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Medicaid/Medicare Nexus:
Leveraging Data to Identify Medicaid Recoupments

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Qlarant

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Presentation Overview

Qlarant

- Available data sources in Unified Program Integrity Contractor (UPIC) environment
  - Medicare: Integrated Data Repository (IDR)
  - Medicaid: State Medicaid Data, Transformed Medicaid Statistical Information System (T-MSIS)
- Challenges and opportunities in Medicaid data
- Medi-Medi discussion topics
- Open discussion - Lots of it!
  - Utilizing Medicare + Medicaid data for additional analyses
  - Thoughts, ideas, and input from State partners, CMS, and other attendees

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Available Data Sources in UPIC Environment

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Integrated Data Repository

- Single source of data under One Program Integrity (One PI) concept
- Medicare data are available from 1/1/2006 to current
- Medicaid data are available in T-MSIS format - available date range varies by states but for most states available from 10/1/2014 to current
- Medicare data can be accessed via SAS® Enterprise Business Intelligence (EBI) or STARSInformant® tool
- Medicaid data can be accessed via SAS EBI tool
- Medicaid data are grouped by claims table, claim lines table, recipient demographic table, recipient enrollment table, etc.

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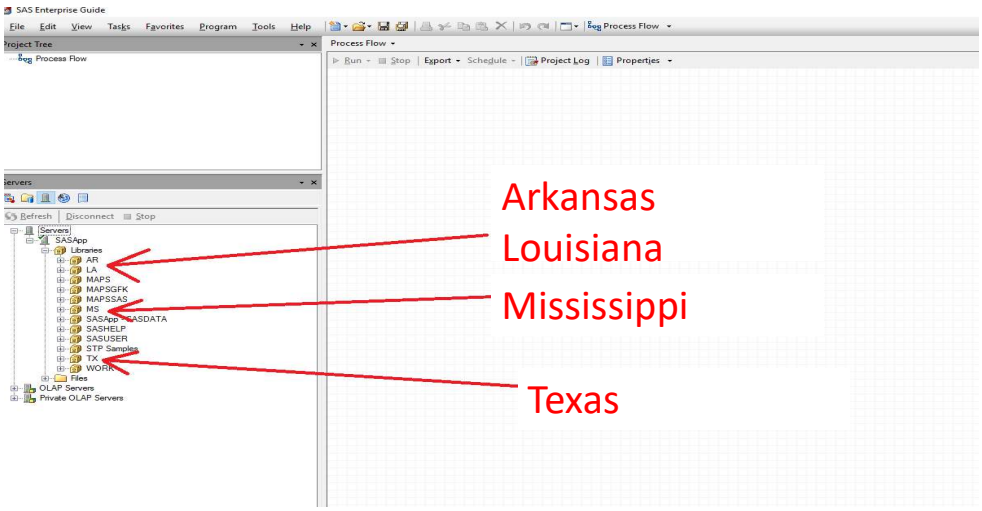
State Medicaid Data Warehouse (MDW) - SAS Server



Screenshot of State Medicaid Data Warehouse - libraries for UPIC Southwest States

