SURS SFY 2018 Statistics

Reviews opened in SFY 2018 (July 1, 2017 - June 30, 2018). Some reviews are not concluded and may be counted in the previous or following year.

1. Top issues reviewed by SURS in SFY 2018:

Type of Issue	# of Issues
New Provider 6-month Review	252
Interactive complexity	22
Non-Covered EPSDT Chiropractic Codes	16
Billing for non-covered services (Dry Needling)	8
Unlisted Molecular Pathology Code 81479	8
Pharmacy use of override code 4 - other coverage exists.	7
Program referral for self-audits (CPT 81420)	6
Anesthesiology	5
Transurethral resection of the prostate (TURP) procedure	5
Recipient EOMB referral - services not provided that were billed	5

- 2. SFY 2018, Reviews opened: 437. Total records requested: 13,269.
- 3. Number of audits/reviews by provider type.

Provider Type	SURS open reviews	Enrolled MT Medicaid Providers (7/31/18)	% Based on total SURS Reviews
AMBULANCE		255	
AMBULATORY SURGICAL CENTER		26	
AUDIOLOGIST		94	
BIRTHING CENTER		2	
BOARD CERT BEHAVIOR ANALYST		7	
CASE MANAGEMENT - MENTAL HEALTH	3	19	0.69%
CASE MANAGEMENT - TARGETED		18	
CHEMICAL DEPENDENCY CLINIC	1	34	0.23%
CHILDRENS SPECIAL HEALTH SVCS		2	

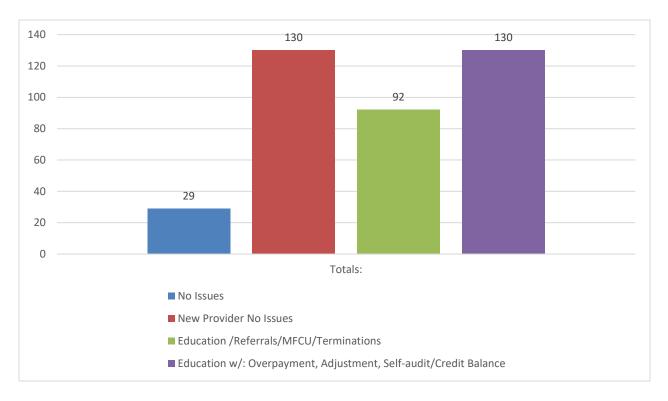
CHIP EYEGLASSES		1	
CHIROPRACTOR (QMB SVCS ONLY)		102	
CRITICAL ACCESS HOSPITAL	2	48	0.46%
DENTAL	13	681	2.97%
DENTAL (CHIP CLIENTS ONLY)	2	671	0.46%
DENTURIST		17	
DIALYSIS CLINIC	1	30	0.23%
DISEASE MANAGEMENT CONTRACTOR		1	
DURABLE MEDICAL EQUIPMENT	18	429	4.12%
EARLY AND PERIODIC SCREENING,			2.000/
DIAGNOSTIC, AND TREATMENT (EPSDT)	17	137	3.89%
EYEGLASSES		1	
FAMILY PLANNING CLINIC	1	13	0.23%
FEDERALLY QUAL HEALTH CENTER	3	47	0.69%
GROUP PROVIDER (NOT ACTIVE)		2	
GROUP/CLINIC	6	1497	1.37%
HEARING AID DISPENSER		37	
HOME & COMM BASED SERVICES		551	
HOME HEALTH (NOT ACTIVE)		1	
HOME HEALTH AGENCY		30	
HOME INFUSION THERAPY		20	
HOSPICE		33	
HOSPITAL - INPATIENT	7	1201	1.60%
HOSPITAL - OUTPATIENT		2	
HOSPITAL - SWING BED		45	
ICF - MR		3	
INDEP DIAG TESTING FACILITY	1	22	0.23%
INDIAN HEALTH SERVICES	1	17	0.23%
LABORATORY	17	274	3.89%
LICENSED ADDICTION COUNSELOR		16	
LICENSED PROFESSIONL COUNSELOR	66	786	15.10%
MENTAL HEALTH CENTER	2	26	0.46%
MID-LEVEL PRACTITIONER	48	5141	10.98%
MOBILE IMAGING SERVICE		1	
NURSING HOME	3	91	0.69%
NUTRITIONIST/DIETICIAN		91	
OCCUPATIONAL THERAPIST	10	209	2.29%
OPTICIAN		29	
OPTOMETRIST	3	247	0.69%
PERSONAL CARE AGENCY		67	
PHARMACIST		11	
PHARMACY	19	564	4.35%
PHYSICAL THERAPIST	41	783	9.38%
PHYSICIAN	100	15386	22.88%

