

RACs At-A-Glance Phase III: State Reporting Instructions

August 2016

General Information



- ◆ Section 6411(c) of the Affordable Care Act and Section 1902(a)(42) of the Social Security Act require reporting on the effectiveness of State Medicaid RAC programs.
- ◆ Medicaid RAC information reported to CMS by States will form the basis of CMS' annual Report to Congress.
- ◆ Medicaid RACs-At-A-Glance Phase III will enable State reporting and tracking of RAC program performance metrics gleaned from Medicaid RAC audits.
- ◆ States will enter information representing a fixed time period—either quarterly or annual—report. For these instructions, it will be called a “period report.”
- ◆ To add a new period report or update an already existing period report an amendment must be created from the original report.
- ◆ When creating an amendment the system will automatically replicate data contained in the previously submitted report by the States.

Portal



◆ Link to access the site:
<https://wms-mmdl.cdsvdc.com/MMDL/faces/portal.jsp>

◆ Select **Access Module** under **Medicaid Recovery Audit Contractor (RAC) Report**.

◆ When the login screen appears, enter your login credentials.

Creating an Amendment



Browse/Edit Browse Report Edit Print	History Change Report Change Log Transaction History Show Comments	Actions Submit Add Comment
Amend Create Amendment	Access User Access	

- ◆ To create an amendment select **Create Amendment** on the control panel of the original report.

Creating a Period Report



- ◆ To create a period report go to the section **Contract Info**.
- ◆ The reporting periods are located within each Medicaid RAC contract.
- ◆ To add a quarterly (or other period) report, select **Add a period report** under **Contract Period Reporting**.
- ◆ Refer to following slides for instructions.

Creating a Period Report (cont.)



Medicaid RAC Program: Contract Information

State: GU

RAC Contracts

Please add contract information for each RAC Contract the State maintains:
To add a contract, click on the "Add a RAC Contract" link below. To edit a contract, click on the "Edit Contract" link associated with the existing contract.

Contract Name	
Demonstration Purposes 2	Edit Contract

[Add a RAC Contract](#)

- 1. Contact Info
- 2. Program Info
- 3. Contract Info**

1. Select the section Contract Info

2. Select Edit Contract to enter the contract and from there you will be able to add a reporting period.

Creating a Period Report (cont.)



Contract Period Reporting:

Fiscal Year	Reporting Period	Status		
-------------	------------------	--------	--	--

[Add a Period Report](#)

3. To add a reporting period select [Add a Period Report](#).

Editing/Removing a Period Report



Contract Period Reporting:

Fiscal Year	Reporting Period	Status		
2011	Qtr 1: Oct 01 - Dec 31	open	Edit	Remove

◆ To edit an existing report select **Edit**.

◆ To delete an existing report select **Remove**.

Creating Period Report (cont.)



State RAC: Create Period Report

Create:

State: GU

Contract Name: Lorem ipsum

Fiscal Year:

Reporting Period:

- Qtr 1: Oct 01 - Dec 31
- Qtr 2: Jan 01 - Mar 31
- Qtr 3: Apr 01 - Jun 30
- Qtr 4: Jul 01 - Sep 30
- Yearly: Oct 01 - Sep 30

◆ Enter the year and select the reporting period.

◆ After all information has been added, select **Create**.

Creating Period Report (cont.)



- ◆ The RAC contract name will automatically appear in the period report.
- ◆ This page will only appear once, when the period report is first created.
- ◆ The system allows only one report for each contract per period to be created.
- ◆ An error message will appear warning you of any errors.

Creating Period Report (cont.)



State RAC: Create Period Report

Period report cannot be created with selected fiscal year and period. A report already exists for this period.

Create:

State: FL
Contract Name: Lorem ipsum

Fiscal Year:

Reporting Period:

- Qtr 1: Oct 01 - Dec 31
- Qtr 2: Jan 01 - Mar 31
- Qtr 3: Apr 01 - Jun 30
- Qtr 4: Jul 01 - Sep 30
- Yearly: Oct 01 - Sep 30

Navigation



Return to Contract Info

Managed Care

Audits Completed

Overpayments

Underpayments

Appeals

Fraud Referral

Payment Recapture

Attestation

Medicaid RAC Program: Managed Care

State: GU

Contract Name: Lorem

Fiscal Year: 2012

Reporting Period: Qtr 1: Oct 01 - Dec 31

Does RAC conduct managed care?
If yes, complete below:

How does your State conduct recovery audits for managed care arrangements (please describe)?