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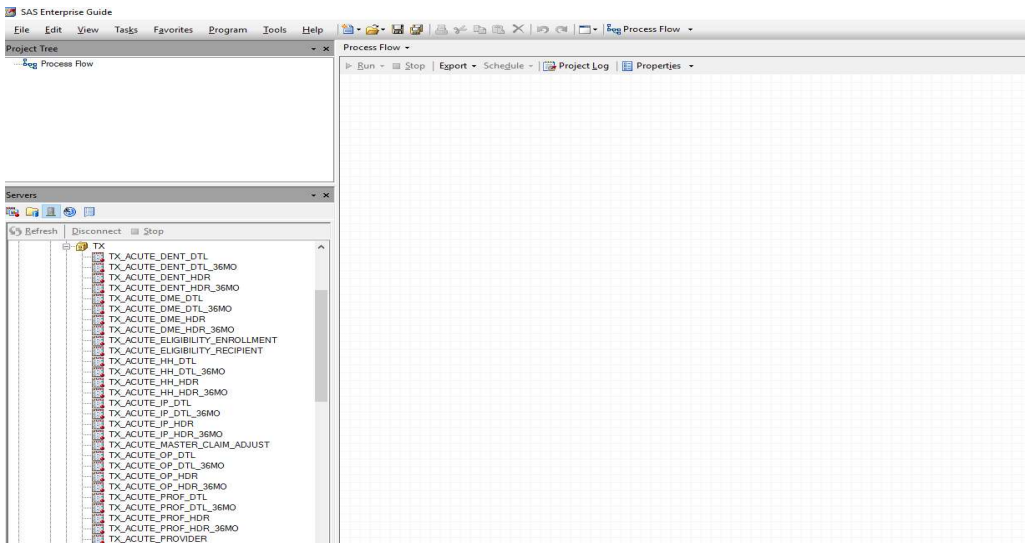
State Medicaid Data Warehouse (MDW) - SAS Server



Screenshot of State Medicaid Data Warehouse – available data for Texas

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Challenges and Opportunities in Medicaid Data

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Medicaid Data - Challenges

- Obtaining data can be a challenge in itself
- State Medicaid Data – Joint Operating Agreement (JOA), file transfer (ETL), data dictionary
- T-MSIS data - access, testing and validation, issues reporting
- Once data are obtained, each state can be different in terms of
  - Layout
  - Format
  - Variable names
  - State policy
- Managed Care Organization (MCO) data
- Special cases (expansion, CHIP, enhanced Federal Matching Assistance Percentages or FMAPs) affecting data analysis, federal share calculations and fiscal period allocation (for CMS-64 reporting)

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Medicaid Data - Opportunities

- Subject matter expertise can be applied to detect Medicaid Fraud, Waste, and Abuse - millions of dollars in additional recovery
- Once initial data issues are resolved T-MSIS may turn out to be a good opportunity because of
  - Consistent format
  - Streamlined access
  - Easier join with Medicare data for Medi-Medi analysis
- UPICs can assist with tasks like proactive data analysis, law enforcement requests for information, sampling and extrapolation, federal share calculations and fiscal period allocations

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Considerations When Performing Medicaid Statistical Samples and Overpayments

- Sampling may not be allowed in some states
- State policy may require a different (higher) sample size than Medicare Program Integrity Manual (PIM) guidelines
- State policy language may result in UPICs ending up choosing a certain method for sampling (e.g. simple random sample only)
- Medicaid overpayments have a Federal Share and Federal Fiscal Period allocation component - covered in detail in subsequent slides

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Federal Share Calculations for Medicaid Overpayment: Examples of FMAP - Fiscal Year 2017

STATE	FEDERAL MEDICAL ASSISTANCE PERCENTAGES	ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGES	ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGES WITH ACA 23 PT INCREASE***
Alabama	70.16	79.11	100.00
Alaska	50.00	65.00	88.00
American Samoa*	55.00	68.50	91.50
Arizona	69.24	78.47	100.00
Arkansas	69.69	78.78	100.00

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Calculating the Federal Share and State Share of Recovered Amounts

- Federal Share of Recovery: Determined by multiplying the Expected Federal Share of Overpayment of the Expected Universe Overpayment by the Overall Recovery Amount

$$\frac{\hat{T}_{fed}}{\hat{T}_{uni}} x \left(\hat{T}_{uni} - Z_{\alpha}\sqrt{v(\hat{T}_{uni})}\right) = \text{Federal Share of Recovery}$$

Note: In the equation above, *Z* would be replaced by *t,* such as in an SRS. α would be α/2 for a two-sided confidence interval.