PODIATRIST	3	90	0.69%
PRIVATE DUTY NURSING AGENCY		4	
PSYCHIATRIC RES TREATMENT FAC		46	
PSYCHIATRIST	2	352	0.46%
PSYCHOLOGIST	1	308	0.23%
PUBLIC HEALTH CLINIC		44	
RURAL HEALTH CLINIC	3	69	0.69%
SCHOOL	13	458	2.97%
SNF/ICF-MENTAL AGED		2	
SOCIAL WORKER	25	603	5.72%
SPEECH PATHOLOGIST	5	210	1.14%
TAXI		14	
THERAPEUTIC FOSTER CARE		14	
THERAPEUTIC GROUP HOME		19	
TRANSPORTATION NON-EMERGENCY		7	
Total	437*	32,058	100.00%

^{*}Case may continue from the previous or to the next fiscal year

SURS reviewed 1.36% of Medicaid Providers enrolled as June 30, 2018.

Case Resolution*

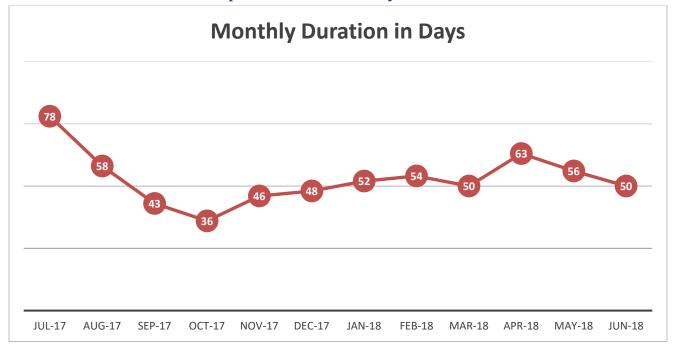


^{*}Reviews may continue from the previous or to the next fiscal year

- SURS provides education regarding error(s) and/or general Medicaid information for every case closed.
- 4. The number and aggregate dollar amount results from SURS reviews.
 - Overpayments Identified:
 - o 128 cases
 - o \$1,128,273
 - Overpayments Collected*:
 - o 478 cases
 - 0 \$644,106
 - Underpayments Identified:
 - \circ 0
 - 0 \$0.00

^{*}The number of payments reported may contain multiple payments per provider. Collections may include overpayments established in prior years.

5. SFY 18 – The annual average duration of reviews from initiation or records received to completion was 53 days.



6 & 7. Of the 437 reviewed, 128 had overpayments established. Of the established overpayments*:

- 35 cases proceeded to an Administrative Review (AR)
 - o 7 ARs were upheld
 - o 26 ARs were partially upheld
 - 2 ARs submitted additional documentation not provided during the initial review. The additional information substantiated the billing.
- 3 cases proceeded to Fair Hearing (FH)
 - o 2 FHs were upheld
 - o 1 FH was determined in favor of the provider
- 1 case continued to Board of Public Assistance (BPA)
 - o 1 BPA was upheld
- 1 case went to the Court
 - o 1 case was upheld

*Reviews may be reflected in more than one category and may be from a review that started in a previous year.

SURS advises providers to review all applicable laws, rules and written policies pertaining to the Montana Medicaid Program, including but not limited to Title XIX of the Social Security Act, the Code of Federal Regulations (CFR), Montana Code Annotated (MCA), Administrative Rules of Montana (ARM), and written Department of Public Health and Human Services (Department) policies, including but not limited to policies, contained in the Medicaid Provider Manuals, Provider Notices and Claim Jumper Newsletters.

8. Montana Medicaid does not currently have a contracted auditor.