Character Count: 0 out of 2000

- ◆ To move to a different section in the period report, select it on the left-side navigation bar.
- ◆ To return to the general contract page – where the RAC Medical Director information is located – select **Return to Contract Info**.

Managed Care



Does RAC conduct managed care?
If yes, complete below:

How does your State conduct recovery audits for managed care arrangements (please describe)?

Character Count: 0 out of 2000

- ◆ If you select **Does RAC conduct managed care?**, the textbox below becomes active and is required.

Completing the Section



- ◆ To start entering data for a section, select **the first checkbox asking if data has been reported**. If the checkbox is selected, then at least one category has to be completed.
- ◆ Selecting the checkbox (for example) **RAC audits have been completed** will activate all the categories.
- ◆ To report data for a specific category select **the checkbox in front of it**. The selection will either activate the sub-categories or activate the associated textbox.
- ◆ If you have data for a sub-category, then select the checkbox for the **associated sub-category** and enter the data.
- ◆ If you have general data for one of the categories that has sub-categories, then select **Other** and in the textbox enter (for example) 'General outpatient care dollars'.
- ◆ Refer to next slide.

Completing a Section



Overpayments have been identified during this reporting period.

If Yes, complete section:

Inpatient Care (e.g., hospitals)

Outpatient care

Laboratory

X-rays

MRIs

CTs

Diagnostics

Mental Health Services

Other

Describe:

Character Count: 32 out of 2000

General outpatient care dollars,

Categories



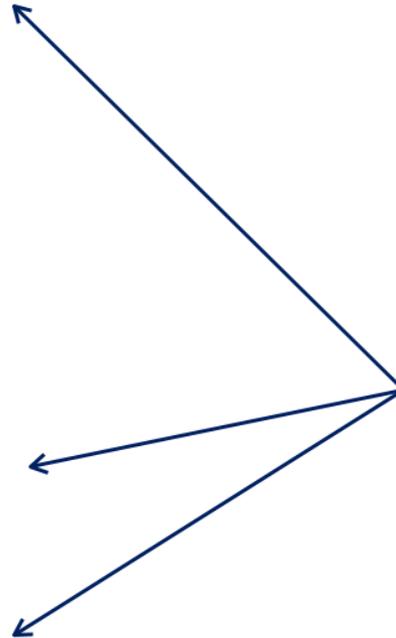
- ◆ The same Medicaid State plan service categories are located within each section:
 - ◆ Audits Completed
 - ◆ Fraud Referrals
- ◆ Overpayments Identified and Overpayments Recovered have two additional categories.
 - ◆ Medicaid Credit Balance Audits
 - ◆ Medicaid Managed Care Premium Recoveries
- ◆ The following categories have subcategories that will be auto-summed.
 - ◆ Outpatient
 - ◆ Physician services
 - ◆ Long-term care
 - ◆ Medicaid Credit Balance Audits (only for Overpayments Identified and Overpayments Recovered)
- ◆ The sum-total for all categories will be auto-summed.

Categories (cont.)



<input type="checkbox"/> Inpatient Care (e.g., hospitals)	<input type="text"/>
<input type="checkbox"/> Outpatient care	<input type="text" value="0.00"/>
<input type="checkbox"/> Laboratory	<input type="text"/>
<input type="checkbox"/> X-rays	<input type="text"/>
<input type="checkbox"/> MRIs	<input type="text"/>
<input type="checkbox"/> CTs	<input type="text"/>
<input type="checkbox"/> Diagnostics	<input type="text"/>
<input type="checkbox"/> Mental Health Services	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>
Describe:	<input type="text"/>
<input type="checkbox"/> Physician services	<input type="text" value="0.00"/>
<input type="checkbox"/> E&M codes	<input type="text"/>
<input type="checkbox"/> Physician procedures	<input type="text"/>
<input type="checkbox"/> Other professional services	<input type="text"/>
<input type="checkbox"/> Long-term care	<input type="text" value="0.00"/>
<input type="checkbox"/> Nursing homes	<input type="text"/>
<input type="checkbox"/> Mental health facilities	<input type="text"/>
<input type="checkbox"/> Institutional care	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>
Describe:	<input type="text"/>

Auto-Summed



Categories (cont.)



