Audits and Reviews of Medicaid Providers in Alaska

DOH assists providers with several different audits and reviews, requested by different agencies to measure different things. Here is a key to the common reviews that occur in Alaska.

Name of audit/review:	Agency requesting/ Authority	Scope	What is measured by this audit/review:	What is reviewed	Subcontractor conducting audit/review:	Type of provider affected:	Number of providers affected:	Timeline	Other/notes; Contact info
PERM: Payment Error Rate Measurement	CMS: Centers for Medicare and Medicaid Services Improper Payment Information Act	Nation-wide (federal) Medicaid	States' rate of payment errors within the Medicaid and Childrens Health Insurance Prorgram (CHIP or Denali Kid Care)	Review of Provider's Medical and Billing Records, State provider enrollment and data processing and recipient eligibility	Empower AI is the Review Contractor Booze Allen Hamilton is the Eligiblity Review Contractor	All providers that bill Alaska Medicaid	The Fee For Service sample size is 389 claims for Medicaid and 327 claims for Denali Kid Care (DKC)	every 3 years. Alaska is currently undergoing	DOH Medicaid Program Integrity, 907-334-2413; https://health.alaska.gov/C ommissioner/Pages/Progra mIntegrity/perm/default.as px
Unified Program Integrity contractor (UPIC) audits	CMS: Centers for Medicare and Medicaid Services	Nation-wide (federal) Medicaid	Medicaid Overpayment Identification	Provider claims based on reviews by CMS review contractor	Qlarant Integrity Solutions	All Alaska providers that bill Medicaid	Varies from year to year	Annually, generally covering 2- 3 years of claims data	DOH Medicaid Program Integrity 907-269-0361
Disproportionate Share Audit (DSH)	CMS: Centers for Medicare and Medicaid Services 42 CFR 455 Subpart D	Nation-wide (federal) Medicaid	Appropriateness of DSH Payments	States' processes; Provider documentation	Myers and Stauffer LC	Hospitals receiving state DSH payments	Varies from year to year	,, , , , , ,	DOH Office of Rate Review 907-334-2466
Myers and Stauffer (AS 47.05.200)	Alaska State Legislature, via AS 47.05.200	Statewide Medicaid	Improper Medicaid payments	Provider Claims		All Alaska providers who bill Medicaid more than	50 per year	Annually covering 1 calendar year	DOH Program Integrity 907- 269-0361
	Federal through 2 CFR 200, State of Alaska through 2 AAC 45.010 and DOH through 7 AAC 78.230	Grantees subject to Single Audit requirement and Home and Community based waiver providers	Compliance with applicable laws, regulations and grant provisions, accuracy of financial reporting.		Independent CPA firms	Providers that are grant funded and HCBW Providers	Most grant funded and HCBW proviers	single audit threshold. Otherwise, biennially.	DOH Grant Audit Manager, Single Audit Representative. 907-465- 3121. Office of Rate Review 907-334-2466
Cost report audit	Office of Rate Review 7 AAC 150.200	Desk audit - Medicaid	Facility cost and statistics.	Medicare cost report/Medicaid forms.	None	Facilities (nursing homes, long-term care hospitals, etc)	All hospitals, nursing homes and FQHC's	1 to 4 year audit cycle.	DOH Office of Rate Review 907-334-2466
Surveilance and Utilzation Review (SURS) audit	Health Care Services Quality Assurance	Statewide Medicaid	Medicaid payments, specifics vary by review	Provider Claims	Health Care Services Quality Assurance	All Alaska Medicaid providers	28 per quarter	varies	DOH Division of Health Care Services 907-334-2400
Focused review or audit by DOH Medicaid Program Integrity	DOH 7 AAC 160.110	Statewide Medicaid	Medicaid payments, specifics vary by review	Varies by engagement	None	All Alaska Medicaid providers	All providers have the potential for being selected, no predetermined number	varies	DOH Medicaid Program Integrity 907-269-0361

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Medicaid Provider Self-	Alaska Legislature, AS	Reporting year 2024 audits	Improper Medicaid	Appropriateness of	Providers may elect to	All Alaska Medicaid	All Medicaid providers	Providers must conduct a	DOH Medicaid Program
Audits	47.05.235; 7 AAC 160.115	cover either 2021 or 2022	Payments. All identified	Medicaid payments	subcontract for this service	providers		self-audit once every two	Integrity 907-269-0361
Various Licensure,	DOH	Facilities & Agencies	Compliance with program	Provider policies and	None	All Facilities & Agencies	Only if applicable	Varies	State of Alaska, DOH
Certification, Grant Reviews		required to be licensed or	standards	procedures, personnel files		required to be licensed or			
		certified; all DHSS Grantee		to ensure appropriate staff		certified; all grant DOH			
		agencies		qualificatons,		agencies			

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