

Goal: Getting Payments Right

Program or Activity
Medicaid

Reporting Period
Q3 2020

Change from Previous FY (\$M)

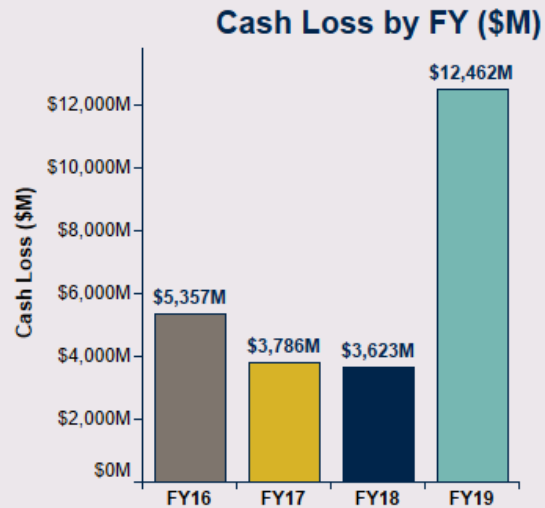
\$8,840M



Brief Program Description:

Medicaid is a joint federal/state program, administered by HHS in partnership with the states, which provides health insurance to qualifying low-income individuals and long-term care services to seniors and individuals of all ages with disabilities.

Key Milestones		Status	ECD
1	Develop mitigation strategies to get the payment right the first time	Completed	Nov-18
2	Evaluate the ROI of the mitigation strategy	On-Track	Nov-20
3	Determine which strategies have the best ROI to prevent cash loss	On-Track	Nov-20
4	Implement new mitigation strategies to prevent cash loss	On-Track	Nov-20
5	Analyze results of implementing new strategies	On-Track	Nov-20



Quarterly Progress Goals			Status	Notes	ECD
1	Q3 2020	HHS will monitor PERM Corrective Action Plan submissions and follow up with all states on their progress in implementing effective corrective actions. HHS will use lessons learned to inform areas to evaluate for fut..	On-Track	None.	Sep-20
2	Q3 2020	HHS will update the Medicaid Provider Enrollment Compendium (MPEC) in Summer 2020. The MPEC clarifies the regulatory requirements, establishes deadlines for implementation, and provides guidance for stat..	On-Track	None.	Sep-20

Recent Accomplishments		Date
1	Continued state site visits to assess provider screening & enrollment compliance and provide technical assistance. Pilots in Missouri and Iowa are ongoing and CMS has also expanded the pilot to other states.	Jul-19
2	In FY 2019, HHS began a state-specific PERM Corrective Action Plan (CAP) process to provide guidance to states on addressing findings identified through PERM reviews. HHS is working with FY17 (Cycle 3) and FY19 (Cycle 1) states to develop CAPs.	Dec-19
3	CMS provided all 50 states and DC with access to the Death Master File (DMF) via the CMS Data Exchange (DEX). All states and DC have accessed DMF. CMS has also expanded search capabilities of DMF data, allowing states to complete a bulk search.	Jul-20

Amt(\$)	Root Cause	Root Cause Description	Mitigation Strategy	Anticipated Impact of Mitigation
\$7,093M	Inability to authenticate eligibility: inability to access data	Inability to Authenticate Eligibility: Inability to Access Data resulted in overpayments of \$7,093.01 million.	Training	HHS takes a holistic approach to develop corrective actions from various perspectives. Impact on the improper payment rate may not be realized for several years, and implementing new/re..
\$5,072M	Administrative or process errors made by: state or local agency	Administrative or Process Errors Made by: State or Local Agency resulted in overpayments of \$5,071.94 million.	Training	HHS takes a holistic approach to develop corrective actions from various perspectives. Impact on the improper payment rate may not be realized for several years, and implementing new/re..
\$289M	Administrative or process errors made by: others (participating lender, health care provider, or other organization administering Federal dollars)	Administrative or Process Errors Made by: Other Party (i.e., participating lender, health care provider, or any other organization administering Federal dollars) resulted in overpayments of \$288.56 million.	Training	HHS takes a holistic approach to develop corrective actions from various perspectives. Impact on the improper payment rate may not be realized for several years, and implementing new/re..

Cash Loss - Cash loss to the Government includes amounts that should not have been paid and in theory should/could be recovered.