<input type="checkbox"/> Pharmacy (e.g., prescription drugs)	<input type="text"/>
<input type="checkbox"/> Dental	<input type="text"/>
<input type="checkbox"/> Transportation	<input type="text"/>
<input type="checkbox"/> Health Home Services	<input type="text"/>
<input type="checkbox"/> Prosthetics	<input type="text"/>
<input type="checkbox"/> Durable medical equipment	<input type="text"/>
<input type="checkbox"/> Chiropractic services	<input type="text"/>
<input type="checkbox"/> Personal care services	<input type="text"/>
<input type="checkbox"/> Freestanding birth center services	<input type="text"/>
<input type="checkbox"/> Hospice	<input type="text"/>
<input type="checkbox"/> Substance abuse services	<input type="text"/>
<input type="checkbox"/> Clinic services	<input type="text"/>
<input type="checkbox"/> Early and periodic, screening, diagnosis and treatment (EPSDT) for individuals under age 21	<input type="text"/>
<input type="checkbox"/> Rural health clinic services	<input type="text"/>
<input type="checkbox"/> Services in an intermediate care facility (ICF) for mentally retarded	<input type="text"/>
<input type="checkbox"/> Inpatient psychiatric services for individuals under age 21	<input type="text"/>
<input type="checkbox"/> State plan home and community base services	<input type="text"/>

Categories (cont.)



<input type="checkbox"/> Medicaid Credit Balance Audits	0.00
<input type="checkbox"/> Hospital	
<input type="checkbox"/> Nursing Homes	
<input type="checkbox"/> Other	
Describe:	
<input type="checkbox"/> Medicaid Managed Care Premium Recoveries	
<input type="checkbox"/> Other	
Describe:	
Total value of ...	0.00

Auto-Summed
(only for
Overpayments
Identified and
Overpayments
Recovered)

Auto-Summed

Verification



I have verified that all amounts entered for audits completed are correct.

- ◆ For Audits Completed, Overpayments Identified, Overpayments Recovered and Fraud Referral there is a verification checkbox at the bottom of the page.
- ◆ The report cannot be submitted if the section has not been verified.

Audits Completed



Audits Completed

Number of RAC audits completed during this reporting period, by provider type.

(For reporting purposes, an "audit" is a RAC financial review activity after which a provider will be notified of the results - such as through a demand letter to the provider, a notification that no demand letter will be issued, and/or a notification to the provider that an underpayment has been identified. Each such financial review activity should be reported as one "audit".

Report RAC audits as "complete" only if the provider has been notified of the audit results - such as through the issuance of a demand letter, notification that no demand letter will be issued, and/or notification that an underpayment has been identified.)

Extra Field

Total number of claims audited by a RAC during this reporting period

(Report only claims for which the respective RAC audit was completed during this reporting period.)

◆ Complete section if applicable.

◆ There is an additional field required for audits completed.

Overpayments Identified



Overpayments Identified

Dollar value of overpayments identified by a RAC during this reporting period, by provider type.

(The amount "identified" by any RAC should equal the amount that appears in the overpayment letter submitted to the provider.)

Overpayment Notifications

Total number of overpayment notifications made during this reporting period as a result of RAC audits. *(This number should reflect the number of overpayment letters that were issued to RAC-audited providers.)*

- ◆ Complete section if applicable.
- ◆ Complete the additional field requiring information on overpayment notifications.

Overpayments Recovered



Overpayments Recovered

Dollar value of RAC-identified overpayments recovered during this reporting period, by provider type.

(The amounts "recovered" should reflect dollars that were received by the state)

◆ Complete section if applicable.

Underpayments Identified



- ◆ Complete section if applicable.
- ◆ To add a category, select that underpayments have been identified and choose a category from the drop-down list.
- ◆ If this section is selected, at least one category must be added.

Underpayments

Underpayments Identified

Underpayments have been identified during this reporting period.

If Yes, select the top ranked underpayments identified. If there are underpayments identified, then at least one option must to be selected.

First ranked underpayments identified category:

Second ranked underpayments identified category:

Third ranked underpayments identified category:

Fourth ranked underpayments identified category:

Fifth ranked underpayments identified category:

Underpayments Restored



- ◆ Complete section if applicable.
- ◆ To add a category, select that underpayments have been restored and choose a category from the drop-down list.
- ◆ If this section is selected, at least one category must be added.

