task order was awarded in November 1999 to Tri-Centurion, L.L.C. The PSC-CIA may perform on-site reviews of selected providers that are subject to CIAs to verify compliance efforts and confirm that the terms and conditions of the CIAs are being met. The PSC-CIA must also review a statistically valid random sample (SVRS) of claims submitted to Medicare by the providers and determine patterns or significant occurrences where claims are filed in contravention of applicable Medicare laws, regulations or policies.

Each year a selected number of CIAs are scheduled for review. The CIAs apply to providers serviced by various contractors. You may or may not be contacted, but if you are you may possibly be contacted more than once. To date, entities have entered into a CIA with the U.S. Department of Health and Human Services, Office of the Inspector General (OIG). CIAs are case-specific. Their terms are tailored to address the deficiencies that have been identified by the OIG with respect to providing and billing for health care services.

If a provider within your jurisdiction is on the list of CIAs to be reviewed, the regional office (RO) will ask that you identify a contact person at your site to coordinate any activities required by the PSC-CIA relating to the CIA compliance and billing reviews. Provide the name of the contact person to your RO benefit integrity representative. Depending upon the nature of the CIA, the PSC may need documents or other information on the following issues: reimbursement, medical review, benefit integrity, educational correspondence, coverage guidelines, provider files, and local medical review policies. No systems changes or special reports are required, only information fiscal intermediaries and carriers would have in the normal course of business. It is important for you to coordinate contacts with appropriate program integrity and program management staff.

You are responsible for coordinating appropriate follow-up actions that result from the compliance and billing reviews, such as provider overpayment or underpayment assessment and adjustment.

The Government Task Leader (GTL) or the Co-GTL will initially contact the appropriate RO to discuss the CIA workflow requirements. This will permit the RO to be aware of the coordination that will take place. The GTL or Co-GTL will then make the initial contact with your contact person regarding the PSC-CIA workflow process, necessary time lines and inform you when the PSC will contact you. The PSC will contact you and inform you of exactly what information it needs. You are to provide the information within fifteen (15) working days. If there is a problem supplying the information or a delay in giving the information, immediately contact the GTL or Co-GTL. Due to the confidential nature of the CIA, do not disclose any information about the CIA or your communication with the PSC-CIA at any time.

If there are any question or concerns, contact the GTL, John Martino at (215)-861-4177, E mail jmartino@cms.gov or the co-GTL, Maureen Savory at (410)-786-3077, E-mail msavory@cms.gov.