- State Share of Recovery: Overall Recovery Amount – Federal Share of Overpayment

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Example: Federal Share Calculation

Standard Error (Total)	Confidence Coefficient (95% two-sided)	Precision Interval	Initial Estimated Overpayment = Point Estimate - Precision Interval	Adjusted Overall Overpayment
72478.74584	1.99773	$ 144,793	**$ 2,880,705**	**$ 2,847,097**

Precision % from Pt. Est.	4.79%
Precision % from Uni. Tot.	4.84%

Federal Percent (Pt Estimate Fed Share/ Pt Estimate Overall)	Federal Share (Overpayment x Federal Percent)
0.675255597	$ 1,922,518

Federal Share	**$ 1,922,518**
State Share	**$ 924,579**

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Calculating the Federal Fiscal Period Allocations

FSO_i is the Amount of Federal Share of Recovery (FS) allocated to the Fiscal Period.

Then,

$$FSO_i = FS \; x \; w_{FY_i} \; x \; w_{error_i}$$

Where, w_{FY} is the weight applied due to the federal share of the audit period and w_{error} is the weight from the sample error.

$$w_{FY_i} = \frac{Federal\ Share\ of\ Payment\ in\ Fiscal\ Period}{Federal\ Share\ of\ Payment\ in\ Universe} \quad \text{and}$$

$$w_{error_i} = \frac{\frac{Federal\ Share\ of\ Sample\ Overpayment\ in\ Period}{Federal\ Share\ of\ Sample\ Payment\ in\ Period} \; x \; w_{FY_i}}{\sum\left(\frac{Federal\ Share\ of\ Sample\ Overpayment\ in\ Period}{Federal\ Share\ of\ Sample\ Payment\ in\ Period} \; x \; w_{FY_i}\right)}$$

Note: Federal Shares are calculated multiplying claim line payments by the Federal Matching Assistance Percentages as determined by the paid date. Federal Shares for each claim line are rounded to the nearest penny.

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Example: Federal Fiscal Period Allocation

Case ID: 1234		Period of Review: June 11, 2011 through December 1, 2013	
Fiscal Period	FMAP	Overall Recoupment	Federal Share
FY 2011 Q3	66.23%	$ 45,582	$ 29,694
FY 2011 Q4	60.56%	$ 107,088	$ 69,762
FY 2012	58.22%	$ 291,335	$ 189,787
FY 2013	59.30%	$ 119,804	$ 78,045
FY 2014	58.69%	$ 18,468	$ 12,031
Total		$ 582,277	$ 379,319

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Medi-Medi Analysis : Integrated Pilot Projects

- Prior to the UPIC, CMS implemented Integrated Pilot (IP, aka MIAIP) Projects
- The projects were a combined effort of the State and ZPIC/Audit MIC
- Qlarant was involved in at least two IP projects.
  - Texas – Qlarant (Health Integrity) ZPIC and & Audit MIC
  - Mississippi – AdvanceMed ZPIC and Health Integrity Audit MIC

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Successes and Lessons Learned from the Integrated Pilot Projects

- **Successes**
  - Improved and comprehensive data relative to other sources
  - Good collaboration between departments
  - Many audits/investigations were assigned
  - Many of the audits/investigations had important findings, recoveries, or law enforcement referrals
- **Challenges, Things we Learned**
  - State may have a different 'look-back' period
  - State policies on statistical sampling, sample size, etc. need to be factored in
  - States may have policies for reimbursing certain services which may be different from Medicare coverage determinations
    - e.g.: Ambulance investigations

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Medi-Medi Discussion Topics

- Medi-Medi matching (provider/recipient)
- Duplicate payments
- Providers appearing "normal" in each program but stand out in combined analysis (e.g. impossible number of hours)
- Beneficiary/Recipient drilldown

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Impossible Number of Hours – Example of Payments to a Provider for a Single Day (Medicaid + Medicare)