Underpayments

Underpayments Restored

Underpayments have been restored during this reporting period.

If Yes, select the top ranked underpayments restored. If there are underpayments restored, then at least one option must to be selected.

First ranked underpayments restored category:

Second ranked underpayments restored category:

Third ranked underpayments restored category:

Fourth ranked underpayments restored category:

Fifth ranked underpayments restored category:

Appeals



Appeals

Total number of RAC determinations for which an appeal was filed during this reporting period.
(Do not double-count any determinations that are appealed at more than one level within the State's appeal process. Any determination that was appealed on at least the first level should be categorized as an appeal.)

Total dollar amount associated with the appeals filed during this reporting period.

Total number of appeals determinations that were decided in the provider's favor during this reporting period.

Total dollar amount that was overturned on appeal during this reporting period.
(Report all dollars that were overturned on appeal during this reporting period, regardless of whether the initial appeal was filed during this reporting period or during a previous reporting period.)

Total dollar amount of RAC administrative expenses incurred by the State during this reporting period.
(This dollar value should correlate with the RAC administrative expenses that were reported by the State on Line 27 of the form CMS-64.10 that cover the same reporting period.)

Fraud Referral



Fraud Referral

Number of suspected fraud referrals the State made to law enforcement during this reporting period, due to RAC input.

(In instances where a suspected fraud referral was recommended by multiple sources - such as hotline tips or other tips, in addition to the RAC contractor's recommendation - report only the referrals for which the RAC contractor was the earliest source to notify the State that this referral be made.)

◆ Complete section if applicable.

Payment Recapture Targets



Does the State Medicaid agency have a payment recapture audit program in place, or perform data mining activities, which establish audit targets as part of an audit plan?

If yes, please provide the aggregate recovery target amount for the next federal fiscal year.

Payment Recapture Audit Target (in Millions)

- ◆ If your State Medicaid agency has a payment recapture audit program, then select the checkbox and enter the target amount.

Attestation of Report



I am (title/position) of (name of State agency)
 the State agency responsible for administering the Medicaid RAC program in (State) GU . The State submits this report in accordance with 42 CFR 455.502(c) regarding its Medicaid RAC program as established by section 1902(a)(42)(B) of the Social Security Act. I certify that the aforementioned report is a true and accurate representation of the State's Medicaid RAC program reporting elements to the best of my knowledge and belief.

- ◆ Complete textbox with information for your title/position, and State agency.
- ◆ The State name will be auto-completed.

Certifying/Digital Signing of Report



Date:	
Signature:	
Title:	<input type="text"/>
Certify/Sign:	<input type="button" value="Certify/Sign"/>

- ◆ At the bottom of the page enter your title.
- ◆ Select **Certify/Sign** to complete the period report.
- ◆ By selecting certify, the report will show the status **Closed** in the section **Contract Info**.
- ◆ Certify/sign will auto-complete signature and date.
- ◆ Once signed, the reporting period can no longer be edited.
- ◆ The Certify/Sign button is changed to **Decertify/Unsign**.

Certifying/Digital Signing of Report (cont.)



Contract Period Reporting:				
Fiscal Year	Reporting Period	Status		
2011	Qtr 1: Oct 01 - Dec 31	closed	Edit	Remove

- ◆ In Contract Info the status appears as **Closed**.
- ◆ The period report is no longer editable.

Decertifying/Digital Unsigning of Report



Date:	Nov 26, 2012
Signature:	
Title:	<input type="text"/>
Certify/Sign:	<input type="button" value="Decertify/Unsign"/>

- ◆ To open the period report to allow for edits select **Decertify/Unsign**.
- ◆ This removes the signature and date information.
- ◆ It will also change the status in the **Contract Info** section to **Open**.

Decertifying/Digital Unsigning of Report (cont.)



Contract Period Reporting:				
Fiscal Year	Reporting Period	Status		
2011	Qtr 1: Oct 01 - Dec 31	open	Edit	Remove

- ◆ In **Contract Info** the status appears as **Open**.
- ◆ The period report can now be edited.

Contact Information



- ◆ The most efficient way to report your system question is to use the **Contact** link at the bottom of any MMDL screen and complete the form that displays:

FAQs | Site Map | **Contact** | Medicaid.gov | CMS.gov

- ◆ You may also contact the Help Desk at (301) 547-4688.