CPT	CPT DESCRIPTION	UNIQUE COUNT OF BENEFICIARIES RECEIVING SERVICE	UNITS BILLED FOR THE DAY	TOTAL AMOUNT PAID FOR THE PROCEDURE CODES	TOTAL ESTIMATED INTRA-FACE HOURS FOR PROCEDURE CODE
92060	SPECIAL EYE EVALUATION	59	59	$2,469	29.50
99215	OFFICE/OUTPATIENT VISIT, EST	17	17	$1,328	9.86
99205	OFFICE/OUTPATIENT VISIT, NEW	12	12	$1,333	9.00
68761	CLOSE TEAR DUCT OPENING	11	32	$2,013	8.96
92120	TONOGRAPHY & EYE EVALUATION	19	19	$954	7.03
92083	VISUAL FIELD EXAMINATION(S)	34	35	$1,980	5.95
92285	EYE PHOTOGRAPHY	15	15	$447	4.05
76512	OPHTH US, B W NON-QUANT A	7	14	$1,032	3.50
92250	EYE EXAM W PHOTOS	21	21	$1,060	3.15

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Medi-Medi Analysis: Beneficiary Drilldown

- Detailed information on a particular beneficiary or group of beneficiaries to enhance a program integrity investigation or audit
- To obtain a complete picture of the services rendered to a beneficiary - providing a comprehensive billing summary across programs
- Can be very useful for investigators/law enforcement in beneficiary interview or to strengthen an investigation

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Beneficiary Drilldown: Example

Claim Type	Unique Providers				Amount Paid	
	Medicaid		Medicare		Medicaid	Medicare
	ID	Referring NPI	NPI	Referring NPI		
Part B	2	1	49	25	$28	$9,534
DME	1	0	3	3	$214	$1,772
SNF	1	N/A	1	N/A	$11,832	$20,473
Hospice	1	N/A	1	N/A	$101,621	$51,950
Outpatient	N/A	N/A	3	N/A		$3,205
Inpatient	N/A	N/A	1	N/A		$25,143
Home Health	N/A	N/A	1	N/A		$7,122
				Total	$113,695	$119,199

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Focus Areas

- Opioids
  - Prescribers and Pharmacy Key Performance Indicators (KPI)
  - Holy Trinity
- Non-Emergency Medical Transports (NEMT)
- Hospice
  - Discharge Alive Rates
  - Excessive Lengths of Stay
- Mental Health Rehabilitation
- Credit Balances

We want to hear from you!!!

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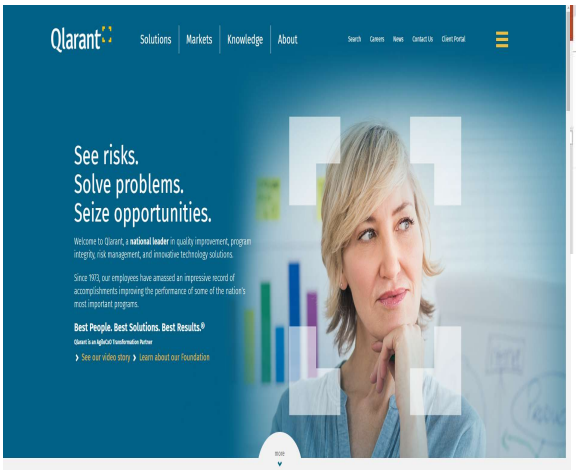
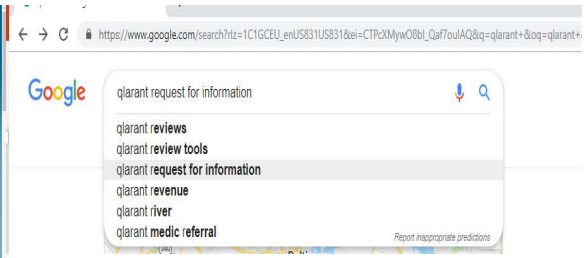
Additional Support Functions





- Requests for Information (RFI)
- Requests for Assistance (RFA)

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Questions and Additional Open Discussion

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